# Insurers Shift Medicine Costs to Patients with Chronic Illnesses Like Diabetes

For services like hospital stays and doctor visits, health plans routinely share the negotiated prices they receive directly with patients. When it comes to life saving medicines, that's often not the case. Middlemen, such as insurers and pharmacy benefit managers (PBMs), often shift medicine costs to patients taking brand diabetes medicine.

Rate of Abandonment for Commerically Insured Patients Taking Newly Prescribed Brand Diabetes Medicines by Type of Cost Sharing, 2021

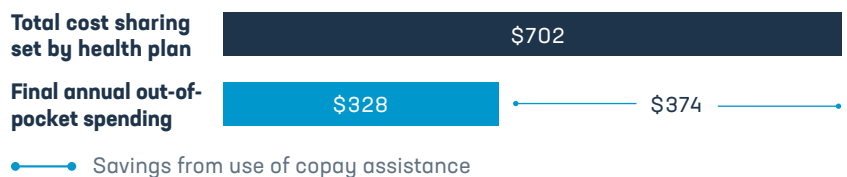| No Cost Sharing	Copay	Coinsurance	Deductible
9%	14%	42%	61%
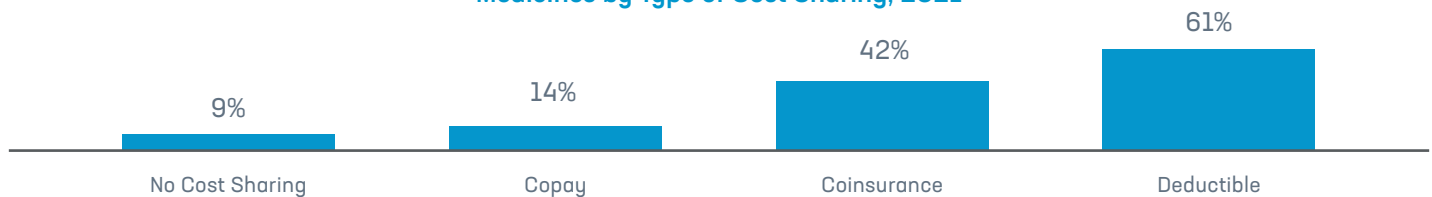
"As someone who has been a Type 1 diabetic since I was 15, I can tell you that those with chronic conditions are paying more for coverage and getting less."

—**Jackson**, Patient with Type 1 Diabetes, Arizona

These middlemen force people with deductibles and coinsurance to pay cost sharing based on the full list price for brand diabetes medicines, not the lower, negotiated price they pay. Manufacturer copay assistance plays an important role in helping ensure patients with diabetes can access the medicines they need.

Patients with deductibles and coinsurance taking brand diabetes medicines paid **3.5x more** out of pocket, on average, in 2021 compared to patients with only fixed copays.

People who use copay assistance for brand diabetes medicines saved an average of $374 in 2021. Without this assistance, their average out-of-pocket costs would have been more than **2x higher**.

Total cost sharing set by health plan	$702	
Final annual out-of-pocket spending	$328	$374

○——○ Savings from use of copay assistance

Middlemen should base what patients pay on the lower price health plans and PBMs pay. And patients need policies that protect copay assistance so that health insurers and PBMs are no longer able to limit how much assistance can help patients at the pharmacy counter.

When you're sick, you should be battling your illness—not battling middlemen. Learn more at PhRMA.org/Middlemen.

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