

MIDDLEMEN DRIVE HIGH OUT-OF-POCKET COSTS

Every day, patients show up at the pharmacy counter and realize that their commercial insurance coverage does not provide the level of access and affordability they need.



Susan I. of Pittsburgh, PA

“With our health insurance...every year our premiums continue to increase, and I feel the quality per se decreases.”

That’s because insurers and pharmacy benefit managers (PBMs) have increasingly shifted more health care costs to patients through high deductibles and coinsurance.

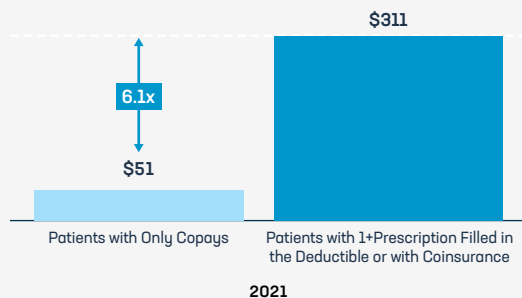


In 2021, middlemen subjected
2 OUT OF 3 PATIENTS
 taking brand medicines to the full list price through the use of deductibles or coinsurance.



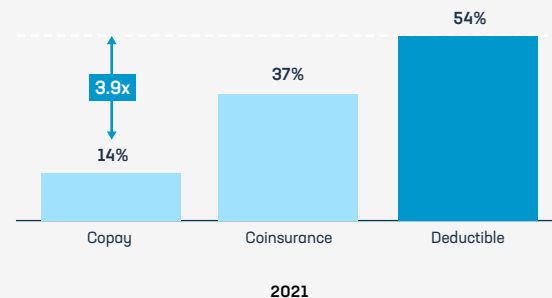
Patients taking brand medicines with deductibles or coinsurance spent about
500% MORE
 on average out of pocket for their medicines than patients with only copays.

Average Annual Out-of-Pocket Cost for Commercially Insured Patients Taking Brand Medicines, by Benefit



Patients were nearly
4X MORE LIKELY TO ABANDON BRAND MEDICINES
 filled while in the deductible compared to those filled with copays.

Rate Commercially Insured Patients Abandoned Newly Prescribed Brand Medicines, by Benefit



Patients deserve access to innovative treatments and cures. That is why policymakers should address practices by insurers and pharmacy benefit managers that can drive up out-of-pocket costs for patients.

Sources:

PhRMA. Deductibles and coinsurance drive high out-of-pocket costs for commercially insured patients taking brand medicines, November 2022. <https://phrma.org/resource-center/Topics/Access-to-Medicines/Deductibles-and-Coinsurance-Drive-High-Out-Of-Pocket-Costs-for-Commercially-Insured-Patients-Taking-Brand-Medicines>

Learn more at PhRMA.org/Middlemen.