51 Patient Groups Support Biden Administration Plans to Limit Cost-sharing for Prescription Drugs

But Call on HHS to Ensure Copay Assistance Counts to Improve Patient Affordability

WASHINGTON, D.C... The HIV+Hepatitis Policy Institute and the Autoimmune Association, along with 49 other patient organizations, submitted comments to the U.S. Department of Health and Human Services (HHS) on the Notice of Benefits and Payment Parameters (NBPP) for 2023 proposed rule. The sign-on letter applauds the Biden administration for efforts to make drugs more affordable for patients by requiring insurers on the federal exchange to offer standardized plans with copays rather than co-insurance. However, the groups urge HHS to make improvements to the standard plans in the final rule by increasing the number of drugs not subject to a deductible and lowering some copay amounts.

Even with the standardized plans, copay assistance will still be needed, especially for those who receive their insurance through their employer, and the groups urge HHS to ensure copay assistance counts towards beneficiary deductible and out-of-pocket maximum obligations.

“We are extremely disappointed that the proposed rule does not require issuers and PBMs to count copay assistance for prescription drugs towards beneficiary deductible and out-of-pocket maximum obligations, thus allowing the continuation of copay accumulator adjustment programs,” wrote the organizations in the letter to Secretary Becerra. “We continue to urge CMS to address this critical issue that is increasing patient costs for prescription drugs, which runs counter to the goals of the Biden administration to increase patient affordability.”

Additionally, in the letter addressed to HHS Secretary Xavier Becerra, the patient advocates include as part of their comments the following:
• strong support of regulations that address discriminatory plan design and a warning to insurers and PBMs that engage in adverse tiering of prescription drugs;

• close a loophole that insurers and PBMs are engaged in that designate certain covered drugs as non-essential health benefits by enforcing ACA cost-sharing requirements; and

• commend the Biden administration for putting a greater focus on health equity

In the letter, the patient advocates note that many of the provisions in the proposed rule further the goal of achieving an equitable healthcare system.

“We believe that several proposals contained in the proposed rule, including the establishment of standardized plans and non-discrimination regulations, will better achieve health equity across the country,” patient groups wrote. “However, allowing insurers and PBMs to continue to not count copay assistance for prescription drugs will increase beneficiary cost-sharing and exacerbate inequalities in healthcare. Since it mainly impacts beneficiaries with chronic conditions who rely on prescription drugs, if you follow the rules you have laid out, it constitutes discrimination in healthcare.”

In addition to the HIV+Hepatitis Policy Institute and the Autoimmune Association, signatories to the letter include CancerCare, Color of Crohn’s and Chronic Illness, Lupus Foundation of America, National Viral Hepatitis Roundtable, and Susan G. Komen.

You can read the full letter here.

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About the HIV+Hepatitis Policy Institute
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 Autoimmune Association
The Autoimmune Association 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 autoimmune.org.