# KANSAS

## Copay Assistance Diversion Programs

### Copay Accumulators 101

Millions of Americans endure long and expensive medical journeys to get the medications that best treat their needs. Copay accumulator adjustment policies and other copay assistance diversion schemes allow insurers and pharmacy benefit managers (PBMs) to collect copayments on an enrollee's behalf without counting those payments toward the enrollee's annual deductible or out-of-pocket limit. These policies undermine access to lifesaving prescription drugs for people living with serious, complex, chronic illnesses.

### Findings for Kansas 2024 Marketplace Plans

Kansas received a C because 4 out of 8 plans have copay assistance diversion policies.

| These plans *have* copay assistance diversion policies: | These plans *do not have* copay assistance diversion policies: |
|---|---|
| Aetna CVS Health<br>Medica<br>United Healthcare<br>US Health & Life (Ascension) | Ambetter from Sunflower Health<br>Blue Cross and Blue Shield of Kansas<br>BCBS of Kansas City<br>Oscar Insurance Company |

### Need for Action

Kansas legislators can further protect Kansans with chronic illness by joining 19 other states, Washington D.C., and Puerto Rico and enacting legislation to protect residents from these harmful practices by insurance companies and PBMs. Such legislation would ensure Kansans with state-regulated insurance plans are protected.

A federal rule requires all private health insurance plans, including marketplace and employer-sponsored health plans, to count copay assistance toward patient cost-sharing limits in most cases. The plans listed above have copay diversion policies contrary to this rule. Kansas insurance regulators can ensure health insurers and pharmacy benefit managers comply with federal rules.

The HELP Copays Act of 2023 (HR 830 and S. 1375) would enact these same protections in federal law to protect people on employer-sponsored health plans living with chronic illness.

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