

Health Insurance Access Barriers: A National Scorecard

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Overview

Across the United States, individuals living with autoimmune conditions rely upon their health insurance plans to access needed medicines. Unfortunately, many Americans are forced to deal with health insurance policies such as prior authorization, step therapy, and high cost-sharing before they can get access to the medications their doctors prescribe. These utilization management tools are used by insurance companies to manage spending on prescription drugs by limiting patient access to them, causing patients to experience delays in treatment that can damage their health and worsen their conditions.

The 2023 National Scorecard examines how much insurers and pharmacy benefit managers (PBMs) restrict access to medicines for patients living with seven different autoimmune conditions covered under Medicare or private insurance obtained through an employer or health exchange. Coverage barriers for people living with **Crohn's disease, lupus nephritis, multiple sclerosis, psoriasis, psoriatic arthritis, rheumatoid arthritis, and ulcerative colitis** are examined. Average scores across all conditions are also provided. Patients living with these conditions are among many people who face access barriers and high out-of-pocket costs

that make it difficult to obtain needed medications their health care providers prescribe.

Despite disturbing trends indicating significant barriers and financial burdens, policymakers at the state and federal levels are considering legislative and regulatory changes that could facilitate or further restrict patient access to medicines. This scorecard illustrates that existing coverage policies create significant barriers to access for patients. These results can and should help guide policymaking efforts to improve access for people living with serious medical conditions.

ACCESS BARRIERS

The scorecard examines three of the most common types of access barriers patients face in accessing needed medication:

- **Formulary/tier placement** – Health insurance plans tier their formularies to incentivize use of preferred medicines based on different cost-sharing requirements for patients. Higher tiers typically represent higher cost-sharing requirements. Requiring high cost-sharing for patients can mean medicines are financially out of reach though they are “covered” by a plan. These cost-sharing requirements are in addition to meeting annual deductibles which requires patients to pay the full cost of their medications, often without the benefit of plan-negotiated discounts or rebates.
- **Step therapy** – Step therapy, also known as “fail first” policies, forces patients to try – and “fail” – one or more medicines preferred by the insurer before their insurer will cover the drug that the patient’s doctor initially prescribed. The policy undermines doctors’ clinical decision-making, interferes with doctor-patient relationships, and makes it hard for patients to access medicines when they need them, delaying health and wellness.
- **Prior authorization** – Health insurance companies often require doctors to obtain specific approval from the insurer before they are able to prescribe a treatment to their patients. This time-consuming process takes valuable time away from patients and can also lead to delays in treatment as patients must wait for the insurer to issue a response.

Methodology

Data analytics firm [MMIT](#) provided both the datasets for analysis and evaluated the formularies of thousands of private and Medicare health plans across the U.S. on their overall access to FDA-approved medicines for Crohn’s disease, lupus nephritis, multiple sclerosis, psoriasis, psoriatic arthritis, rheumatoid arthritis, and ulcerative colitis. Averages across all seven conditions are also calculated and reported. Health plan data provided reflected coverage as of the fourth quarter of 2022. The MMIT team evaluated both the medical benefit (drugs administered in a doctor’s office) and pharmacy benefit (drugs received through a pharmacy) of each of the plans for each condition. The scoring analysis relied on criteria related to access and barriers including formulary status, tier placement, prior authorization, and step therapy requirements using a point system. Each medication indicated for each condition was given a score based on the presence or absence of access restrictions. The number of plans examined varied by insurance type and are noted with the results charts.

The researchers developed a point system based on these restrictions – one point was assigned if the plan had a step therapy requirement, with another point added for a prior authorization restriction. Points were also assigned based on where a drug appeared on a plan’s formulary, which dictates what a patient ends up paying out of pocket

for a prescription. Each medication received a score on a scale from 0 to 4, with lower scores reflecting fewer access restrictions and higher scores reflecting multiple barriers or no coverage at all. Those results were then averaged across the formulary for a condition- specific score. The health plans were then matched to the formulary the plan uses to determine the plan’s score by condition.

Increasingly, health plans and PBMs do not count any out-of-pocket cost assistance patients use to lower medication costs toward a patient’s deductible requirements or annual out-of-pocket limits. These policies harm people who rely upon this assistance to lower their out-of-pocket costs: those people must still meet deductible requirements and are subject to out-of-pocket maximums despite the health plan receiving full payment for those services. These policies only apply to commercial and health exchange plans since Medicare does not permit copayment assistance for medications.

Though the tier placements of different medicines were factored into the plan scores, the actual size of patient out-of-pocket costs and how plans treat any out-of-pocket cost assistance a patient receives were not. Given trends to increase patient cost-sharing for prescription medicines, for many plans these grades are conservative estimates of the significant barriers patients face.

Let My Doctors Decide converted numeric scores ranging from 0 to 4 to letter grades to reflect the magnitude of differences in access represented by the scores plans achieved.

Criteria	Plan Score	Letter Grade
The plan covers a variety of drugs and has few restrictions on access	Less than 1	A
The plan covers fewer drugs and/or has more restrictions on access	Less than 2 and greater than/ equal to 1	B
The plan has far fewer drugs covered and/or places significant restrictions on access	Less than 3 and greater than/ equal to 2	C
The plan covers significantly fewer drugs and/or places severe restrictions on access	Greater than/equal to 3	F

Tables and Observations

Key Finding #1: Medicare Advantage and Part D – Pharmacy Benefit

Medicines covered by Medicare that a patient receives through a local or mail-order pharmacy. Analysis includes more than 2050 plans

- For people living with autoimmune conditions and covered by Medicare, 88% of their plan options involve significant to severe access barriers.
- Across all conditions, nearly half of all plans achieved a failing score and nearly 9 in 10 plans scored a C or worse.
- The majority of Medicare Advantage and Part D plans achieved failing grades because of the access barriers they adopt for Crohn's disease, multiple sclerosis, and rheumatoid arthritis.

Condition	Access to Medicines Grades			
	Medicare Advantage & Part D Plan Pharmacy Benefit			
	A	B	C	F
Crohn's Disease	0%	2%	43%	55%
Lupus Nephritis	2%	50%	13%	34%
Multiple Sclerosis	0%	3%	33%	64%
Psoriasis	0%	10%	49%	41%
Psoriatic Arthritis	0%	12%	40%	48%
Rheumatoid Arthritis	0%	3%	38%	59%
Ulcerative Colitis	0%	3%	56%	40%
Across All Conditions	Less than 1%	12%	39%	49%

Key Finding #2: Medicare Part B & Medicare Advantage – Medical Benefit

Medicines covered by Medicare that are administered in a doctor's office. Analysis includes more than 2100 plans

- Across all seven conditions, 93% of Medicare Advantage plans place significant to severe access restrictions on physician-administered medications.
- For each of the conditions studied, more than 60% of plans place significant to severe limitations on the clinical decision-making of treating physicians for medications administered in the physician's office.
- For 6 of the 7 conditions studied, the majority of plans achieved failing scores due to the coverage restrictions placed on access to medicines for these autoimmune conditions.
- For multiple sclerosis and psoriasis, 8 in 10 plans achieved failing scores because of their severe limitations on medication coverage.

Condition	Access to Medicines Grades			
	Medicare Advantage Medical Benefit			
	A	B	C	F
Rheumatoid Arthritis	0%	4%	41%	55%
Psoriatic Arthritis	0%	0%	29%	71%
Lupus Nephritis	22%	17%	20%	41%
Crohn's Disease	0%	8%	30%	62%
Multiple Sclerosis	0%	0%	16%	84%
Psoriasis	0%	0%	20%	80%
Ulcerative Colitis	0%	0%	39%	61%
Average Across All Conditions	3%	4%	28%	65%

Condition	Access to Medicines Grades			
	Medicare FFS Medical Benefit			
	A	B	C	F
Rheumatoid Arthritis	0%	67%	33%	0%
Psoriatic Arthritis	0%	0%	100%	0%
Lupus Nephritis	58%	0%	0%	42%
Crohn's Disease	0%	0%	100%	0%
Multiple Sclerosis	0%	0%	100%	0%
Psoriasis	0%	0%	67%	33%
Ulcerative Colitis	0%	0%	67%	33%
Average Across All Conditions	8%	10%	67%	15%

Note: Local Coverage Determinations can cause Medicare Part B coverage to vary across the US. These scores reflect those variations.

- For each condition studied, Medicare fee-for-service provided better access to physician-administered medicines.

Key Finding #3: Commercial Pharmacy Benefit

Medicines covered by private insurance that a patient receives through a local or mail-order pharmacy. Analysis includes more than 2750 plans

- Across more than 2,750 plans and considering all conditions, 3 out of 4 plans impose significant to severe access barriers to medicines across all conditions. On average, less than 1% provided "A" level coverage and access to medicines across all conditions studied.
- The majority of plans scored a C or worse for coverage offered because of the significant to severe barriers to access for medicines for 6 of 7 conditions studied. The lone exception was coverage of medicines for lupus nephritis, where there are fewer treatment options available.

Condition	Access to Medicines Grades			
	Commercial Pharmacy Benefit			
	A	B	C	F
Rheumatoid Arthritis	0%	13%	48%	39%
Psoriatic Arthritis	0%	19%	56%	25%
Lupus Nephritis	4%	67%	15%	13%
Crohn's Disease	0%	10%	68%	32%
Multiple Sclerosis	1%	22%	65%	13%
Psoriasis	0%	25%	66%	9%
Ulcerative Colitis	Less than 1%	15%	72%	12%
Average Across All Conditions	Less than 1%	24%	56%	19%

Key Finding #4: Commercial Medical Benefit

Medicines covered by private insurance that are administered at a doctor's office. Analysis includes more than 1130 plans

- Most plans achieved failing scores for each of the autoimmune conditions studied. For all conditions other than multiple sclerosis, more than 80% of plans achieved failing scores.
- Plans provide no deference to the clinical decisions made by treating physicians for medicines administered in a doctor's office.
- People living with autoimmune conditions have very limited options for coverage without severe barriers to access medications administered by physicians.

Condition	Access to Medicines Grades			
	Commercial Medical Benefit			
	A	B	C	F
Rheumatoid Arthritis	Less than 1%	Less than 1%	10%	89%
Psoriatic Arthritis	Less than 1%	2%	12%	85%
Lupus Nephritis	5%	5%	9%	81%
Crohn's Disease	Less than 1%	Less than 1%	17%	81%
Multiple Sclerosis	0%	2%	34%	64%
Psoriasis	Less than 1%	Less than 1%	4%	94%
Ulcerative Colitis	Less than 1%	Less than 1%	11%	88%
Average Across All Conditions	1%	2%	14%	83%

Key Finding #5: Health Exchange Plans Pharmacy Benefits

Medicines covered by health exchange plans that a person receives from a local or mail-order pharmacy. Analysis includes more than 440 plans

- The vast majority of health exchange plans achieved a “C” or worse for each of the autoimmune conditions studied indicating significant to austere barriers to access for patients.
- For each condition studied, more than 1 in 3 health plans achieved a failing score because of the severe barriers to access they imposed.

Condition	Access to Medicines Grades			
	Health Exchange Pharmacy Benefit			
	A	B	C	F
Rheumatoid Arthritis	0%	14%	41%	45%
Psoriatic Arthritis	0%	14%	47%	39%
Lupus Nephritis	2%	35%	21%	42%
Crohn's Disease	0%	7%	34%	59%
Multiple Sclerosis	0%	14%	36%	50%
Psoriasis	0%	24%	41%	35%
Ulcerative Colitis	5%	8%	49%	39%
Average Across All Conditions	1%	16%	39%	44%

Key Finding #6: Health Exchange Plans Medical Benefits

Medicines covered by health exchange plans that are administered at a doctor's office. Analysis includes more than 440 plans

- Health exchange plans seldom provide any deference to the clinical decision-making of treating physicians for medications administered in the physician's office.
- 60% or more of health exchange plans impose severe access barriers to medicines administered in a doctor's office for any of the seven conditions studied.
- Coupled with high deductibles often associated with health exchange plans and the access restrictions noted in this analysis, people with autoimmune conditions have limited to no coverage options that do not impose severe barriers to access.

Condition	Access to Medicines Grades			
	Health Exchange Medical Benefit			
	A	B	C	F
Rheumatoid Arthritis	Less than 1%	1%	8%	91%
Psoriatic Arthritis	Less than 1%	1%	12%	86%
Lupus Nephritis	10%	10%	8%	72%
Crohn's Disease	Less than 1%	Less than 1%	17%	81%
Multiple Sclerosis	0%	2%	34%	64%
Psoriasis	Less than 1%	Less than 1%	4%	94%
Ulcerative Colitis	Less than 1%	Less than 1%	11%	88%
Average Across All Conditions	1%	2%	14%	83%

Appendix

The following charts provide a closer look at access to medicine scores for the largest 25 plans by enrollment for each category: Medicare (pharmacy and medical); commercial (pharmacy and medical); and health exchange (pharmacy and medical). The lists include **well-known insurers like Humana, Aetna, Anthem, Cigna, and AARP**.

Medicare Coverage – Pharmacy Benefit

Table 1: Medicare Advantage & Part D Pharmacy Benefit Access Scores: Largest 25 Plans by Covered Lives

Medicare Advantage & Part D Plans Pharmacy Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
SilverScript Choice	F	F	C	C	C	B	C	C
WellCare Value Script PDP	F	F	C	F	F	B	F	C
AARP MedicareRx Preferred	F	C	F	F	F	B	F	F
WellCare Classic PDP	F	F	F	F	F	B	F	C
SilverScript SmartRx	F	F	C	F	F	B	F	F
Humana Walmart Value Rx Plan	F	F	C	C	F	F	F	F
Humana Basic Rx Plan	F	F	C	C	F	F	C	F
Humana Gold Plus - National 5	F	C	C	C	F	B	C	C
UnitedHealthcare Group Medicare Advantage (PPO) EGWP	F	F	F	F	C	B	F	C
Humana Premier Rx Plan	F	F	C	C	F	F	C	F
AARP MedicareRx Saver Plus	C	F	F	F	F	B	F	C
Cigna Secure Rx	C	F	F	F	F	B	F	C
AARP MedicareRx Walgreens	F	F	F	F	F	C	F	F
Express Scripts EGWP Premier Access 4 Tier	C	F	C	C	C	B	C	C

Table 1: Medicare Advantage & Part D Pharmacy Benefit Access Scores: Largest 25 Plans by Covered Lives (continued)

Medicare Advantage & Part D Plans Pharmacy Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
HumanaChoice - National 5	F	C	C	C	F	B	C	C
AARP Medicare Advantage Plan 1	F	F	F	F	C	B	F	C
UnitedHealthcare Dual Complete SNP	C	C	C	C	C	B	C	C
AARP Medicare Advantage Choice	F	F	F	F	C	B	F	C
UnitedHealthcare MedicareRx for Groups	F	F	F	F	F	B	F	F
SilverScript Platinum 3T EGWP	F	C	C	C	C	B	C	C
Humana Employer Group Plus MA-PD	C	B	B	B	B	B	B	B
AARP Medicare Advantage	F	F	F	F	C	B	F	C
WellCare Medicare Rx Value Plus PDP	F	F	F	F	F	B	F	F
SilverScript Group PDP	F	F	C	C	C	B	C	C
Express Scripts Medicare for UAW Retiree EGWP	C	C	B	B	C	B	C	C

Medicare Coverage – Medical Drug Benefit

Table 2: Medicare Advantage & Part B Medical Drug Benefit Access Scores: Largest 25 Plans by Covered Lives

Medicare FFS or Advantage Plan Medical Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average
Medicare FFS	C	C	C	C	B	C	C	C
Humana Gold Plus - National 5	F	F	F	F	F	F	F	F
UnitedHealthcare Group Medicare Advantage (PPO) EGWP	C	F	F	F	C	F	F	F
Aetna Medicare Plan MA Only	F	F	F	F	F	F	F	F
HumanaChoice - National 5	F	F	F	F	F	F	F	F
AARP Medicare Advantage Plan 1	C	F	F	F	C	F	F	F
UnitedHealthcare Group MA Only	C	F	F	F	C	F	F	F
UnitedHealthcare Dual Complete SNP	C	F	F	F	C	F	F	F
AARP Medicare Advantage Choice	C	F	F	F	C	F	F	F
Humana Employer Group Plus MA-PD	F	F	F	F	F	F	F	F
AARP Medicare Advantage	C	F	F	F	C	F	F	F
Kaiser Permanente Senior Advantage EGWP	C	C	C	C	C	B	C	C
AARP Medicare Advantage Plan 2	C	F	F	F	C	F	F	F
Blue Cross Blue Shield of Michigan Medicare Plus Blue MA Only	F	F	F	F	C	F	F	F

Table 2: Medicare Advantage & Part B Medical Drug Benefit Access Scores: Largest 25 Plans by Covered Lives (continued)

Medicare FFS or Advantage Plan Medical Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average
Humana Gold Plus - National 5 w/ED	F	F	F	F	F	F	F	F
AARP Medicare Advantage Choice Plan 1	C	F	F	F	C	F	F	F
HumanaChoice- Super National 5 AG	F	F	F	F	F	F	F	F
1199SEIU National Benefit Fund EGWP	F	F	F	F	F	F	F	F
Humana Gold Plus SNP-DE National-5	F	F	F	F	F	F	F	F
AARP Medicare Advantage Walgreens	C	F	F	F	C	F	F	F
Humana Gold Plus - Plus 5	F	F	F	F	F	F	F	F
Cigna Preferred Medicare	C	F	C	C	C	B	C	C
Kaiser Permanente Senior Advantage LA, Orange Co.	C	C	C	C	C	B	C	C
Anthem MediBlue Preferred	F	F	F	F	F	F	F	F
Humana Honor MA Only	F	F	F	F	F	F	F	F
UnitedHealthcare Dual Complete Choice	C	F	F	F	C	F	F	F

Commercial Coverage – Pharmacy Benefit

Table 3: Pharmacy Benefit Access Scores: Largest 25 Plans by Covered Lives

Commercial Insurance Plan Pharmacy Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
TRICARE East & West	C	B	B	C	C	B	C	C
UnitedHealthCare Advantage 3 Tier PPO	C	F	C	C	C	B	C	C
Express Scripts National Preferred with Unlimited	C	B	C	C	C	B	C	C
Cigna Healthcare Standard PPO	C	C	C	B	C	C	C	C
BCBS FEP Standard & Basic	B	C	B	B	B	B	B	B
Express Scripts National Preferred with Advantage Plus	C	B	C	C	C	B	C	C
Express Scripts National Preferred with Advantage	C	B	C	C	C	B	C	C
CVS Caremark Performance Standard Control w/Advanced Specialty Control	C	C	C	C	F	B	C	C
Aetna Standard PPO	F	C	F	F	F	F	F	F
Wal-Mart	C	C	C	B	C	F	C	C
Cigna Healthcare Value PPO 3 Tier	C	C	C	B	C	C	C	C
Kaiser Foundation Health Plan Southern CA PPO	C	B	B	B	C	C	C	B

Table 3: Pharmacy Benefit Access Scores: Largest 25 Plans by Covered Lives (continued)

Commercial Insurance Plan Pharmacy Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
Kaiser Foundation Health Plan Northern CA PPO	C	B	C	C	C	C	C	C
OptumRx Select Standard	C	C	B	B	B	F	C	C
Amazon	C	B	C	C	C	B	C	C
UnitedHealthCare Traditional 3 Tier PPO	F	F	C	C	C	B	C	C
Anthem BCBS Essential PPO 4 Tier	C	C	B	B	B	B	B	B
UnitedHealthCare Advantage 3 Tier HMO	C	F	C	C	C	B	C	C
Empire NY State Employees Plan - Advanced Flexible	C	B	C	C	C	B	C	C
MC-RX Formulary	C	B	B	B	C	F	C	C
Highmark Blue Cross Blue Shield Comprehensive PPO	F	C	B	C	C	B	F	C
Blue Cross Blue Shield of Massachusetts Blue Care Elect Three Tier	B	B	C	B	B	B	B	B
Blue Cross Blue Shield of Illinois PPO Basic	F	C	C	C	C	B	C	C
OptumRx Premium Standard	C	C	C	C	C	F	C	C
Elixir Rx Standard	C	C	C	C	C	B	C	C

Commercial Coverage – Medical Drug Benefit

Table 4: Medical Drug Benefit Access Scores: Largest 25 Plans by Covered Lives

Commercial Insurance Plan Medical Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
UnitedHealthCare Advantage 3 Tier PPO	C	F	F	F	F	F	F	F
Aetna Standard PPO	F	C	F	C	F	F	F	C
TRICARE East & West	C	B	C	B	B	B	C	B
Cigna Healthcare Standard PPO	F	F	F	F	F	F	F	F
Anthem BCBS Essential PPO 4 Tier	F	C	F	F	F	F	F	F
UnitedHealthCare Traditional 3 Tier PPO	C	F	F	F	F	F	F	F
BCBS FEP Standard & Basic	F	F	F	F	F	F	F	F
UnitedHealthCare Advantage 3 Tier HMO	C	F	F	F	F	F	F	F
Aetna Standard HMO	F	C	F	C	F	F	F	C
Cigna Healthcare Value PPO 3 Tier	F	F	F	F	F	F	F	F

Table 4: Medical Drug Benefit Access Scores: Largest 25 Plans by Covered Lives (continued)

Commercial Insurance Plan Medical Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
Blue Cross Blue Shield of Illinois PPO Basic	F	F	F	F	F	F	F	F
Anthem BCBS National PPO 3 Tier	F	C	F	F	F	F	F	F
Anthem Blue Cross of CA Essential PPO 4 Tier	F	C	F	F	F	F	F	F
Highmark Blue Cross Blue Shield Comprehensive PPO	F	C	F	C	F	F	F	F
Kaiser Foundation Health Plan Southern California PPO	A	B	A	A	A	B	A	A
Blue Cross Blue Shield of Illinois PPO Performance	F	F	F	F	F	F	F	F
Kaiser Foundation Health Plan Northern California PPO	A	B	A	A	A	B	A	A
Aetna Standard POS	F	C	F	C	F	F	F	C
Florida Blue Options Three Tier	F	F	F	F	F	F	F	F
BCBS of Tennessee Three Tier PPO	F	F	F	F	F	C	F	F
Horizon Blue Cross Blue Shield of New Jersey PPO	F	C	C	C	C	F	C	C
Anthem BCBS National PPO 4 Tier	F	C	F	F	F	F	F	F
Anthem BCBS Essential HMO 4 Tier	F	C	F	F	F	F	F	F
Blue Cross Blue Shield of Massachusetts Blue Care Elect Three Tier	F	F	F	F	F	B	F	F
Blue Cross Blue Shield of Texas PPO Basic	F	F	F	F	F	F	F	F

Health Exchange Coverage – Pharmacy Benefit

Table 5: Pharmacy Benefit Access Scores: Largest 25 Plans by Covered Lives

Health Exchange Plan	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
Kaiser Foundation Health Plan CA HMO HIX	F	F	F	F	F	F	F	F
Florida Blue Health Plan Care Choices HMO HIX	F	C	C	C	C	C	C	C
Oscar FL PPO HIX	C	F	C	C	C	B	F	C
BCBS of Texas Marketplace 6 Tier HIX	F	C	C	C	F	C	F	C
Blue Shield of California PPO HIX	F	F	C	C	F	F	F	C
Fidelis Care Essential Plan	F	B	C	C	F	B	C	C
Bright Health Texas HMO HIX	F	F	F	F	F	F	F	F

Table 5: Pharmacy Benefit Access Scores: Largest 25 Plans by Covered Lives (continued)

Health Exchange Plan	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
Bright Health Florida PPO HIX	F	F	F	F	F	F	F	F
Ambetter from Superior Health Plan HMO HIX	B	C	B	C	B	B	B	B
Ambetter from Peach State Health Plan HMO HIX	B	C	B	C	B	B	B	B
BCBS of North Carolina PPO HIX	F	C	C	C	F	C	F	C
Florida Blue Health Plan CareChoices HSA HMO HIX	F	C	C	C	C	C	C	C
Friday Health Plans Texas PPO HIX	C	F	C	C	C	F	C	C
Ambetter from Sunshine Health HMO HIX	B	C	B	C	B	B	B	B
Florida Blue Health Plan Care Choices PPO HIX	F	C	C	C	C	C	C	C
Florida Blue Health Plan ValueScript HMO-HIX	B	B	B	B	C	B	B	B
Blue Cross Blue Shield of Illinois HMO HIX	F	C	C	C	F	C	F	C
Oscar FL HDHP HIX	C	F	C	C	C	B	F	C
Bright Health NC HMO HIX	F	F	F	F	F	F	F	F
BlueCross BlueShield of South Carolina PPO HIX	F	C	F	F	F	C	F	F
Blue Shield of California HMO HIX	F	F	C	C	F	F	F	C
Affinity by Molina Essential Plan	F	C	F	F	F	F	F	F
SelectHealth Utah HIX HMO	C	B	C	B	C	B	C	C
CareFirst BCBS MD HMO HIX	F	F	C	F	C	F	C	F
Horizon Blue Cross Blue Shield of New Jersey HMO HIX	F	B	C	C	C	B	C	C

Health Exchange Coverage – Medical Drug Benefit

Table 6: Medical Drug Benefit Access Scores: Largest 25 Plans by Covered Lives

Health Exchange Plan Medical Benefit	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
Kaiser Foundation Health Plan CA HMO HIX	A	B	A	A	A	B	A	A
Florida Blue Health Plan Care Choices HMO HIX	F	F	F	F	F	F	F	F
Oscar FL PPO HIX	F	F	F	F	F	B	F	F
BCBS of Texas Marketplace 6 Tier HIX	F	F	F	F	F	F	F	F

Table 6: Medical Drug Benefit Access Scores: Largest 25 Plans by Covered Lives (continued)

Health Exchange Plan	Crohn's Disease	Multiple Sclerosis	Psoriasis	Psoriatic Arthritis	Rheumatoid Arthritis	Lupus Nephritis	Ulcerative Colitis	Average Across All Conditions
Blue Shield of California PPO HIX	F	C	F	C	F	F	F	F
Fidelis Care Essential Plan	C	C	C	C	B	B	C	C
Bright Health Texas HMO HIX	F	F	F	F	F	F	F	F
Bright Health Florida PPO HIX	F	F	F	F	F	F	F	F
Ambetter from Superior Health Plan HMO HIX	F	F	F	C	F	F	F	F
Ambetter from Peach State Health Plan HMO HIX	F	C	F	C	F	F	F	F
BCBS of North Carolina PPO HIX	F	F	F	F	F	C	F	F
Florida Blue Health Plan CareChoices HSA HMO HIX	F	F	F	F	F	F	F	F
Friday Health Plans Texas PPO HIX	F	F	F	F	F	F	F	F
Ambetter from Sunshine Health HMO HIX	F	C	F	C	F	F	F	F
Florida Blue Health Plan Care Choices PPO HIX	F	F	F	F	F	F	F	F
Florida Blue Health Plan ValueScript HMO-HIX	F	F	F	F	F	F	F	F
Blue Cross Blue Shield of Illinois HMO HIX	F	F	F	F	F	F	F	F
Oscar FL HDHP HIX	F	F	F	F	F	B	F	F
Bright Health NC HMO HIX	F	F	F	F	F	F	F	F
BlueCross BlueShield of South Carolina PPO HIX	F	F	C	F	F	F	F	F
Blue Shield of California HMO HIX	F	C	F	C	F	F	F	F
Affinity by Molina Essential Plan	F	F	F	F	F	F	F	F
SelectHealth Utah HIX HMO	F	F	F	F	F	F	F	F
CareFirst BCBS MD HMO HIX	F	F	F	F	F	F	F	F
Horizon Blue Cross Blue Shield of New Jersey HMO HIX	F	C	C	C	C	F	C	C
EmblemHealth Essential Plan	F	F	F	F	F	B	F	F
Priority Health HMO 5 Tier HIX	F	F	F	F	F	F	F	F
Oscar TX PPO HIX	F	F	F	F	F	B	F	F

Conclusion

People living with autoimmune conditions rely upon accurate diagnoses, medication therapy, and lifestyle interventions to prevent and delay disease progression and improve health. Unfortunately, this study shows that far too many patients face significant barriers to access the medicines their doctors prescribe regardless of the type of insurance coverage they have. Choice among health plans is a hallmark of the American health insurance system, yet this analysis shows that people living with autoimmune conditions have few, if any, coverage choices that do not involve significant to severe access restrictions. The fact that this score card does not include actual out-of-pocket costs such as the size of deductibles, coinsurance and copayments, and deployment of copay accumulator or maximizer policies, means it likely represents a conservative perspective of the barriers these patients and their physicians face in obtaining needed care.

This study was commissioned by Let My Doctors Decide for in-depth analysis and research from MMIT.

ABOUT LET MY DOCTORS DECIDE

LMDD is a national partnership of leaders across health care working in support of a simple goal: treatment decisions should always be made by patients and trusted health care professionals, not insurance companies or pharmacy benefit managers. Founded in 2017, LMDD brings together patients, providers, and advocates – especially those from the autoimmune disease community – to raise awareness about affordability and access issues. Learn more at letmydoctorsdecide.org

ABOUT MMIT

MMIT, a Norstella company, believes that patients who need lifesaving treatments shouldn't face delays because of the barriers to accessing therapies. As the leading provider of market access data, analytics and insights, our expert teams of pharmacists, clinicians, data specialists and market researchers provide clarity and confidence so that our clients can make better decisions.