

# PENNSYLVANIA

## Copay Assistance Diversion Programs

### Copay Accumulators 101

Millions of Americans endure long and expensive medical journeys to get the medications that best treat their needs. Copay accumulator adjustment policies and copay maximizer programs are schemes from insurers and pharmacy benefit managers (PBMs) that prevent patient assistance funds from counting toward a patient's out-of-pocket maximums, or deductibles. These policies undermine patient access to life-saving prescription drugs, making it more difficult for people living with serious, complex, chronic illnesses to adhere to a treatment plan.

### Findings for Pennsylvania 2023 Marketplace Plans

A new report by The AIDS Institute shows that **7 out of 11** plans in Pennsylvania have copay accumulator adjustment policies that harm vulnerable patients.

- These plans have copay accumulators: Capital Advantage Assurance, Keystone Health Plan East (Independence Blue Cross HMO), QCC Insurance Company (Independence Blue Cross PPO), UPMC Health Options, UPMC Health Coverage, Oscar Health, Cigna+.  
+Plan utilizes a copay maximizer or variable copay program.
- These plans do not have copay accumulators: Geisinger Health Plan, Geisinger Quality Options, Highmark, Inc., PA Health and Wellness (Ambetter).

Pennsylvania has received a **D** for failing to protect patient assistance because **63.6%** of marketplace plans have copay accumulator adjustment policies.

### Need for State Action

Pennsylvania can join 16 other states to protect residents from these harmful practices by insurance companies and PBMs.

- AR, AZ, CT, DE, GA, IL, KY, LA, ME, NC, NY, TN, VA, WA, WV, and Puerto Rico have enacted legislation that requires insurers to count third party payments, including copay assistance, toward patient cost-sharing limits.

The All Copays Count Coalition suggests the following bill language for Pennsylvania to combat this problem: "When calculating an enrollee's overall contribution to any out-of-pocket maximum or any cost sharing requirement under a health plan, an insurer or pharmacy benefit manager shall include any amounts paid by the enrollee or paid on behalf of the enrollee by another person."



For failing to  
protect vital patient  
assistance



THE AIDS INSTITUTE

Read the full report: [theaidsinstitute.org/copays](https://theaidsinstitute.org/copays)