

July 23, 2021

The Honorable Xavier Becerra Secretary U.S. Department of Health and Human Services 200 Independence Avenue, SW Washington, D.C. 20201

Re: Docket No.: CMS-9905-NC - Request for Information Regarding Reporting on Pharmacy Benefits and Prescription Drug Costs

Dear Secretary Becerra,

On behalf of the Alliance for Patient Access (AfPA), thank you for the solicitation of comment requesting information on reporting of pharmacy benefits and prescription drug costs. This letter focuses on the issue of how to treat copay coupons and copay accumulator programs. Copay coupons are essential for patients to ensure they receive the treatments that they need. Patients should continue to retain access to these assistance programs, and the payment made using them should be counted towards that patient's deductible and when calculating their out-of-pocket maximum.

About AfPA

Founded in 2006, AfPA is a national network of policy-minded health care providers who advocate for patient-centered care. AfPA supports health policies that reinforce clinical decision making, promote personalized care and protect the physician-patient relationship. Motivated by these principles, AfPA members participate in clinician working groups, advocacy initiatives, stakeholder coalitions and the creation of educational materials.

Copay Accumulators

Innovative medical treatments can be costly and leave patients with high out-of-pocket expenses. At times, corporations will distribute copay coupons for some of their more expensive medications that do not have approved alternatives, helping patients gain access to the treatments that they need. Access to this form of copay assistance can be essential in patients' ability to obtain these costly medications that often have high coinsurance. However, in recent years, some health plans have instituted practices in which patient payments made using copay coupons no longer count toward a

Alliance for Patient Access 2020 K Street NW | Suite 505 Washington, DC 20006 patient's deductible or out-of-pocket limit. These practices are known as copay accumulator programs. These programs can increase costs for patients, lead to patients switching medications based on expense, lead to medical abandonment, or leave patients with unanticipated medical bills of hundreds or even thousands of dollars. Additionally, as explained in the <u>Copay Accumulator Policy</u> <u>Paper</u> by the Institute for Patient Access, these changes can put patients at risk for re-emerging symptoms and new side effects and lead to higher costs to the healthcare system by increasing hospital and emergency room visits.

Formulary designs that focus on a cost-sharing approach, especially for more expensive treatments, have been increasing in recent years. In 2017, more workers (46%) paid coinsurance for specialty tier treatments rather than paying a copay (45%).¹ Unfortunately, not everyone can afford to pay high coinsurances for these treatments. Patients rely on programs, including copay coupon programs, to afford their prescription drug expenses. Most drugs that have copay coupons available do not have lower-cost generic alternatives, and for the few that do, the alternatives might not fit the patient's specific disease state, or the patient may have already tried and failed the alternative treatment.

We applaud the Biden administration and HHS for their willingness to address pressing issues in the healthcare <u>space</u>, and we believe this issue to be another opportunity to improve patient access and focus on patient cost. Copay assistance, such as copay coupons, is essential in patients receiving these treatments and we urge HHS to ensure patients retain access to these resources and require insurers to include all payments made by or on behalf of patients towards their yearly deductible.

As a first step in this process, we encourage you to implement a policy that would compel insurers to provide information regarding copay assistance and their usage of copay accumulator programs in the plans that they offer.

Conclusion

With the availability of copay assistance programs, such as copay coupons, patients can worry less about how they are going to afford their treatments and health care providers can feel comfortable knowing that their patients are receiving the treatments determined to be the best for them.

AfPA recognizes the complexity of the issues facing HHS and commend the agency for taking steps to improve the healthcare system. We ask that you limit the insurers' ability to implement copay accumulator programs.

¹ Drug Channels Institute analysis of *2017 Kaiser/HRET Employer Health Benefits Survey*, 2017. https://www.drugchannels.net/2017/11/employer-pharmacy-benefits-in-2017-more.html