Partnership for Part D Access

Six Protected Classes: The Patients and Costs Behind the Policy

Living with Parkinson's Disease, Robert, Age 80

Robert's Story

Robert has Parkinson's disease psychosis. A medication controls his hallucinations and delusions without worsening mobility, allowing him to remain at home with support from his son and a home health aide. Losing access and switching to an older antipsychotic could **worsen his motor symptoms, cause a serious fall, and accelerate frailty.** He could require institutional care five years early, **increasing caregiving demands, depleting family assets, forcing the sale of his home, and ultimately shifting costs to Medicaid.**

What are the Six Protected Classes?

Medicare's Six Protected Classes policy requires Medicare Part D plans to cover **all or substantially all** FDA-approved drugs in these categories. This policy exists to ensure that people who rely on these medications are able to access the full range of therapies for their conditions, which are among the most serious and clinically complex.

The Numbers: What Coverage Disruption Would Cost

Table 1. Payer-Borne Costs Associated with Loss of Access to Robert's Parkinson's Disease Psychosis Medication

Category	ED Visits (Incl. Transport)	Inpatient Rehabilitation	Additional Specialist Visits	Home Support	Additional Institutionalized Care	Total Cost to Medicare
Estimated Cost	$814	$19,371	$537	$853	$173,940	**$195,853**

Table 2. Patient Out-of-Pocket Costs Associated with Loss of Access to Robert's Parkinson's Disease Psychosis Medication

Category	OOP: ED Visits (Incl. Transport)	OOP: IRF	OOP: Additional Specialist Visits	OOP: Home Support	OOP: Additional Institutionalized Care	OOP: Wages	Total OOP Cost
Estimated Cost	$231	$1,736	$107	$170	$300,000	$1,548	**$303,792**