




Seeing accumulator adjustment programs through patients' eyes:

75% say their adherence would suffer

ConnectiveRx surveyed 503 patients being treated for serious, chronic conditions that frequently require specialty medications. Despite being actively engaged in the healthcare system, survey results show that these patients do not understand copay accumulator adjustment programs well. Furthermore, accumulators are likely to have negative impacts on patients and brands.

Key findings:

1. Only 25% of patients recognized the term “accumulator adjustment” unaided 
2. 66% of respondents consider such programs to be unfair to patients 
3. 75% of patients say accumulator adjustments would make it harder for them to adhere to their medications 

Introduction

Pharmacy Benefit Managers' (PBMs) “accumulator adjustment programs” are leading to a new kind of access challenge for patients. In these programs, the dollars paid by a manufacturer sponsored copay program are NOT applied to the patient’s deductible requirements, so that after a patient has exhausted the copay program benefits there may still be a large portion of the patient’s insurance deductible remaining to be paid. In such a case, the patient’s insurance would cover none of the cost of the medication, leaving the patient responsible to pay the entire cost out of their own pocket until the deductible is met. [For more background on accumulator adjusters, see the ConnectiveRx white paper, “Copay accumulator adjustment programs: A new kind of sticker shock.”]

Adam Fein, PhD, CEO of Drug Channels Institute, believes accumulator adjustment programs may create “massive adherence problems” as ballooning out of pocket (OOP) costs threaten an increasing number of patients.¹ This doomsday scenario, while worrisome for all patients impacted, would be especially distressing for those who are using complex biologics. These patients with serious chronic conditions are at particular risk of medication abandonment for many reasons, including affordability. Moreover, the system-wide impact of therapy drop off among these patients is potentially serious and costly due to the nature of their conditions. Despite these threats to patients and the

healthcare system, one observer estimates that by the end of 2018, 50% of self-insured employer plans will be employing accumulator adjustment programs.²

In June 2018, ConnectiveRx surveyed patients to learn their opinions on accumulator adjusters.

Survey Background

In order to quantify patients’ perspectives on copay accumulator adjustment programs, the ConnectiveRx market research team conducted a survey of 503 patients (or their caregivers) who had chronic disease likely to be treated with specialty medication(s).

The study had two primary objectives:

1. Assess patient knowledge (unaided and aided) of “accumulator” insurance products
2. Once the accumulator adjustment concept is explained, assess its potential impact:
 - On medication adherence
 - On patients’ perceptions of payers and sponsors (employers)

To participate, patients must have used a copay coupon at least once in the last 12 months. Chronic diseases targeted included cancer, Crohn’s disease, growth hormone disorder, hepatitis C, HIV, multiple sclerosis, psoriasis, pulmonary arterial hypertension and rheumatoid arthritis. These patients have

Figure 1: Unaided recognition of the term “accumulator adjustment”



Source: ConnectiveRx Patient Accumulator Survey, June 2018. n = 503
Q: Have you heard of the term “accumulator adjustment” used by PBMs or health plans?

substantially greater than average exposure to the health care system, and therefore would be expected to be among the most educated about the healthcare system and how to use it to manage their care.

Survey Results

1. Recognition of “accumulator adjustments” is low. As shown in Figure 1, despite having experience in managing chronic conditions, only 25% of respondents recognized the term “accumulator adjustment” unaided. Even after reading an explanation of the term, only 42% recalled hearing of these programs by this or any other name.

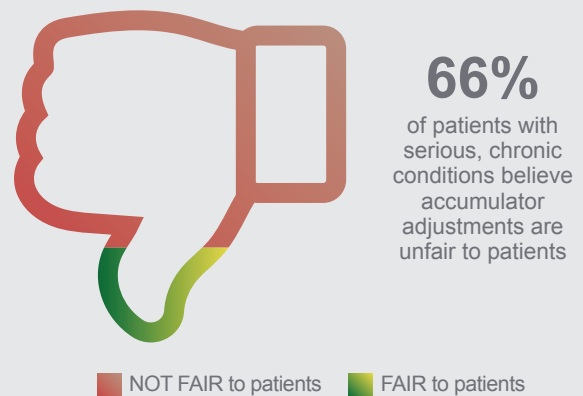
Explanation of accumulator adjustment: An “accumulator adjustment” is a tool used by health plans (for prescription benefits) to make sure the value of the copay card or coupon does NOT count towards a patient’s deductible or out of pocket maximum. As a result:

- A patient will take longer to meet his / her health insurance plan deductible
- It takes longer for insurance to help pay for prescriptions

For a patient using a copay card or coupon to help pay for prescription medication, the savings benefit may run out before the patient’s deductible is met. If this happens, a patient would be required to pay the entire deductible balance to cover prescription costs before insurance coverage kicks in to help cover costs.

2. Patients consider accumulator adjustment programs to be unfair. After reading an explanation of accumulator adjusters (see explanation below left), 66% of respondents said they consider such programs to be unfair to patients (Figure 2).

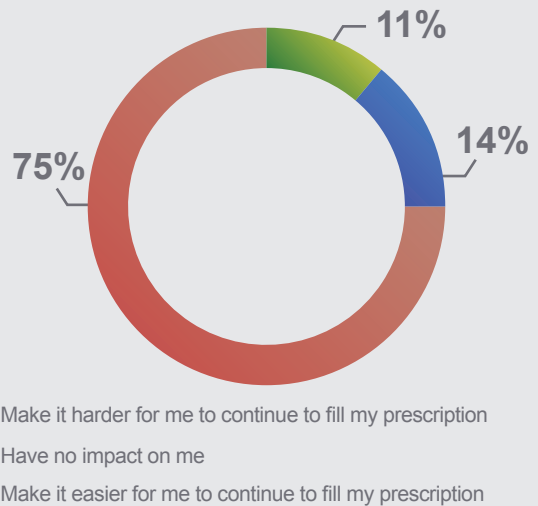
Figure 2: Patients’ assessment of accumulator adjustment fairness



Source: ConnectiveRx Patient Accumulator Survey, June 2018. n = 503
Q: Based on this description, do you think an accumulator adjustment mechanism is fair to patients?

3. Accumulator adjusters will likely reduce adherence for many patients. Three-fourths (75%) of respondents say accumulator adjustments would make it harder for them to adhere to their medications (Figure 3). In the end, they see accumulator-induced sticker shock as a real threat.

Figure 3: Anticipated impact of accumulator adjustment program on adherence



Source: ConnectiveRx Patient Accumulator Survey, June 2018. n = 503
Q: Overall what impact do you feel an accumulator adjustment program would have on you, if it was implemented by your plan?

One patient put it this way

“It seems like one more way to make it take patients longer to meet their deductible. It’s not fair, if they are able to find a way to save some it should count towards their amount spent. It’s not right at all.”

One more important take-away from this study: For more than 60% of patients, the implementation of an accumulator adjustment program would negatively impact their perception of health plan and employer.

Discussion

Patients with serious chronic conditions rely on manufacturer support to cover a significant portion of their drug copays until their annual deductibles have been met. Lower patient OOP costs boost adherence, which can produce better clinical outcomes and lower overall healthcare costs. By raising patients’ OOP costs, accumulator adjustment programs can lead to therapy drop off, which can result in poor clinical outcomes and excess financial impact to the healthcare system. In the end, it seems that accumulator adjustment programs may have the most negative consequences on the most vulnerable patients.

The ConnectiveRx team works closely with manufacturers to estimate their exposure to accumulator adjustment programs, and develop and execute solutions that help patients get on and stay on their specialty and branded medications.

Based on the results of this survey, we recommend four risk mitigation steps:

1. Educate your patients regarding accumulator adjustment programs to help them identify whether or not they are being affected
2. Assess and monitor the extent to which accumulator adjustment programs are impacting your patients overall and your costs
3. Consider ways to enhance your copay program to make it less vulnerable, including changing business rules
4. Contact ConnectiveRx to learn more

For more information, please visit [ConnectiveRx.com](https://connectiverx.com)

References:

1. Fein, A. Drug Channels Institute. Copay Accumulators: Costly Consequences of a New Cost-Shifting Pharmacy Benefit. January 3, 2018. Accessed July 24, 2018.
2. Silverman E. Which drug makers are most vulnerable to a new cost-shifting maneuver? STAT. April 18, 2018. Accessed