AccessHealth

2017 Medicare Part D Plans - UPDATE

Each year, there are changes to the Medicare plans which get approved by CMS. Per the communication AccessHealth sent October 26, 2016, below is a brief description of the main differences of the 2017 Medicare Part D contracts as compared to 2016.

Main differences between 2017 and 2016 Medicare Part D contracts by PBM/Plan:

**Aetna:** AccessHealth pharmacies will no longer be preferred in Aetna for 2017.
This means overall reimbursement is improved for AccessHealth pharmacies in 2017 versus 2016 reimbursement. Generics will continue to be MAC’d in 2017; however the contractual Generic Effective Rate (GER) is better than the 2016 preferred GER.

**Anthem:** AccessHealth is exclusive preferred PSAO for 2017.
This is a new preferred plan for AccessHealth pharmacies (we were not preferred in 2016) and no other PSAO is preferred. We anticipate a 16% market share growth and are protected by a lower DIR if the AccessHealth network does not achieve this growth.

**Caremark:** Reimbursement rates and DIR remain the same for 2017 as compared to 2016.
However, the HRM measure has been removed from DIR criteria.

**Cigna:** The DIR is moving from a flat fee DIR to a percentage based DIR.
What this means is that for most generics, the DIR will be less than 2016, but it may be higher for brands. While the DIR will continue to be collected weekly, there is the opportunity to earn back the entire DIR amount, network-wide, for performance at the highest tier.

**Express Scripts (ESI):** AccessHealth will remain preferred in 2017 for Express Scripts Medicare Choice and Express Scripts Medicare Value PDP plans.
These plans will use the same network as it did in 2016; and therefore, the reimbursement and DIR will remain the same for 2017. AccessHealth declined preferred participation in an ESI network now being used by two known plans: ConnectiCare and Priority Health. This means, while AccessHealth pharmacies may still fill prescriptions for these plan members, these patients may have a higher copay at AccessHealth pharmacies for some copay tiers.

**Symphonix:** AccessHealth pharmacies will no longer be preferred in Symphonix for 2017.
In 2016, Symphonix was acquired by United Healthcare. United Healthcare decided to use a network for Symphonix where independent pharmacies are non-preferred providers. This network will include a DIR for 2017. Symphonix members can still get their prescriptions filled at AccessHealth pharmacies, but the member may have to pay a higher copay for some copay tiers.

**Prime Therapeutics:** The DIR has increased from 2016.
AccessHealth pharmacies are preferred in all five of the HCSC states (IL, MT, NM, OK, and TX). We are the exclusive preferred PSAO for 4 of the 5 HCSC states. We share preferred status in Oklahoma with one regional PSAO. We share preferred status with various other PSAOs for other Prime Therapeutics Medicare Part D business.

**Envision:** The DIR has increased from 2016.
2017 DIR criteria now include clinical measures, better positioning AccessHealth pharmacies to maximize annual Pay for Performance dollars.

**Magellan:** Moving from a flat fee DIR to a percentage-based DIR.
This means lower cost prescriptions will reflect a smaller DIR vs. 2016 while higher cost prescriptions will reflect a higher DIR.

**OptumRx:** Will use a DIR in 2017.
In 2016 OptumRx did not collect DIR for any of their networks. There are two OptumRx networks that will use a DIR in 2017, including NON-preferred AARP.