Dean: How would someone know that they are on one of the programs? Are they told?

Randi: Some employers or plans will send a letter directly to the enrollee, but most do not. You must read your plan design to find out if you are subject to the copay accumulator. Plans call it by different names, so be sure you look for any language in your plan that talks about your assistance not being counted towards your deductible. You can call and ask Cascade to tell you if they have checked your benefit design and they should also be able to explain your benefits to you.

Dean: I hear that many bleeding disorder organizations are advocating against copay accumulators. Can you tell me a little bit about that?

There are currently over 60 patient groups working together on a national coalition to ban this practice in each state. Bleeding disorder chapters/foundations are working on bringing stories together, so please reach out.

In Michigan HB4353, has passed the House and is working its way through the Senate. To learn more contact, Sarah Procario, Advocacy and Communications Manager at the Hemophilia Foundation of Michigan (sprocario@hfmich.org).

In Ohio, HB135 was unanimously passed by the Health Committee, but hasn't made it to the House Floor yet. As we understand it, Indiana is still working to find a sponsor to re-introduce the bill this year. You can contact your local chapter for more information. Patient stories help ensure this issue is brought to our lawmakers.

Dean: Thank you for sharing this important information Randi. It's important to inform Cascade and other advocates, including your local Hemophilia Foundation, if you are affected by these changes.

Disclaimer: This newsletter provides general information for educational purposes only and is not a substitute for a patient obtaining specific insurance program or plan information from an insurer. Cascade does not make any representations or warranties regarding the accuracy, or completeness of the concepts discussed in this newsletter.

Language assistance services are available free of charge. Call: 1-800-996-2575.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-996-2575 (1-800-996-2575) يولااتلاا مقرلااب لااصتالاا ءاجرلاا . أناجم كل قرفوتم قيوغللاا قدعاسملااو قمجرتلاا تالمدخ زإف ،قيبرعلاا ملكتت تنك اذا تظراله



517 West William Street Ann Arbor, MI 48103

Hours: M-F 9:00 am - 5:00 pm Available for after hours emergencies

Phone: 734-996-3300 800-996-2575 Fax: 734-996-5566

www.CascadeHC.org info@CascadeHC.org

Officers

Dean Hindenlang, MPA, MS (President)
William Sparrow (Vice President)
Elizabeth Sandon-Kleiboer (Secretary)
John Priestap (Treasurer)

Jim Mohnach (Executive Committee Member)

Directors

Judith Anderson, MD
Mike Callaghan, MD
Laura Carlson, RN
John Fargo, DO, FAAP
Susan Lerch (Executive Director, HFM)
Jim Munn, RN, MS
Chris Roberson
Stephanie Raymond (Executive Director, Cascade)



Emerging Insurance Trends

part 1



Dean Hindenlang, MSA Board President

Most of us never thought we would become experts on a bleeding disorder. Even fewer of us thought we would have to make the tough decisions about what sports are safe to play, how much factor to pack for a family vacation, or what it takes to stay up-to-date with our ever-changing insurance policy. Unfortunately, managing hemophilia or another bleeding disorder means that we must also manage the intricacies of insurance premiums, copays, deductibles, in-network, out-of-network providers and whether or not we can see the same doctor from year to year. It's all a bit too much!

As insurance companies, access to doctors, medical treatments, and new treatment options change, so too must our knowledge of how best to manage the financial aspects of our bleeding disorder. Even more stressful are the changes to billing practices that are not always made known to us until we see our first bill or explanation of benefits (EOB).

I recently sat down with Randi Clites, Patient Advocate from Ohio, to learn more about an emerging trend in insurance billing called "Copay Accumulator" programs. In our next issue, "Emerging Insurance Trends Part II", we'll tackle "Alternative Funding", another insurance trend designed to save insurance companies money.

These innocent sounding trends can have a significant impact on our finances. Now is a good time to learn more about new insurance practices, before you find out that it has impacted you too.

Thanks for taking a moment to read our important interview,

Dean

Cascade Hemophilia Consortium Mission

The Purpose for Which the Corporation is Organized

To enhance the system of care for people with bleeding disorders and related complications, by assuring the lowest possible price for the full range of treatments, HIV and hepatitis related therapies and other medications available to treat their disease; to provide access to these medications for those without insurance or inadequate insurance coverage; to support the comprehensive hemophilia treatment centers in treating and educating consumers and their families so they may become knowledgeable and proactive in managing their own care; to fund research.

Cascade Staff

Stephanie Raymond, BA Executive Director

Michael Altese, PharmD Pharmacy Director

Ted Beimel, PharmD Pharmacist

Rebecca Blumenfeld Billing Specialist

Devin Bromley, CPhT, RPhT Chief Pharmacy Technician

Jordan Burkey, CPhT, RPhT Pharmacy Technician

Susan Carlini, BSA Senior Accountant

Anne Dimitry, PharmD Pharmacist

Gail Donehue Operations Assistant

Roxana Dumitrache, PharmD Pharmacist

Kirk Haddas, PharmD Pharmacist

Kristina Halcomb, CPhT Pharmacy Technician II

Colleen Joiner, LMSW
Clinical Care, Education & Outreach Manager

Paul Kasdorf, BS Billing Specialist

Melissa Laustroer, BA
Director of Operations & Human Resources

Amy Luczak, PharmD Pharmacist

Mary McClure
Office Manager

Joanna Pangilinan, PharmD, BCOP Compliance Officer

Chelsea Seal, BA Finance Director

Stephanie Sibrel, BSN RN
Clinical Care, Education & Outreach Manager

Debbie Whelan, LMSW Clinical Care Manager

Megan Urie, BS, MBA
Compliance & Patient Care Coordinator

- October 2021 -

Emerging Insurance Trend

Copay Accumulators

Dean Hindenlang Interviews Randi Clites







Randi Clites Patient Advocate, Ohio

Copay Accumulators

Dean: Not many people have heard about copay accumulators. What is a copay accumulator exactly?

Randi: Copay accumulator programs are now in most employer sponsored, ACA, or individual plans. They are programs designed to not count your patient assistance from most third-party payers toward your deductible or out of pocket maximum.

For example, if you have a \$5,000 deductible and you qualify for a maximum of \$15,000/year in copay assistance from the manufacturer, that assistance is sent directly to your provider. The copay program is intended to cover your deductible and copay costs, but if you are on a copay accumulator program, that money is not applied to those deductibles. You still get your delivery as expected but when the copay program runs out, you'll still owe your remaining deductible. Please take a look at the sample to the right.

Dean: Why is it important to know if your insurance plan is putting you on a copay accumulator program? What does that mean for someone in the bleeding disorder community?

Randi: It is extremely important that bleeding disorder patients know if their plans include a copay accumulator. In March 2021, The AIDs Institute released a report on copay accumulators that reviewed plans across the country. In Ohio, Indiana, and Michigan, 21 commercial plans were investigated to see if they had a copay accumulator; all but two had copay accumulators.

If you know your plan includes a copay accumulator at the beginning of the plan year, you can be better prepared for when the program turns to you for the deductible. You could use that time to look for additional assistance programs or save money to meet your deductible. Most plans cannot exclude government programs from the accumulator, so if you have a child, you may qualify for assistance from your state's children with Medical or Special Needs program, please reach out to your HTC Social Worker or local chapter with questions.

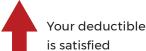
Simplified Copay Accumulator Examples

- 1 Your annual deductible: \$5,000
- 2) Total cost for the bleeding disorder product: \$20,000/month
- 3 Maximum amount allowed on copay program per year: \$15,000



Without a Copay Accumulator

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Final Pay
Co-pay Program Pays	\$5K	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,000
Insurance Company Pays	\$15K	\$20K	\$235,000										
Your Remaining Deductible	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
You Owe	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$ 0



With a Copay Accumulator

	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Final Pay
Co-pay Program Pays	\$5K	\$5K	\$5K	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$15,000
Insurance Company Pays	\$15K	\$15K	\$15K	\$15K	\$20K	\$220,000							
Your Remaining Deductible	\$5K (resets)	\$5K (resets)	\$5K (resets)	\$5K	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
You Owe	\$0	\$0	\$0	\$5K	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$5,000



The copay assistance is not applied to your deductible amount. Once copay is depleted, you still owe your deductible or what's left of your deductible at that point.