How do you explain co-pay accumulator programs to people?

Here we are talking about a program that impacts patients who use a manufacturer-provided card to help cover their co-pay. Co-pay accumulator programs are not as familiar a concept as, say, prior authorization or step therapy.

The name makes it difficult too. Patients see the word “program” and assume that is a good thing for them. I just explain that, with these programs, co-pay assistance will help patients afford their medication initially but will not count any of that amount toward the patient’s annual deductible.

Can co-pay accumulator programs cause negative health outcomes for arthritis patients?

Absolutely. If patients cannot access effective treatment, they cannot function normally. It can worsen both physical pain and mental strain. Many patients report symptoms of depression and other mental health conditions due to lack of care.

In the arthritis community, it all goes back to adherence. If patients must ration funds or medication, or switch treatment for non-medical reasons, it leads to pain and loss of function in everyday life. Joint damage and joint destruction lead to costly surgeries and ER visits.

When patients are kept stable, their quality of life is better, and the cost of long-term care is much more manageable.

Are patients more aware of these programs than they used to be?

There is still some element of surprise. The fine print is hard to find within health plans, and insurers often bury information about accumulator programs in confusing jargon. It also doesn’t help that there is not one uniform name for co-pay assistance or accumulator programs. Patients are not even aware of what they should be looking for.

In some cases, patients show up to the pharmacy counter, and the pharmacist must tell them they still owe hundreds or thousands of dollars toward their deductible.

What resonates with policymakers on the topic of co-pay accumulator programs?

Patient stories. Policymakers want to see the impact on their constituents. They need to hear about the financial burden of these programs. They need to know their constituents are having to dig into savings or forgo essentials in order to pay the huge bill they face when their assistance runs out.

Policymakers are representing their communities, and they know that, if health care policy is failing the American people, it’s their job to listen.

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