



Out-of-Pocket Protection Plan

Overview and FAQs



Out-of-Pocket Protection Plan Overview

The Out-of-Pocket Protection Plan minimizes the impact of copayment assistance on plan design, while ensuring members have access to the medications they need. Based on a benefit change listed in the plan’s Summary of Plan Description (SPD), this program adjusts copayment assistance from members’ accumulated deductible and out-of- pocket maximum to reflect only what members themselves pay. When the program is in place, funds paid by copay assistance programs will no longer be applied to the accumulators

How it Works:			
1 Payer enrolls in the Out-of Pocket Protection Plan and changes their benefit accordingly	2 Prescription is processed at the specialty pharmacy	3 Member responsibility for deductible and out-of-pocket is accumulated	4 Specialty pharmacy applies the copay assistance
5 Member copay assistance is tracked by the specialty pharmacy	6 Express Scripts removes the assistance from the member’s deductible (if applicable) and out-of-pocket amounts	7 Express Scripts sends communication to the member about the adjustment	8 Plan saves money because copay assistance is removed from their members’ accumulated buckets, so they won’t meet their maximums as quickly

Example:

Current plan design mandates that the Deductible is \$4,000, Maximum Out of Pocket is \$8,000 and Copay is \$40. The member goes to fill a specialty drug with a cost of \$3,000. Because they have not yet accumulated anything towards their deductible and out-of-pocket maximum, the member cost is all \$3,000. The member enrolls in copay assistance, which will pay for the entirety of the claim except \$20.

Current plan design			
PLAN PAYS	COPAY ASSISTANCE PAYS	MEMBER PAYS	ACCUMULATED DED/OOP
\$0	\$2980	\$20	\$3000

Out-of-Pocket Protection Plan			
PLAN PAYS	COPAY ASSISTANCE PAYS	MEMBER PAYS	ACCUMULATED DED/OOP
\$0	\$2980	\$20	\$20

In the example above, when the plan is enrolled in the Out-of-Pocket Protection Plan, only the \$20 that was paid by the member accumulates toward the deductible and out-of-pocket maximum.

Out-of-Pocket Protection Plan FAQs

1. What is the Out-of-Pocket Protection Plan?

The plan provider has made a benefit change to how copay assistance applies to members' accumulated indemnity buckets. Enrolled plans are no longer counting the funds paid on the member's behalf by any copay assistance program towards their deductible and out-of-pocket accumulated buckets.

2. What is copay assistance?

Many manufacturers and foundations offer financial assistance to patients who need help covering the cost of their specialty medicine, copayments, or coinsurance. You might see references to this support called a manufacturer or patient assistance program, discount cards, copay assistance, or coupons.

3. How will I know that I am a part of the Out-of-Pocket Protection Plan?

Your plan should have updated your summary plan documents with this information. You should also receive a letter from your plan when this change goes into effect. You may also receive a letter any time you or someone in your family has an adjustment happen.

4. Am I still able to use copay assistance?

Yes. You can still use copay assistance to help you with the cost of the medications. The payments made on behalf of the assistance program will just no longer count towards your deductible and out-of-pocket maximums.

5. The system showed that I hit my deductible and/or out-of-pocket maximum one day and now it does not. What does this mean?

The payments made on behalf of the assistance program will no longer count towards your deductible and out-of-pocket maximums. The adjustment is based on when the copay assistance program pays which is not at the same time we charge you, the member. There may be some delay in the system until we receive and know how much the assistance program paid.

6. Are you removing any portion that I paid from the deductible and/or out-of-pocket maximum?

No. The program only removes funds paid by the copay assistance program.

7. Can my health plan or provider see these adjustments?

Yes. These adjustments will be shared with your health plan vendor just like any other transaction.

8. Can I opt out of this plan?

No. This program is a benefit change. Express Scripts is simply managing claims as outlined in your insurance benefits.