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## Medication Access: Assisting Patients With Financial Barriers







Many new therapies are available for the treatment of type 2 diabetes and other conditions, but patients may face financial barriers associated with obtaining medications. Medication cost is one of the most common patient barriers to medication access.¹ Patients may experience barriers related to cost based on their insurance type, local pharmacy, formulary coverage, or coverage tier of the prescribed medication. Additionally, their insurance may request prior authorization or step therapy.

To address this barrier, a key initial step for clinicians when prescribing medications for patients with Ohio Medicaid is to check the Unified Prescription Drug List.<sup>2</sup> This coverage information can assist clinicians in knowing the preferred agent(s) within a specific drug class. Clinicians can provide more detailed and relevant counseling on the potential risks and expected side effects during the visit and decrease the need for prior authorizations.

Some non-Medicaid insurance plans may require deductibles, making certain medications cost-prohibitive for patients. However, there are resources to help alleviate the burden of medication cost in situations where a high copay remains even after insurance contribution:

## Resources to Assist With Medication-Related Financial Barriers

**Copay Cards:** Cards from pharmaceutical companies may defray patients' out-of-pocket costs. Patients can sign up on a manufacturer's website then bring the copay card to the pharmacy. Patients with state or federal insurances (such as Medicare and Medicaid) are excluded.



**Savings Programs:** Savings programs, such as GoodRx and SingleCare, are copay cards that can provide additional savings and be used instead of insurance. Patients can go to the company website to sign up for free, then bring the card to the pharmacy or use the mobile apps.



**\$0/\$4 Medication Lists:** Some pharmacies may offer certain generic medications for low, set prices, sometimes less than patient insurance copays. Each pharmacy has its own list with different prices and included medications.



**Patient Assistance Programs:** Patient Assistance Programs are run by pharmaceutical companies to provide medications at deep discounts. Most provide assistance based on the patient's reported income, which patients submit with their application.



**Day Supply:** Insurances often provide copay relief for larger quantities. For instance, when a prescription is written for a longer duration, such as 90 days versus 30 days, the patient can obtain larger quantities of medication at a discount, e.g., \$4 for a 30-day supply or \$10 for a 90-day supply.



For more information, access Cardi-OH's expanded resource on medication access.

## References

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- 2. Ohio Department of Medicaid, Unified Preferred Drug List: Medicaid Fee-for-Service and Managed Care Plans. https://dam.assets.ohio.gov/image/upload/medicaid.ohio.gov/PHM/drug-coverage/20240701\_UPDL\_v2\_Clean\_APPROVED.pdf. Published July 1, 2024. Accessed July 3, 2024.

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