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40 Patient Groups Urge HHS to Improve Drug Affordability through Standard Benefit Plans

Advocates also Call on HHS Secretary Becerra to Ensure Drug Rebates Clearly Reported

WASHINGTON, DC... The **HIV+Hepatitis Policy Institute** ([HIV+Hep](#)) and **American Autoimmune Related Diseases Association** ([AARDA](#)), along with 38 other patient organizations, filed [comments](#) earlier this week with the U.S. Department of Health and Human Services (HHS) addressed to Secretary Xavier Becerra that urge HHS to improve the affordability of prescription drugs for patients in the private insurance market through Standard Benefit Plans. HHS has stated that it will bring back such plans beginning in 2023 and sought input on their design.

In the [letter](#), the patient advocates urge HHS to **require insurers to offer at least some plans that: 1) Establish Nominal Cost-Sharing Caps for Prescription Drugs, and 2) Include First Dollar Coverage of Prescription Drugs.**

“Patients today face significant prescription drug affordability challenges that have only grown worse due to the cost of medications along with insurance benefit design, including high deductibles and high patient cost-sharing often in the form of co-insurance. This negatively impacts patient adherence and leads to worse health outcomes and increased costs across the healthcare system,” say the organizations in the letter to Secretary Becerra.

The letter points out that standard plan options have successfully been implemented in several states across the country. States have also established copay caps for prescription drugs, but often patients must first meet a high deductible. In order to help patients afford their drugs, the groups urge that both copays and the deductible be addressed in any future standard plan option requirement.

Additionally, last week, **HIV+Hep** and **AARDA** led another patient community [letter](#) commenting on implementation of a new law that requires HHS to collect data on prescription drug costs. In that [letter](#), signed by 59 groups, the groups urged HHS to ensure there is proper accounting of rebates by pharmacy benefit managers.

The patient groups wrote, “We hope the collection of rebate information will create greater drug price transparency and help establish a system in which patients who rely on prescription drugs can directly benefit from the rebates that they generate.”

They also wrote, “PBMs, which are frequently not regulated at the state level, have successfully and artfully tried to escape any attempt to report on how the billions in rebates and other fees they collect are distributed to plans, patients, or to their profits. . . . We urge you to resist their attempts to limit transparency and move forward with these statutory required reporting without further delay.”

In both letters, as a way to improve patient affordability of drugs, the groups emphasized the importance of HHS issuing regulations that prohibit the practice by insurers of not counting copay assistance towards patient out-of-pocket costs and their deductible.

You can read the full letter on standard plan options [here](#).

You can read the full letter on Prescription Drug Cost data collections [here](#).

About the HIV+Hepatitis Policy Institute (HIV+Hep)

The HIV+Hepatitis Policy Institute is a national, nonprofit organization whose mission is to promote quality and affordable healthcare for people living with or at risk of HIV, hepatitis, and other serious and chronic health conditions. For more information, visit hivhep.org.

About the American Autoimmune Related Diseases Association (AARDA)

The American Autoimmune Related Diseases Association (AARDA) is dedicated to the eradication of autoimmune diseases and the alleviation of suffering and the socioeconomic impact of autoimmunity through fostering and facilitating collaboration in the areas of education, public awareness, research, and patient services in an effective, ethical, and efficient manner. For more information, visit www.aarda.org