# SOUTH CAROLINA

## Copay Assistance Diversion Programs

**For failing to protect vital patient assistance**

### 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 South Carolina 2024 Marketplace Plans

South Carolina received an F because 5 out of 6 plans have copay assistance diversion policies.

| These plans **have** copay assistance diversion policies: | These plans **do not have** copay assistance diversion policies: |
|---|---|
| Ambetter from Absolute Total Care<br>BlueCross BlueShield of South Carolina<br>Cigna Healthcare of South Carolina  +<br>First Choice Next<br>UnitedHealthcare | Molina Healthcare * |

### Need for Action

South Carolina legislators can further protect South Carolinians 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 South Carolinians 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. South Carolina 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 with employer-sponsored health plans living with chronic illness.

\* = Plan applies copay assistance for brand drug with no generic equivalent
+ = Plan utilizes as copay maximizer or alternative funding program

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