



February 24, 2025

Sen. Mike Jacobson, Chairperson
Banking, Commerce and Insurance Committee
Nebraska Legislature
1445 K Street
Lincoln, NE 68508

Re: Written Testimony in Support of LB158 – Ensure All Copay Assistance Counts

Members of the Banking, Commerce and Insurance Committee:

The **HIV+Hepatitis Policy Institute**, a leading organization advocating for equitable and affordable healthcare for individuals living with or at risk of HIV, hepatitis, and other chronic health conditions, strongly supports **LB158**. This vital legislation ensures that health insurers accept and count payments made on behalf of patients toward their deductibles and out-of-pocket maximums.

The Harmful Impact of Copay Accumulators

Copay accumulators are harmful policies increasingly implemented by insurers, employers, and pharmacy benefit managers (PBMs). Under these policies, copay assistance provided by drug manufacturers does not count toward patients’ cost-sharing obligations, such as deductibles and out-of-pocket maximums. While patients can initially use the assistance to afford their medications, they often face unexpected and substantial costs later in the year when the assistance runs out, leaving them unable to pay for their prescriptions.

According to the AIDS Institute, in Nebraska, 3 out of 5 health plans offered in the individual marketplace for 2025 explicitly state in their plan documents that copay assistance may not be counted toward patients’ cost-sharing obligations. This practice leaves patients in a precarious situation: insurers collect the manufacturer’s copay assistance, but the patient receives no credit toward their deductible or out-of-pocket maximum. Later, when patients return to refill their medications, they are often hit with unaffordable copays—sometimes thousands of dollars—effectively forcing them to pay twice. This “double-dipping” practice unfairly burdens patients and jeopardizes their ability to adhere to life-sustaining treatments.

Why LB158 Is Essential

By passing LB158, Nebraska will join 21 other states, the District of Columbia, and Puerto Rico in protecting consumers purchasing insurance on the private market. This legislation ensures that

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copay assistance counts toward cost-sharing obligations, preventing patients from facing insurmountable financial barriers to their medications.

For people with HIV, hepatitis, and other chronic conditions, reliable access to medication is critical. Individuals with HIV and hepatitis B require lifelong drug regimens, while those with hepatitis C can be cured in as little as 8 to 12 weeks. Yet high deductibles and cost-sharing requirements often make these treatments unaffordable, even for insured patients. Copay assistance is a lifeline, particularly in today's challenging economic climate, where inflation and rising costs are straining household budgets.

When patients are forced to forego their medications due to high costs, the consequences are severe—not just for individual health outcomes, but also for public health and healthcare system costs. Policies that limit access to copay assistance exacerbate these challenges, disproportionately affecting those who are already vulnerable. **LB158** represents an essential safeguard against harmful insurer practices, ensuring equitable access to life-saving treatments for Nebraskans.

If you have any questions or need any additional information, please do not hesitate to reach out to our Government Affairs Manager, Zach Lynkiewicz, at zlynkiewicz@hivhep.org.

Thank you for your consideration and leadership on this critical issue.

Sincerely,



Carl E. Schmid II
Executive Director

cc: **Banking, Commerce and Insurance Committee**

Sen. Mike Jacobson, Chairperson
Sen. Bob Hallstrom, Vice Chairperson
Sen. Eliot Bostar
Sen. George Dungan
Sen. Brian Hardin
Sen. Merv Riepe
Sen. R. Brad von Gillern
Sen. Dave Wordekemper