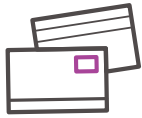
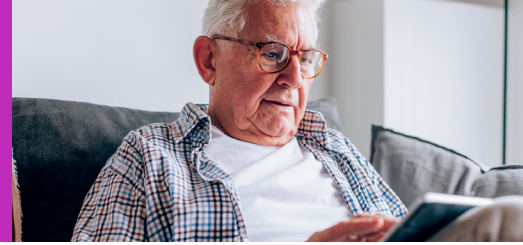


# An Overview of Copay Accumulators & Maximizers



**Copay cards** are a form of patient support provided by drug manufacturers to help eligible patients afford their medicines.

Instead of paying for the full out-of-pocket (OOP) amount, eligible patients may use a copay card to offset their cost-sharing and pay a low or zero-dollar amount for specific prescription medications. This will happen until they hit their OOP maximum; at this point, the insurance plan could cover a patient's medication at 100%.

Recently, health plans and pharmacy benefit managers (PBM) have come up with strategies that are typically presented to employers as solutions to help control costs.

Copay accumulator and maximizer programs are among these strategies that prevent manufacturer copay cards from counting towards a patient's deductible and/or the OOP maximum set by the insurance plan.

**While these strategies may help to reduce the cost to the plan, they may result in increased patient OOP costs.**

## Copay Accumulator

## Copay Maximizer

### How it works

Excludes a manufacturer's copay support from the patient's deductible and OOP maximum

**Patient is responsible for the full value of the deductible**

The patient's OOP obligation is set to the maximum value of the copay support

### Program administrator

Typically offered directly by the plan's PBM

Typically offered by a **third-party vendor** partnered with the plan's PBM

### Program enrollment

**No separate enrollment needed**

**Program enrollment required** or the patient may have to pay a significantly higher cost out of pocket for the medication

### Impact to patients

Patient may eventually **face high OOP cost** once the copay card funds are exhausted

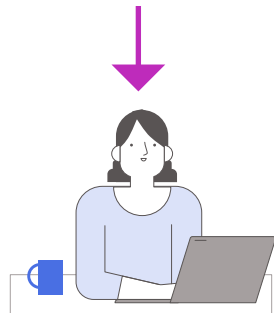
Patient **may incur minimal OOP costs if their cost-sharing is fully offset by the copay card value**

They may still need to pay for other medications since the copay card value does not count toward the deductible or OOP maximum

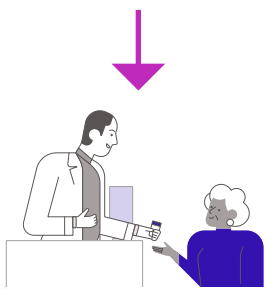
# Copay Assistance Process Flow\*



**At the doctor's office:**  
Doctor writes prescription and sends it to pharmacy



**At home**  
Patient enrolls in copay program



**At the pharmacy**  
Patient provides copay card to pharmacy prior to payment



**At the pharmacy**  
Pharmacy runs claim through insurance to determine cost-sharing

## Standard Insurance Plan Design

Copay card amount applied to patient's cost share after insurance has been processed

Patient may pay as little as \$0 for the duration of therapy with copay support

## Insurance Plan Design With Copay Accumulator

Patient may pay as little as \$0 until manufacturer copay card maximum is reached

Copay card amount is NOT applied to patient's insurance plan deductible or OOP maximum

Patient then pays based on their insurance plan design until their OOP maximum is reached

## Insurance Plan Design With Copay Maximizer

Patient may pay as little as \$0 until copay card maximum value is used

Patient may or may not incur an OOP cost after the copay card is exhausted; this is based on the plan design

\*Copay accumulator and maximizer programs vary in practice. The diagram is illustrative only and not meant to capture all variations in program designs.

# Copay Accumulators & Maximizers: Frequently Asked Questions



## 1 Have you received a letter stating your copay assistance is running out?

If yes, call the BMS patient support program that you are enrolled into. We will help investigate the remaining copay card amount and determine the next course of action.

## 2 Will there be an OOP cost for a medication after the copay card runs out?

Call the BMS patient support program that you are enrolled into for more information. Patient support may be able to schedule a 3-way call with the payer and patient to determine the OOP cost-sharing for the rest of the year.

## 3 How do I determine if an insurance plan is associated with a copay adjustment program?

Check the insurance plan's coverage documents, look for communications from the insurance company, or ask the employer if the insurance plan has a copay adjustment program.

## 4 Are there any regulations on copay adjustment programs at the state level?

Some states have banned copay accumulator programs in state-regulated insurance plans. However, these state laws do not apply to employer-sponsored insurance plans that are self-funded. State bans on copay accumulator programs are applied based on where an insurance plan is administered, not based on the patient's state of residence. No state laws have passed addressing co-pay maximizer programs.

## Glossary

**Copay adjustment program:** Used by insurance companies and pharmacy benefit managers (PBMs) to prevent manufacturer copay assistance from counting towards a patient's deductible or out-of-pocket maximum. *Also known as accumulator or maximizer programs.*

**Copay card:** A discount card provided by pharmaceutical companies to help patients reduce their OOP costs for prescription medications. *Also known as a copay assistance card or copay coupon.*

**Deductible:** The amount of money patients must pay out of pocket for covered healthcare services before their health insurance plan starts to contribute.

**Health insurance plan:** Healthcare benefits provided by the patient's employer or the government in exchange for a premium, which is the amount patients pay for health insurance every month.

**Out-of-pocket (OOP) maximum:** The most patients must pay for covered healthcare services in a plan year.

**Pharmacy Benefit Manager (PBM):** A third-party administrator of prescription drug benefits for insurance plans and employers.

**Specialty medication:** High-cost prescription medications generally used to treat complex, chronic conditions.



Find support for BMS medications at [BMSPatientSupportResources.com](https://www.bmspatientsupportresources.com)

