Cell and gene therapy coverage: what benefits leaders should know

How rare these claims are, how stop-loss can cover them, the 2025 change to the stay near care, and 5 questions for your insurer.

Cell and gene therapy claims are rare and a small share of plan spending

About 9 in 100,000

people in employer health plans received a cell or gene therapy in a year.[5]

About 0.5%

of total plan spending went to these patients, counting all of their care.[5]

- EBRI's study covers employer plan claims from 2018 to 2022. These are averages across plans, not a forecast for yours.[5]

Most CAR-T cell therapies now have a 2-week minimum stay near care, down from 4

This matters if your plan helps with travel and lodging for treatment. FDA updated the labels for approved CAR-T cell therapies in June 2025.[1]

- For most approved CAR-T cell therapies, patients stay near a healthcare facility for **at least 2 weeks** after the infusion, down from 4. One product's label now says at least 1 week.[1,2,7]
- For most, patients are advised not to drive for **at least 2 weeks**, down from 8.[1,2,7]
- Treatment centers no longer need REMS certification. FDA expects this to improve access, especially in rural areas.[1] Manufacturers and health plans still decide which centers give it.

> Monitoring continues after the required stay, and some side effects can start later. The stay is a minimum, not the total time away from work.[1,7] Before that stay, collecting the cells, making the treatment and giving it back takes about 3 to 5 weeks.[8] That includes a few days of chemotherapy just before the infusion.[7]

Most employers cover cell and gene therapy

- Carriers' book-of-business data shows 99–100% of commercial plan sponsors broadly cover gene and cell therapies.[3]
- In a 2026 survey of 53 employers, 74% currently cover cell and gene therapies.[4]
- In a 2026 survey of 47 coalition employer members, 40% named cell and gene therapy carve-outs as a strategy they may consider next, and 40% named centers of excellence.[6]

Your stop-loss may already cover cell and gene therapy

- **What most policies do.** Most stop-loss insurers cover a cell or gene therapy claim like any other claim. Insurers call this plan mirroring: the policy pays back what your health plan pays. Some policies exclude or limit these therapies, so check yours.[3]
- **Other ways to manage the cost.** Centers of excellence (selected treatment centers), reinsurance, and payment tied to results, such as value-based agreements or warranties.[3,5]
- **When a carve-out can make sense.** If your stop-loss insurer lowers your price enough for removing the risk. Ask what the discount would be.[3]
- **What peers did first.** In a 2026 survey of 53 employers, the most common step taken to manage cell and gene therapy risk was reviewing the stop-loss policy (37%).[4]

CFO SUMMARY

How often: about 9 in 100,000 people in employer health plans received a cell or gene therapy in a year.[5] **Share of spending:** about 0.5% of total plan spending, counting all of their care.[5] **Who pays:** most stop-loss insurers cover these claims like any other. Check that your policy doesn't exclude or limit them.[3] **What to do:** ask your stop-loss insurer how your policy covers cell and gene therapy, and what happens at renewal. These are averages across plans, not a forecast for yours.

5 questions for your stop-loss insurer

Take these to your stop-loss insurer or your broker or consultant. Their answers show what your own policy covers.

1. Does our stop-loss policy cover cell and gene therapy claims? Does it exclude or limit them?[3]
2. At renewal after a large claim, could the insurer set a higher deductible for that person (called lasering), or raise ours?
3. Will a gene therapy claim raise our price? Ask whether it counts in our experience rating (pricing from our own claims history).
4. If we carve it out of stop-loss, how much would our price drop, and who would pay these claims instead?
5. What else can manage the cost: centers of excellence, reinsurance, or payment tied to results?[3]

Next step: get a short briefing for your benefits or finance team at **whatiscelltherapy.org**.

References

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