

Providing greater cost transparency for plan members and providers

Real-time prescription benefits provide visibility to member plan and cost information across multiple points of care

December 8, 2020

 **CVS**Health[®]

 Health Partners Plans





Formulary and plan design strategies are driving lower costs for members



Nearly 85% of members spent less than \$300 on their medications last year

CVS Health is committed to helping members find the most affordable options to keep them healthy



▶ **Sticker shock at the pharmacy can still happen...**

▶ **Growth in high deductible health plans means consumers shoulder the responsibility of navigating health and prescription benefit plans to make the most cost-effective choices**

The source for data in this presentation is CVS Health Enterprise Analytics unless otherwise noted. Please see the disclaimer page at the end of this presentation for more information.



Real-time prescription benefits provide greater cost transparency for members and providers



Greater visibility to plan member out-of-pocket (OOP) costs, lower-cost alternatives and benefit information



Helps providers and members make more informed treatment decisions



Integrated into prescriber's electronic health record (EHR) and workflow

Informing decisions through plan and cost transparency across all member touchpoints

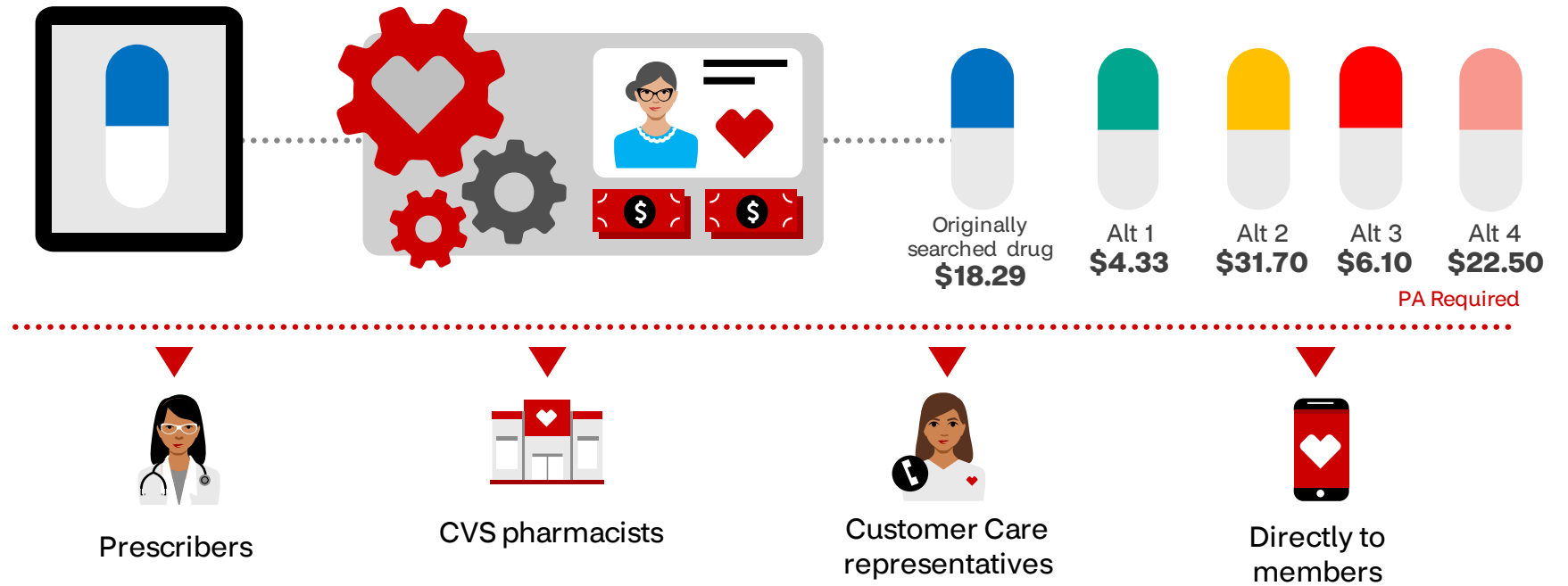
With **real-time prescription benefits**, members and providers will:

Know if the drug is covered and the member OOP cost

See up to five clinically appropriate alternatives specific to the member's plan design

Prescribers can also see which options require prior authorization (PA) or have other restrictions

Our proprietary engine, **Script Intelligence**, powers our unique database of clinically mapped therapeutic alternatives



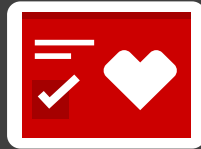


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Appendix
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Ease of use for prescribers



A response on alternative therapies within **1 second** on average



An approval decision on an electronic PA request in as little as **6 seconds**

This helps get more affordable medications to members faster



Real-time prescription benefits help ensure the right prescription is written from the start

Access and utilization snapshot – HPP Medicaid/CHIP

Prescriber Adoption - September 2020

Your total number of prescribers

11,078

Your total number of prescribers using real-time prescription benefits

1,638

% of your prescribers using real-time prescription benefits

14.79%

vs. CVS Health average (% of prescribers using real-time prescription benefits)

30.12%

Your total e-prescribed claims

300,863

Your e-prescribed claims impacted by real-time prescription benefits

25,233

% of your e-prescribed claims impacted by real-time prescription benefits

8.39%

vs. CVS Health average (% of e-prescribed claims impacted by real-time prescription benefits)

7.04%

Your detailed report breaks this information down by market segment, physician geographic location and different time periods.

Access and utilization snapshot – HPP Medicare

Prescriber Adoption - September 2020

Your total number of prescribers

3,960

Your total number of prescribers using real-time prescription benefits

298

% of your prescribers using real-time prescription benefits

10.05%

vs. CVS Health average (% of prescribers using real-time prescription benefits)

30.48%

Your total e-prescribed claims

84,488

Your e-prescribed claims impacted by real-time prescription benefits

3,334

% of your e-prescribed claims impacted by real-time prescription benefits

3.95%

vs. CVS Health average (% of e-prescribed claims impacted by real-time prescription benefits)

7.10%

Your detailed report breaks this information down by market segment, physician geographic location and different time periods.

Legal disclaimers

The source for data in this presentation is CVS Health Enterprise Analytics unless otherwise noted.

All data sharing complies with applicable law, our information firewall and any applicable contractual limitations.

Adherence results and savings projections are based on CVS Caremark data. Actual results may vary depending on benefit plan design, member demographics, programs implemented by the plan and other factors. Client-specific modeling available upon request.

The Maintenance Choice program is available to self-funded employer clients that are subject to ERISA. Non-ERISA plans such as fully insured health plans, plans for city, state or government employees and church plans need CVS Caremark legal approval prior to adopting the Maintenance Choice program. Prices may vary between mail service and CVS Pharmacy due to dispensing factors, such as applicable local or use taxes.

Specialty Expedite is available exclusively for providers who use compatible electronic health record (EHR) systems, including Epic Systems and others that participate in the Carequality Interoperability Framework.

Specialty delivery options are available where allowed by law. In-store pick up is currently not available in Oklahoma. Puerto Rico requires first-fill prescriptions to be transmitted directly to the dispensing specialty pharmacy. Products are dispensed by CVS Specialty and certain services are only accessed by calling CVS Specialty directly. Certain specialty medication may not qualify. Services are also available at Long's Drugs locations.

ExtraCare Health program availability subject to Legal and Tax approval. Client adopts the ExtraCare Health Card as part of its plan benefit. Clients must meet Underwriting criteria to implement the ExtraCare Health Card.

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