

2024's PRESCRIPTION FOR SUCCESS

Q&A



At RxBenefits, we're dedicated to helping self-funded plan sponsors and their benefit advisors prepare for the changes the pharmacy industry may bring.

During our webinar, "2024's Prescription for Success," we received a wide variety of questions from participants. We've compiled all the questions and their answers here to provide you with insights from top industry experts. From GLP-1 coverage concerns to what conditions are driving rising drug costs, we've consolidated the answers you need to take on 2024 with confidence.

For more insights from top pharmacy experts, you can [watch the webinar on demand here](#).

Q Address the potential savings generated by carving out versus allowing a large health plan or a third-party administrator (TPA) to manage pharmacy benefits.

A A carved-out pharmacy arrangement can provide dedicated pharmacy expertise, clinical oversight, and tailored solutions necessary for ensuring the pharmacy benefit receives the same due diligence as the medical benefit.

We often see 20-25% savings on the contract value alone, and that's after accounting for carve-out fees. That doesn't include the additional 5-7% savings achievable through a proactive approach to managing high-cost medications hitting the market with Protect. This data is based on RxBenefits' internal reporting. For a free, detailed analysis of the impact on a specific plan, request a free [Pharmacy Performance Analysis](#).

FAQ: 2024's Prescription for Success



Q What medical conditions are driving 70% of prescription costs?

A RxBenefits categorizes medications into therapeutic categories. For 2023, the top six categories include antidiabetes, anti-inflammatory, dermatological, oncology, HIV, and asthma/COPD medications. [Learn more about the latest specialty drug trends here.](#)

Q Are GLP-1 shortages still a concern?

A Shortages remain a concern due to the high demand for these medications, potentially leaving members without drugs for extended periods. This can lead to regression for key health factors such as lowering blood glucose and weight loss.

Q Is there a significant positive impact from using GLP-1s in the short term?

A GLP-1s are known to have substantial short-term impacts, such as weight loss and improved health markers including lowering blood glucose and blood pressure. Long-term results may not be realized for several years and are tied to individual patient responses. Like all medications, there are known side effects from using GLP-1s, including stomach paralysis and gallbladder issues.

Q What is the trend in employers' GLP-1 coverage?

A In the RxBenefits Book of Business, every client covers GLP-1s associated with diabetes treatment. The coverage decreases to approximately 25% for weight management. Sectors prioritizing employee satisfaction and recruiting challenges, like healthcare, manufacturing, and technology, tend to cover GLP-1s for weight loss at higher rates.

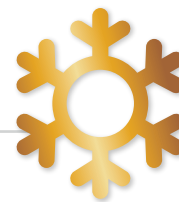
Q Is there a general percentage or factor for an ERISA plan not covering GLP-1s?

A Using a high-level approach, a 1.6% utilization rate on a 1,000-member group could lead to a 12.3% increase in net plan costs. This is a potential 7.8% plan cost increase per 1% utilization, based on assumptions. Assuming six months of utilization per member per year, plan costs may increase 3.5% when covering GLP-1s for weight loss based on plan design.

Q Can you speak about compounding and how GLP-1s have possibly been misused?

A Compounding semaglutide has increased. Many are oral formulations, which tend to have a higher side effect profile, but compounded injectable semaglutide is appearing more often. For plan sponsors who cover weight loss medications, RxBenefits recommends a compound management strategy with a maximum dollar limit on compound agents. For plan sponsors that don't cover weight loss medications, these bulk powders used for compounding are often excluded from coverage.

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Q Are diabetic supplies covered by all carriers or is it plan-specific?

A Most diabetic supplies are covered on the pharmacy benefit due to contractual discounts and accessibility. Some products, like insulin pumps, are limited to pharmacy distribution. We recommend reviewing contracts for individual clients.

Q What's the difference between Cigna's Embarc program and RxPharmacy Assurance, RxBenefits' sister company?

A Cigna's Embarc program focuses solely on gene and cell therapy solutions. RxPharmacy Assurance, on the other hand, is a supplemental stop-loss program that addresses all specialty conditions excluding gene and cell therapy.

Q What is the future of manufacturer assistance programs?

A The future of manufacturer assistance programs is uncertain, pending legislation. For now, they remain a viable resource, and RxBenefits will continue monitoring the landscape on behalf of our clients.

Q Are there generic alternatives for PrEP medications?

A There is a generic for Truvada, the preferred PrEP agent on most PBM formularies.



If you have any questions, remember that the RxBenefits' Client Services team is here to help Monday – Friday from 7:00 a.m. to 6:00 p.m. CT at **866.769.5987** or **ClientServices@rxbenefits.com**.