Innovations in Savings and Support

As a group benefits partner, we understand how essential it is to provide affordable drug benefits to our plan sponsors and their members, especially given the rise in prescription drug costs over the past two decades.

Our solution for employers has always been value for investment and finding ways to spend more wisely. Our approach to this evolving landscape offers you the opportunity to do just that – ensuring your plans are comprehensive but not necessarily all-inclusive.

• Balancing necessity, effectiveness, and cost – For more than two decades our Medication Advisory Panel (MAP), a panel of internal and external physicians and other health care professionals, has considered the cost-benefit relationship of new drugs before adding them to our approved drug lists, giving us unique insights and relationships with drug manufacturers.

• Controlling costs and treatment for high-cost medications – Our Special Authorization process, led by a team of on-staff nurses and health care workers, follows MAP’s guidance on high cost drugs. They implement clinical criteria that must be met before the prescription is eligible for reimbursement or renewal, helping control costs and treatment.

• Manufacturer Agreements – Our MAP review process enables us to determine whether the therapeutic benefits of a drug justify the cost, or if there is a risk of off-label utilization. These unique insights position us to be able negotiate value-focused agreements with drug manufacturers on behalf of our clients.

• Controlling drug markup and dispensing fees – We operate our own provider network, which gives us control of our relationships with pharmacies across the country to ensure fair pricing for dispensed drugs.

• Focusing on health outcome, not the medication – Mandatory Generic Substitution and Maximum Allowable Cost allow plans to achieve savings without compromising member health.

• Aligning with provincial programs – As part of the national network of Blue Cross plans, we leverage detailed knowledge for every province in Canada, and ensure your benefit coverage avoids duplication and reflects the regulations and programs of each province.

• Managed Formulary – With a range of customizable options, including tiered formulary and step therapy, we build plans that reflect the unique goals and needs of each client.

Our Special Approach

Health Benefit Specialist

Expertise, relationships, and technology investments

Our Tools for Drug Plan Management
The sustainability focus reflected in our approach is seeing a new level of interest across the industry, caused by the rising impact specialty drugs are having on plan costs. Until recently, many plans have seen these cost impacts offset by savings from a substantial numbers of brands coming off patent (and available as generic). This period is coming to a close, and for plans that have open or minimally-managed formularies the loss of new savings from generics – combined with increased costs for specialty drugs – could have a dramatic impact on plan sustainability.

Specialty drug trends continue to grow – last year our MAP reviewed 150 drugs that fit our specialty criteria (over $10,000 per year), compared to just three drugs submitted in a year a decade ago.

A complex challenge
Specialty drugs are high-cost medications, such as biologics, used to treat chronic or difficult health conditions. The prescription and treatment process for members can be complicated as they:
- Require prior authorization approval for coverage
- Often require infusion at a clinic or specialty pharmacy
- May involve special handling, administration or monitoring and ongoing education and support

What types of conditions can they treat?
- Rheumatoid Arthritis
- Hepatitis C
- Cancer
- Multiple Sclerosis
- Crohn’s Disease
- And many others

Healthier, more productive members
These new treatments are creating effective options for many health conditions that until now appeared untreatable or incurable. For people suffering from conditions treatable with specialty drugs, those medications can be truly life changing. They can provide hope, return to productivity, and overall wellbeing, while potentially reducing or eliminating disability costs.

That’s one important reason we take our responsibility in helping plan sponsors meet the challenge of rising healthcare costs so seriously.
Our Patient-first Network - Our enhanced approach facilitates the interaction between the patient support program, physician and pharmacists to proactively manage the case for the member from prescription and treatment to renewal. This includes partnerships with drug manufacturer patient support programs that provide members with one-on-one patient support throughout their treatment. If appropriate, our case managers will leverage our provider network, including pharmacists, to improve patient health outcomes.

Specialty pharmacy agreements* - Patients diagnosed with serious chronic diseases requiring complex treatments can now access a network of specialty pharmacies to ensure they are provided with expert clinical care. Our specialty pharmacy agreements also deliver additional savings for plan sponsors through contained dispensing fees and markups on specialty drugs.

Strategic pharmaceutical partnerships - We have added resources to our Drug Management Solutions team focused on leveraging and cultivating strategic relationships within the pharmaceutical industry. This is helping achieve the appropriate use and cost of pharmaceuticals and integrated technologies, and ensures that plan members continue to have access to valuable and innovative drugs at fair prices:

- Negotiate lower drug prices
- Pay only for appropriate place, duration and dose of medications
- Obtain predictable maximum cost of treatments
- Secure member access to drugs plus support programs and tools
- Demonstrate measurable value and outcomes of treatment

To learn more about our approach to drug plan management contact us today.