

# HOUSE BILL 4987

PATIENT ADVOCACY GROUPS ARE CALLING ON SOUTH CAROLINA LEGISLATORS TO SUPPORT BIPARTISAN LEGISLATION TO ADDRESS RISING OUT-OF-POCKET COSTS FROM AN EMERGING INSURANCE PRACTICE CALLED “ACCUMULATOR ADJUSTMENT PROGRAMS (AAP)”

The following groups have committed to advocate on behalf of H.4987:

- All Copays Count Coalition
- Allergy & Asthma Network
- American Cancer Society Cancer Action Network
- American Diabetes Association
- Arthritis Foundation
- Association for Clinical Oncology
- Bleeding Disorders Association of South Carolina
- Chronic Care Policy Alliance
- Coalition of State Rheumatology Organizations
- Community Oncology Alliance
- Hemophilia Alliance
- Hemophilia Federation of America
- HIV+HEP Policy Institute
- Immune Deficiency Foundation
- International Foundation for Autoimmune & Autoinflammatory Arthritis (AiArthritis)
- Lupus and Allied Diseases Association
- NAMI SC
- NAMI - Piedmont Tri-County
- National Eczema Association
- National Hemophilia Foundation
- National Multiple Sclerosis Society
- National Psoriasis Foundation
- South Carolina Advocates for Epilepsy
- South Carolina Oncology Society
- Spondylitis Association of America

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This legislation will help patients better access their medicine and stay adherent.

Unfortunately, health insurers and PBMs have adopted policies, often referred to as “accumulator adjustment programs” that block assistance towards a patient's deductible and maximum out-of-pocket limits.

AAPs further shift cost to patients, putting patients at risk of not being able to afford their medicines.

South Carolinians need health insurers to count ALL payments and not discriminate against those patients living with chronic conditions.

**13 states, plus Puerto Rico, have laws prohibiting accumulator policies – AR, AZ, CT, GA, KY, IL, LA, NC, OK, TN, VA, WA, WV**

### PROBLEM

When it comes to medication coverage, health plans continue to shift the cost burden to patients through:

- High Deductibles or
- Co-insurance

### COPAY ASSISTANCE

Drug manufacturers, health foundations, charities, and nonprofit organizations help patients with assistance programs that cover additional cost patients are required to pay. **These programs are critical for patients with chronic, complex conditions**

### H.4987 ADDRESSES

This legislation directs insurers to count all cost-sharing payments made by the patient or on the patient's behalf toward their deductible and out-of-pocket maximum.