# The power of an integrated pharmacy solution

Rising consumer costs, the increasing cost and use of specialty drugs and the number of employees with chronic conditions all pose significant challenges to affordable health care. UnitedHealthcare and Optum Rx are partnering to provide integrated carve-in medical and pharmacy solutions to help tackle these challenges.

United Healthcare

# A strategy that delivers results

Prescription drug spend spans both pharmacy and medical benefits. Integrating or carving in pharmacy benefits with medical plans may help optimize existing health support programs, simplify the member experience and lower overall costs. With a standalone or carved out pharmacy benefit manager, it may be difficult to achieve the same results.



#### Improved clinical outcomes

The first fill of a new medication is often the first indicator of a more serious condition—and a critical entry point into comprehensive health support and programs. Without real-time pharmacy claims feeding these programs, they become degraded and run at suboptimal levels.

In many instances, pharmacy claims are a catalyst for clinical programs. Early diagnosis and treatment of chronic conditions can mean the difference between a well-managed condition or one that results in acute health events.

Improved outcomes may be possible when employers can help maximize engagement in existing programs, such as Advocacy solutions and Personal Health Support.



#### Simplified member experience

When pharmacy and medical solutions and benefits are not integrated, the member experience can be more complex. Integration positively impacts the member experience in many ways such as simplifying the prior authorization process and streamlining the prescription process, so members can start taking their medications as soon as possible. What's more, UnitedHealthcare advocates can direct members to lower-cost drug alternatives when they have data, claims and pertinent information at their fingertips.



Referrals to clinical programs are Up to 44 days sooner

with integrated benefits due to real-time pharmacy data enabling earlier identification<sup>1</sup>

# Member benefits include



A cohesive digital experience



One health plan ID card and access to support via an advocate



Referrals to behavioral health if they screen positive for depression



#### Lower overall costs

There is significant cost variability—especially in the specialty drug category, where almost 50% of the spend is on the medical benefit—between pharmacy and medical benefit drugs that treat the same condition. Without visibility to both benefits, clinicians cannot effectively manage to the lowest cost options.

An integrated model provides the full picture. For example, with high-cost drugs it may help ensure clinically appropriate use, identify the lowest-cost benefit (pharmacy or medical), avoid redundant therapies and reduce medication waste.

UnitedHealthcare is leading the industry in driving utilization of biosimilars. A biosimilar product is a biologic product that is approved based on demonstrating that it is highly similar to an FDA-approved biologic product. This is important because it can help drive down drug costs for employers and members—and it's possible when clinicians can harness both medical and pharmacy data.



# Streamlined provider experience to help optimize care and outcomes for members

To help streamline the experience for providers and ultimately members, we design programs that help optimize care. Both Diagnosis to Script (Dx2Rx) and Silent Authorization are only made possible with pharmacy and medical claims.

Provider benefits include streamlined prescription processing, the ability to bypass prior authorization when appropriate and easier access to patient-specific prescription drug lists and cost information. These provider benefits make it possible to help optimize care and outcomes for members.

Integration drives savings beyond just pharmacy

<sup>Up to</sup>

average medical savings guaranteed with UnitedHealthcare Pharmacy<sup>2</sup>

53% average savings with biosimilar

management strategies<sup>3</sup>



#### These programs see results

#### Nearly



of prior authorization requests use automated or auto-decisioning. This helps minimize disruption for members and streamlines the process for providers.<sup>4</sup>

# A connected approach to care

A full view of an employee's medical, pharmacy, clinical, lab and other data may fuel actionable insights to support targeted outreach, leading to more effective clinical care, the ability to empower clinicians and lower total cost of care.

## Driving to the lowest cost, regardless of benefit



Rose, 55, has neuromyelitis optica spectrum disorder (NMOSD), a rare condition. Rose has integrated carve-in benefits with UnitedHealthcare.

## 1

- Rose's provider wants to start her on Enspryng<sup>™</sup>
- Provider submits prior authorization request to UnitedHealthcare
- UnitedHealthcare requires trying Ruxience<sup>®</sup> or Truxima<sup>®</sup> (Rituxan<sup>®</sup> biosimilars) on the medical benefit before receiving approval for Enspryng on the pharmacy benefit
  - Without integration Rose might start on Enspryng on her pharmacy benefit without trying a lower cost medical benefit biosimilar first:
  - Average dose of Enspryng per month: \$26,000

• Rose starts on Truxima biosimilar using her medical benefit and responds to therapy

3

- Without integration Employer costs could be \$23,000+ higher for just 1 employee:
  - Average dose of Truxima per month: \$2,600

### Helping ensure clinically and cost-effective specialty medication



Nicole, 46, was recently diagnosed with multiple sclerosis (MS). Complex conditions like MS require specialty medications that drive higher spend. Integrated solutions are designed to help ensure effective treatment plans.

1 • Nicole and her doctor determine a treatment plan designed to slow the progression of her condition	2 • UnitedHealthcare reviews Nicole's medical plan, revealing what appears to be a cost-prohibitive medication is likely the most clinically effective for her	<ul> <li>3</li> <li>Nicole avoids denials/ appeals and receives her medication infusion at an approved site of care rather than a hospital</li> <li>Without integration Nicole may not have received an option for a lower cost site of care</li> </ul>	• Nicole's condition is stabilizing and she's grateful she doesn't have to go to a hospital for therapy
<sup>Up to</sup> <b>\$29</b> F	advocacy and clin	gs guaranteed with integrated me nical when moving from a highly nanaged population <sup>5</sup>	· · · · ·

## Contact your UnitedHealthcare representative for more information



<sup>1</sup> UnitedHealthcare and Optum, Personal Health Support analysis. June 2021.

<sup>3</sup> UnitedHealthcare 2022 commercial ASO and Fully Insured data. Savings may vary.

<sup>&</sup>lt;sup>2</sup> Average medical PMPM savings for the combined impact of UnitedHealthcare medical and pharmacy based on full year 2021 book of business study of National Account clients. Actual savings will vary depending on client specific attributes including but not limited to the client's risk and demographic profile, actual benefits implemented, and actual member engagement

<sup>4</sup> UnitedHealthcare analytics. 2022.

<sup>5</sup> Average Medical PMPM savings for the combined impact of Clinical, Advocacy, and Pharmacy Integration is based on a full year 2021 book of business (BOB) study of National Account clients, applied to the full vear 2021 NA BOB Medical Net Paid PMPM, and assumes movement from a highly unmanaged population to a managed population. Actual savings will vary depending on client specific attributes including but not limited to the client's risk and demographic profile, actual benefits implemented, and actual member engagement.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.