

# Out-of-Pocket Protection Program

For self-funded groups who have exclusive Specialty Pharmacy with Accredo\*

Ensure integrity of plan design and out-of-pocket accumulations while generating plan savings through our new Out-of-Pocket (OOP) Protection Program.

## How it works

This program reduces drug manufacturer copay assistance impact on plan sponsors by excluding copay assistance dollars from counting toward members' out-of-pocket maximum accruals. This is a plan benefit change. OOP Protection Program effective date must align with the start of the member benefit year and accumulator reset. This program is recommended for groups whose renewal aligns with their benefit year reset.

## Standard plan

Plan pays	Copay assistance pays	Member pays	Member's deductible	OOP max	Total cost
<b>1<sup>st</sup> FILL – Member's responsibility (deductible \$1,500 + copay \$150) = \$1,650</b>					
\$26,000	\$1,650	\$0	\$1,500	\$1,650	\$27,650
<b>2<sup>nd</sup> FILL – Member's copay \$150</b>					
\$27,500	\$150	\$0	\$0	\$150	\$27,650

## Out-of-Pocket Protection Program

Plan pays	Copay assistance pays	Member pays	Member's deductible	OOP max	Total cost
<b>1<sup>st</sup> FILL – Member's responsibility (deductible \$1,500 + copay \$150) = \$1,650</b>					
\$26,000	\$1,650	\$0	\$1,500	\$1,650	\$27,650
OOP Protection plan adjustment of \$1,650 (\$1,500 deductible and \$1,650 OOP)			-\$1,500	-\$1,650	\$27,650
<b>2<sup>nd</sup> FILL – Member's copay \$150 (deductible \$1,500 + copay \$150) = \$1,650</b>					
<b>\$26,000</b>	\$1,650	\$0	\$1,500	\$1,650	\$27,650
OOP Protection plan adjustment of \$1,650 (\$1,500 deductible and \$1,650 OOP)			-\$1,500	-\$1,650	\$27,650

Plus, the OOP Protection Program drives plan savings by ensuring that accumulators accurately reflect true member spend. The program also increases visibility into drug manufacturer coupon usage.

Contact your Premera representative or producer for more information about the Out-of-Pocket Protection Program.



**BLUE CROSS BLUE SHIELD OF ALASKA**

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\*The OOP Protection Program is limited to specialty drugs processed through Accredo and does not extend to prescriptions filled or coupons used at retail pharmacies. No grace fills.