

Benefit Plan Design: Recommended Actions

1. Protect Access to Life-Saving Therapies

- Exempt hemophilia therapies from accumulator and copay maximizer programs.
- Ensure manufacturer copay assistance can be used to offset member cost-share.
- Maintain coverage for factor replacement therapy without punitive specialty tiering.

Impact: Prevents non-adherence, ER visits, and catastrophic claims.

2. Reduce Financial Barriers for Members

- Cap out-of-pocket costs for hemophilia therapies.
- Offer predictable cost-share models (e.g., fixed copays instead of coinsurance).
- Provide plan selection counseling for members with bleeding disorders during open enrollment.

Impact: Improves adherence and reduces avoidable medical spend.

3. Strengthen Care Navigation and Advocacy Support

- Ensure members have access to hemophilia advocacy programs that provide:
 - Financial counseling
 - Treatment education
 - Navigation of assistance programs
 - Support for managing chronic therapy costs
- Partner with Hemophilia Treatment Centers (HTCs) for comprehensive care planning.

Impact: Reduces financial toxicity and improves clinical outcomes.

4. Align Benefit Design with Clinical Reality

- Recognize that hemophilia therapies can meet the deductible in a single fill; design benefits accordingly.

- Avoid one-size-fits-all cost-shifting strategies that disproportionately harm rare-disease members.
- Treat hemophilia as a protected condition requiring tailored benefit design.

Impact: Prevents unintended consequences and protects both members and employer budgets.

5. Monitor and Manage Site-of-Care Costs

- Direct members to HTC or qualified specialty pharmacies with expertise in bleeding disorders.
- Avoid unnecessary use of high-cost hospital infusion centers triggered by affordability barriers.
- Require specialty pharmacies to follow MASAC standards (no auto-shipping, inventory checks, monthly contact).

Impact: Reduces waste, improves adherence, and lowers total cost of care.