An Overview of the National Academy's Recommendation on Drug Access

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Limit patient out-of-pocket payments for drugs where higher adherence reduces total costs of care
Establish limits on total annual out-of-pocket costs on Part D

There Is Currently No Spending Cap On Part D

“For the first time since being diagnosed 10 years ago, Krahne, 65, decided to delay filling his prescription, hoping that his cancer wouldn’t take advantage of the lapse and wreak further havoc on his body.”

— *Kaiser Health News*, 2017
Even After Catastrophic Coverage, 5% Can Be A Burden For Patients Using Expensive Drugs

Use net prices to set patient out-of-pocket spending when paying deductibles and coinsurance
Current System Disproportionately Burdens Patients Needing Expensive Drugs

Include costs, clinical effectiveness, and available treatment alternatives when determining patient cost sharing.
Addressing Patient Out-of-Pocket Spending

1. Limit patient out-of-pocket payments for drugs where higher adherence reduces total costs of care
2. Establish limits on total annual out-of-pocket costs on Part D
3. Use net prices to set patient out-of-pocket spending when paying deductibles and coinsurance
4. Include costs, clinical effectiveness, and available treatment alternatives when determining patient cost sharing