

# Flip the Script on your Pharmacy Spend





Tired of paying to much for Rx? Ask these questions of your Insurance Company, Pharmacy Benefits Manager or broker:

How do you provide access to data?
Will I have access to your claims system?
Are we able to adjust this contract?



# How do you provide access to data?

You pay the claims and you should have access to the data. Without it, you and your partners have no idea how to plan, what your plan trends are and how to prepare for the future.

### Also ask:

How often are you able to provide a detailed claim file?

Sometimes, there are technology issues that prevent you from having access to live data. This will change as technology resources evolve, but you can't wait until then! You need to know now what is happening in your plan. Your report should look something like this:



Do you itemize the amount paid to the pharmacy?
This is important - this will confirm if there is spread pricing in your plan and allow you to see what other "fees" might be hiding in plain sight.

How often will you provide this data?

At a minimum, you should receive this on a monthly basis. Once you and your advisor have a solid understanding of what is happening, you might want to reduce to a quarterly basis with some alerts for anything unexpected.



# Will I have access to your claims system?

If you have direct, read-only access to the claims system (with de-identified data), you do not need to rely on anyone to pull a report for you. You can access data as you see fit.

Are you able to give our advisor access to the claims system?

Depending on the Insurance Company, your broker will already have limited access. Make sure they can see what you see. It will allow them to plan more effectively on your behalf.

Are you able to give me access to the same screen that the PBM has access to?

If you can get this, you want it! It will allow you to see all the data points that affect your plan in real time. This is the double check. If you have access to this data, notes, everything that will allow you — or your advisor – to understand what is happening. You will have a complete view of what is happening in the plan.

Are you able to provide the notes?

You (or your advisor) want to see what is happening to drive members to the most effective treatment. While this is not your responsibility to execute, you do want to see that it is being done. Access to the pre-authorization notes and care management notes will make sure that those services are working effectively.

What is the specialty drug denial rate?

And it doesn't quite mean denial! It means there is a speed bump in the road, to make sure your providers are enforcing the rules you design. You might need some help understanding how this works, and you still want to see it.



# Are we able to adjust this contract?

### **READ YOUR CONTRACT!!**

It is important that the contract reflect fiduciary responsibility to you. Make sure you know if there are any penalties for reduction in members, early termination or any other reason; make sure all third-party revenue comes back to you.

Are you obligated to act in our interest?

If they are not obligated to act in your interest, they will work in their own interest. This is understandable – PBMs are businesses too. And they should make a profit; just not an unreasonable profit at your expense.

Do you believe your role is to act in our best interest or your own?

If they don't believe their responsibility is to you, RUN. You will have an extremely difficult time getting your hands on any information you need to manage your plan effectively.

How will you assure us that all third-party revenue is returned to us?

If you can't read the language contractually, you are not getting it back. And don't accept an admin credit. You have no way of measuring if the credit is an accurate representation of your third-party revenue. You wouldn't accept that in any other part of your business, don't accept it here.



Employers often have a hard time getting this information. Once received... they usually don't like what they see.

## Do it anyway.

The cost of inaction is high – for your benefits plan, your workers comp mod, your employees... **YOUR PROFIT!** 

If your profit is \$1,000,000 a year and you are losing \$300,000 on your health plan – maybe just on your Rx spend! – You are LOSING 30% of your annual PROFIT.

That can't continue!



We can help with information and solutions when you are ready.

Grab some time on my calendar here:

https://calendly.com/acdepaoli/strategy-session





De Paoli Professional Services has taken care of us for 11 years. Allison and her team have always helped us communicate our benefits to our employees in a way that they understand and can make use of. She also helps to make my workflow simple and as minimal as possible. She is the best!

# **Margaret Garcia**

Business Professional Service, HR Director

I am impressed by Allison's command of real options in an impossibly complex healthcare system.

# Kirsten Gallagher

Dir. of Comm., Global Sourcing Research Network

De Paoli Professional Services has done a terrific job implementing and managing our case. Both Allison and her team are responsive to our needs. Her team is engaging and efficiently helps each employee choose the best benefit solution for their situation. She worked hard to make sure that the proposed solutions were a fit for us and spends the time to make sure it works perfectly for us. We look forward to a continued relationship.

### Nanette Wood

Controller, Don Davis Auto Group

