Florida Insurers Cited for Alleged Hepatitis Discrimination

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Over the past year, the majority of Florida's health insurers have put life-saving viral hepatitis cures in their highest-cost drug tiers—a controversial, potentially illegal move that health advocates argue drives up patient co-pays and effectively limits treatment access in the interest of company profits, according to The AIDS Institute.

The health advocacy group, based in Washington, DC, previously filed similar complaints against four Florida health insurers for placing HIV drugs on their highest-cost tiers. However, follow-up analyses have revealed that these allegedly discriminatory health plans are much more widespread for people living with hepatitis B and C viruses (HBV and HCV).

In their report, researchers at the nonprofit discovered that eight out of 12 major insurers in Florida have placed hep B and C drugs in their highest tiers, which in return demand insurance co-payments between 30 and 50 percent for the total cost of treatment. In practice, that would mean an HCV-positive person enrolled under these plans would be required to pay up to $40,000 out-of-pocket for a cure, even with health insurance coverage.

Florida's Humana, Cigna, CoventryOne and Health First plans were specifically called out for their restrictive, highly expensive hepatitis policies, while just two companies, Florida Blue and United Healthcare, were said to have provided "reasonable" cost-sharing programs for hep medications.

The report notes that under the Affordable Care Act (ACA), it is illegal for health insurers to discriminate against beneficiaries based on their illness through plan benefit design. Advocates also noted that by 2016, the ACA make moves to ensure that patient cost-sharing be capped at $6,600 for all individuals enrolled in qualified health plans.

Moving forward, Florida's insurance commissioner has also stated that he will not certify any 2016 plans that engage in these discriminatory practices.

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