# Your Trusted Benefits Partner





## Our NC Government Clients





- County Governments
- Municipalities
- Government Entities





















150+ across the Southeast



## Our Consulting Advantage

- ✓ We believe no one solution satisfies all needs.
- ✓ Multiple options are required to best meet our customer's needs.
- ✓ Manage Critical Plans for best overall result
- ✓ National Account Leverage with multiple payors
- ✓ That doing the same thing and expecting a different result is a poor expectation.
- ✓ Population Health Improvement and onsite disease management to change members lives





## **Current Pharmacy Landscape**

Pharmacy spending increased to

\$378 Billion

from 2020 to 2021

510/0

Of all pharmacy spending is driven by specialty drugs

20/0

Of the population utilizes specialty medication

Pharmacy spend remains volatile

Utilization will grow due to a robust pipeline of new specialty drugs



New brand launches will contribute ~\$133 billion in spending growth through 2025\*



# Cost Containment Strategies:

# Proprietary PAP Solutions

Developed specifically to pursue access to high-cost specialty and non-specialty branded medications at little or no cost to the member or the plan.

Unlike other PAP solutions that exist in the marketplace today, our unique approach fully integrates with the stop loss carrier providing a highly effective, mutually beneficial and streamlined experience for all stakeholders (stop loss carrier, employer, member, broker, medical administrator, and PBM).

#### **Targeted PAP**

Targeted PAP services (for a single drug) alongside another contracted PBM

#### **Supplementary PAP**

Provides all PAP services (for multiple drugs) alongside another contracted PBM





### Patient Assistance Solutions

#### **Rx Patient Assistant Programs (PAP)**

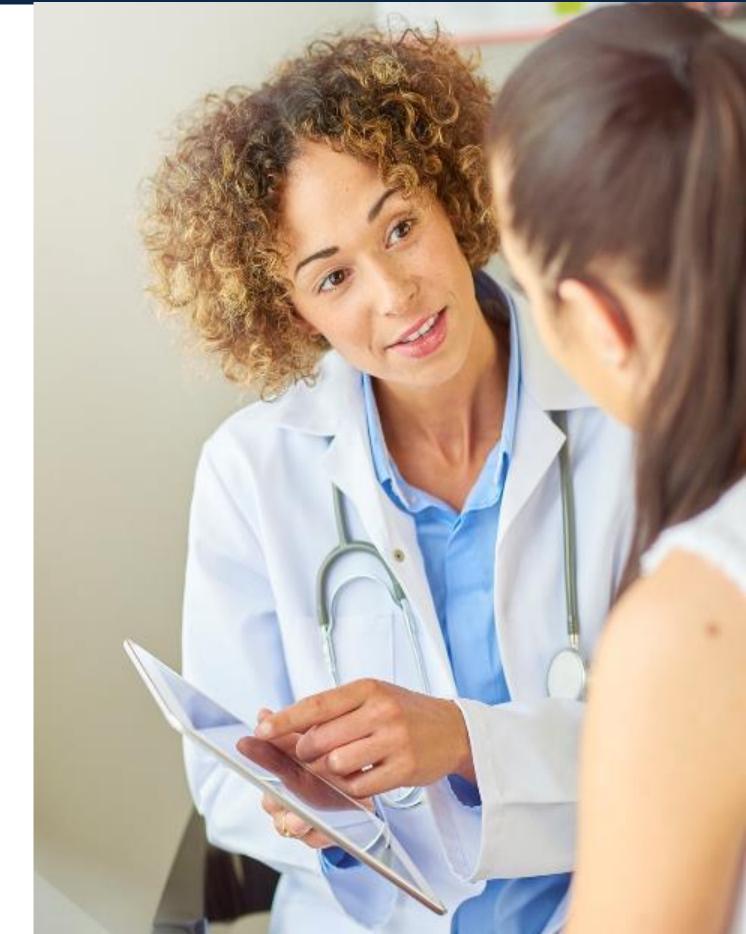
Sourcing high-cost specialty medications directly from manufacturers for qualifying members, eliminating the cost of the prescription for the plan sponsor and the member. Our team of coordinators determines member eligibility for specific specialty drugs and works with the plan, patient and funding source to dispense the drug\*.

#### Stealth partners with Amwins Rx

Multiple options to meet the client where they are. This program places focus on drug(s) causing the most financial risk to the plan and reduces the possibility of disruption to improve the overall member experience.

#### **PAP Case Studies**

Medication	Condition	Net Plan Savings
Strensiq	Hypophosphatasia	\$1,730,000
Idelvion	Hemophilia	\$500,000
Tasigna	Cancer Medication	\$154,660
Gilenya	Multiple Sclerosis	\$118,233
Biktarvy	HIV	\$38,432



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## Member Journey

#### **New Medication**

The member is prescribed a 'covered' medication by their Physician

#### **Amwins Rx**

Amwins Rx is notified of new therapy and initiate's Program Engagement



#### **Physician**

Program Coordinators works with Physician on PAP drug sourcing.



#### \$0 PAP Drug

Member enrolled in PAP and receives drug directly from the manufacturer at nocharge



#### **Member Advocacy**

Program Coordinators work with the member to complete the PAP application



#### Manufacturer

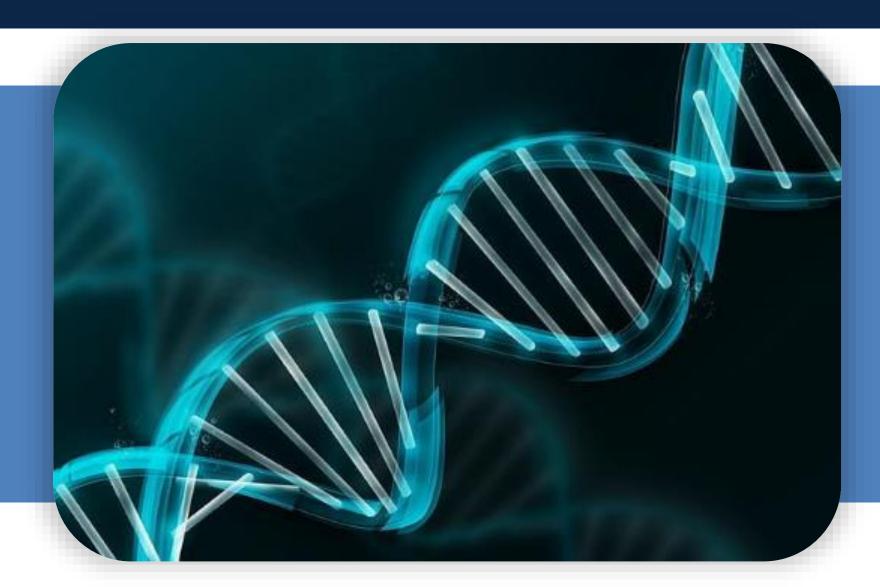
Program Coordinators advocates for PAP eligibility

#### **PBM Bridge-Fill**

The member receives the covered drug under the pharmacy benefit

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## **Gene Therapy Solutions**



28 cellular and gene therapy in market today

- ✓ 22 cellular treatments
- ✓ 6 gene therapy treatments
- ✓ Another **7 10** treatments predicted to be approved by end of 2023

Gene therapy treatments range in price from

\$850,000 - \$3.5M

## **Current Landscape**

#### Luxturna

- Manufacturer and FDA Approval Date:
   Spark Therapeutics; December 2017
- Treats: Leber Congenital Amaurosis (LCA)
- Cost: \$850,000
- Package Insert: <u>Package Insert -</u> LUXTURNA (fda.gov)

#### Zolgensma

- Manufacturer and FDA Approval Date:
   Novartis Gene Therapies, Inc.; May 2019
- Treats: Spinal Muscular Atrophy (SMA)
   Types 1 & 2 (Children ages 2 and under)
- Cost: \$2,100,000
- Package Insert: <u>Package Insert -</u> ZOLGENSMA (fda.gov)

#### Zynteglo

- Manufacturer and FDA Approval Date: BlueBird Bio, Inc..; August 2022
- Treats: Beta thalassemia
- Cost: \$2,800,000
- Package Insert: <u>Package Insert -</u> ZYNTEGLO (fda.gov)

#### Skysona

- Manufacturer and FDA Approval
   Date: BlueBird Bio, Inc..; September
   2022
- Treats: Cerebral Adrenoleukodystrophy (CALD)
- Cost: \$3,000,000
- Package Insert: <u>Package Insert –</u> SKYSONA (fda.gov)

#### Hemgenix

- Manufacturer and FDA Approval
   Date: CSL Behring; November
   2022
- Treats: Hemophilia B
- Cost: \$3,500,000
- Package Insert Hemgenix

#### Adstiladrin

- Manufacturer and FDA Approval Date: Ferring Pharmaceuticals; December 2022
- Treats: Bacillus Calmette-Guerin –
   Non-Muscle Invasive Bladder
   Cancer
- Cost: TBD
- Package Insert

#### Vyjuvek

- Manufacturer and FDA Approval Date: Krystal Biotech, Inc.; May 2023
- Treats: Dystrophic Epidermolysis Bullosa (DEB)
- Cost: \$1.3M over 25 weeks (weekly application)
- Package Insert: <u>Package Insert -</u> VYJUVEK (fda.gov)

#### Elevidys

- Manufacturer and FDA Approval Date: Sarepta; June 2023
- Treats: Duchenne Muscular Dystrophy
- o Cost: ~\$3,000,000
- o Package Insert

#### Roctavian

- Manufacturer and FDA Approval Date: BioMarin; June 2023
- Treats: Hemophilia A
- Cost: ~\$2.9M
- Package Insert

## Program Overview

**Reinsurer**: Backed by insurer with A (Excellent) financial strength rating

Coverage: Offers first-dollar reimbursement for costs incurred by the plan sponsor

#### **Program Details\*:**

Covered Pharmaceuticals	Covered Diseases	Maximum Payable Per Covered Person Per Agreement Year	Cost of Program	
Luxturna	Leber Congenital Amaurosis (LCA) hereditary blindness	\$850,000	\$1.15 per employee	
Zolgensma Spinraza**	Spinal Muscular Atrophy (SMA) Type 1 and Type 2	\$2,200,000	per month (PEPM)	

<sup>\*</sup>Program disbursements are subject to coverage terms and exclusions.

<sup>\*\*</sup>Amwins Gene Therapy Solutions addresses Spinal Muscular Atrophy as a disease state. While Spinraza is not classified as a gene therapy treatment, it is a Chronic Specialty Therapy for patients with SMA. Spinraza is costly, with the initial treatment expense of ~\$750,000 and an additional ~\$375,000 expected annually. We include Spinraza in our program to help reduce this financial burden.

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# Program Advantages Gene Therapy Solutions

#### **Meaningful Protection**

✓ First-dollar protection is given to the plan sponsor

#### **Portability**

✓ Change carriers without disrupting coverage terms

#### **Seamless Contract Management**

✓ Additional layers of complexity are eliminated with Stealth managing contract terms protection is given to the plan sponsor

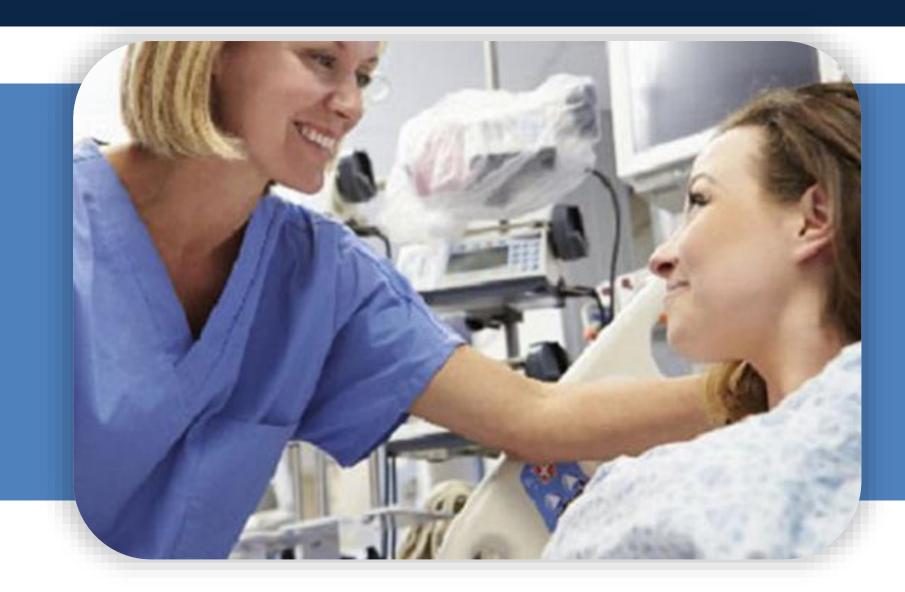
#### **Simplified Billing**

✓ Administrative burden is reduced by including the program fee in the stop-loss bill





## Dialysis Management Services



# Controlling Dialysis Costs

In addition to case management and member experience services, it's critical for plans to have mechanisms in place to help curb the impact of escalating billed charges for dialysis when patients advance from CKD to ESRD and require ongoing dialysis treatments.

## DMS Dialysis Benefit Program

#### Reasonable Value Payment Approach

#### Plan Language

Plan documents must incorporate compliant language to support carving out dialysis treatments in non-discriminatory manner

#### Re-Pricing Methodology

Successfully re-pricing dialysis claims requires a methodology that is rational, defensible, reasonable and not arbitrary

#### **Appeals Support**

Providing expert support to defend against provider appeals on the backend is crucial to protecting client savings



## DMS Dialysis Carve-Out Structure Options

#### **Full Carve Out Approach**

- ✓ Requires network/ASO approval.
- ✓ Carve dialysis benefits entirely out of PPO network and medical plan.
- ✓ Establish separate standalone dialysis benefit plan (may require separate dialysis TPA).

#### No Network Option

- ✓ Exclude dialysis from all PPO networks under medical plan.
- ✓ Amend medical SPD with DMS RVP language for ALL providers.
- ✓ No separate TPA required.

#### **Out-Of-Network Only**

- ✓ Only apply RVP re-pricing to out of network claims.
- ✓ Amend medical SPD with DMS RVP language for OON providers.
- ✓ No separate TPA required.

## **Endorsed Primary Carriers**

\$1.6B+

## In annual premium placements

Once a carrier has been evaluated and marked with our seal of approval, we focus our efforts on growing that relationship, often becoming its largest production source.

































# Our Comprehensive Stop-loss Solution



## With Stealth, you can expect so much more than just a quote.



#### Why Stealth?

- ✓ Carrier Partnerships
- ✓ Independent

  Experts
- ✓ Comprehensive
  Solution
- ✓ Access to more

#### **Confidential and Proprietary**

Stealth-Endorsed Carriers

We thoroughly evaluate each carrier before marking it with our seal of approval and only work with the industry's top markets.



## Population Health Improvement







## Membership Engagement

An integrated approach can change the game!



### Wellness



Health status is well documented as having a significant affect on claims.

#### Conditions such as:

- ✓ Diabetes
- Obesity
- ✓ High Blood Pressure
- √ Cholesterol

Are significant and impactable claims drivers.

Mark III has been is in the business of improving the lives of our customers for over 30 years, working to lead our customers and their employees to a better place.





#### 2022 HEALTHIEST EMPLOYERS AWARDS

- ✓ The Healthiest Employers Award is the nation's leading corporate wellbeing award. This program recognizes organizations taking a more proactive approach to employee health and investing in solutions and initiatives.
- ✓ The employer's assessment is scored on a 1-100 scale and identifies their Healthiest Employers Index (HEI).
- Regionally, HEI scores are compared to companies of similar size.
  Nationally, HEI scores are compared to all participating companies.





#### 2022 HEALTHIEST EMPLOYERS AWARDS

#### **Greater Charlotte Area - 2023:**

- City of Shelby 1<sup>st</sup>
- City of Salisbury 2<sup>nd</sup>
- Cleveland County 1<sup>st</sup>
- City of Gastonia 3<sup>rd</sup>
- Rowan County 5<sup>th</sup>

#### **Triangle Area:**

Durham County – 4<sup>th</sup>

#### **Triad Area:**

- Randolph County 1<sup>st</sup>
- City of High Point 2<sup>nd</sup>

#### Top 100 Across America:

- Randolph County 14<sup>th</sup>
- Durham County 62<sup>nd</sup>
- Cleveland County 94<sup>th</sup>
- City of High Point 95<sup>th</sup>



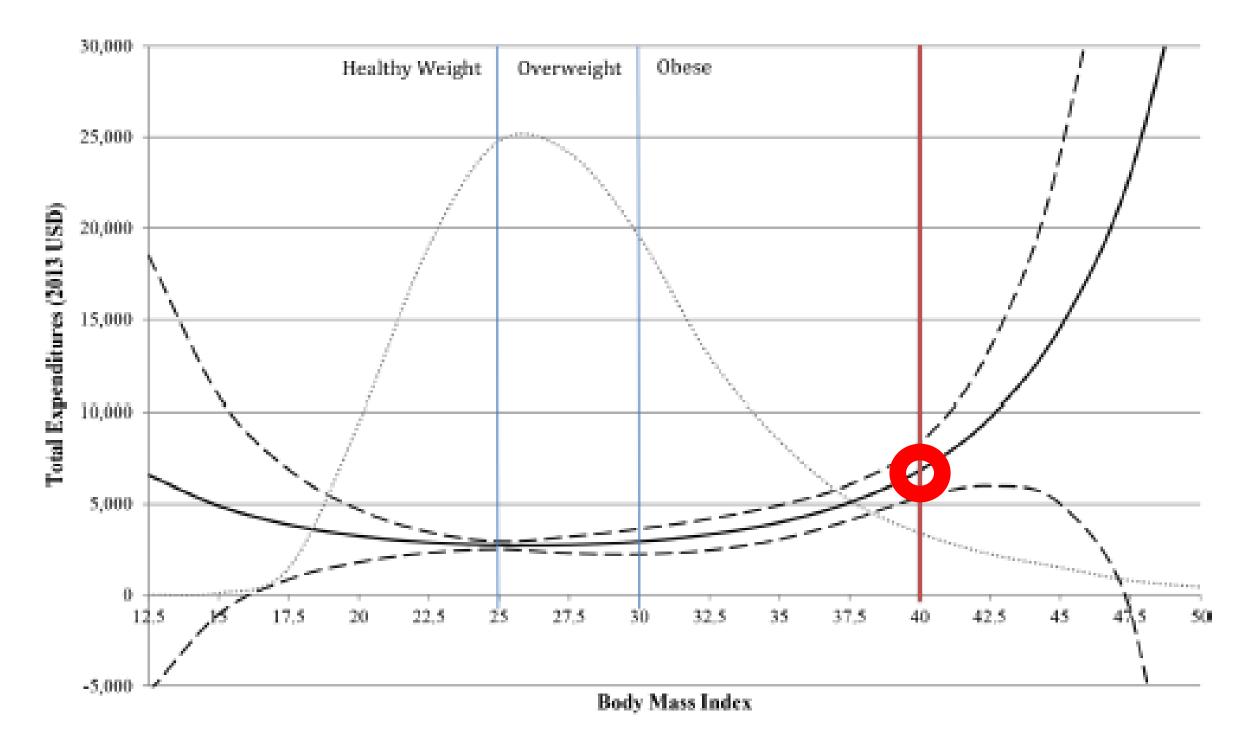


## HealthMapR<sub>x</sub> Program Components

- Participation Incentives
- Pharmacist Care Manager Relationship
- Education and Accountability
- Customer Reporting and Satisfaction Surveys

## Wellness – +40 BMI Cost





Biener A, Cawley J, Meyerhoefer C. J Gen Intern Med 32(Suppl 1):S6–S8 DOI: 10.1007/s11606-016-3968-8.



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## 8-Customer Biometric Avg. Results (n=4737)

	BMI (≥40)	BMI	Weight	Waist	A1c
County: 5 City: 3	14.2%	45.6	290.1	48.0	6.1



## Medical Weight Management Program Criteria



- BMI ≥40
- Members without a diagnosis of diabetes
- 18 years of age or older
- 12-month commitment



## Medical Weight Management Program Criteria



#### Pharmacist Care Manager Visits

- 4 visits/year
- Virtual/Telephonic communication between visits (weekly survey trigger for additional interventions)
- Depression
   Screening
   (baseline, 12-months)

#### Virtual Group Support Sessions

- Presented by Health Coach
- Focused Education Topics each session
- Monthly sessions:
  - Months 1-6
  - Month 8
  - Month 10

## Weekly Survey Check-Ins

- Delivered via email or text
- Provides individualized support to participants
- Screens for behavioral health and weekly challenges

## Digital Scale\* Monitoring

- Weekly Weigh-ins
- Health Portal Monitoring
- App with
   Bluetooth
   Technology

   \*device is optional

## Wellness HMPR<sub>x</sub> Medical Weight Management Program Criteria



BMI	N=	%	BMI	Weight	Waist	A1c
≥40	110	12.7%	45.5	294.1	48.8	6.0
37.50-39.99	55	6.4%	38.5	245.1	43.0	6.0
35.00-37.49	72	8.3%	36.1	232.0	41.6	5.9
32.50-34.99	126	14.6%	33.6	216.4	39.7	5.8
30.00-32.49	125	14.5%	31.1	199.9	37.7	5.8
≥30	488	56.5%	36.6	235.2	41.9	5.9

**Pre-Diabetes with BMI 30 or Greater: 49.7% (243/488)** 

Normal	Prediabetes	Diabetes
← 5.6%	5.7% - 6.4%	6.5% →

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## Cleveland County - MWM



Start Date	Enrollment	Gender	Avg Age	Engagement %
08/01/21	40	30 (F), 10 (M)	49	51% (40/78)

Chronic Conditions (Avg: 5 Conditions)	Parts. (%)
Hypertension	68%
Pre-Diabetes	55%
Anxiety & Depression	43%
Hyperlipidemia	25%



## **HMPR**<sub>x</sub>

## Medical Weight Management Program – 2 Years



Rx Yr. 1 & Yr. 2*	N=	Baseline	Year 1	Year 2	Change	Total Change	Cont. Yr. 2	Part %
Weight	23	271.4	244.6	228.7	-42.7	-982.1	100%	70%
A1c	23	5.7	5.4	5.2	-0.5			
Rx Yr. 1, Not Yr. 2								
Weight	7	267.2	239.5	245.8	-21.4	-149.8	43%	51%
A1c	7	5.8	5.6	5.6	-0.2			
< 3 Rx fills, 2 Yrs.								
Weight	6	307.4	293.0	311.1	+3.7	+22.2	50%	46%
A1c	6	5.5	5.6	5.7	+0.2	<u> </u>		

## **HMPR**<sub>x</sub>

## Medical Weight Management Program – 2 Years



## Adherence to Anti-Obesity Medications (AOMs): HMPR, vs. Non-HMPR, (Regular Medical Care)

	N=	Sum of Days' Supply	Number of Days	Adherence
HMPR <sub>x</sub>	34*	7748	9414	82.3%
Non-HMPR <sub>x</sub>	16	1690	4157	40.7%

<sup>\*</sup>At least one Rx filled



<sup>\*\*</sup> Six did not elect medication

# Medical Weight Management $HMPR_x$ Financial Trending: $HMPR_x$ vs. Non- $HMPR_x$ Program (PMPY)



Year 1		August 2	020 - Ju	ly 2021	August	: 2021 - Jul	y 2022	
	Total	Medical	Rx	Total	Medical	Rx	Total	Change
HMPR <sub>x</sub> Avg	27*	\$3,769	\$117	\$3,887	\$6,769	\$11,091	\$17,859	\$13,973
Non-HMPR <sub>x</sub> Avg	27**	\$7,296	\$296	\$7,592	\$21,531	\$2,270	\$23,801	\$16,209
Differential								\$2,236



<sup>\*</sup> At least 3 prescriptions filled of AOMs

<sup>\*\*</sup> Eleven Termed from insurance during period

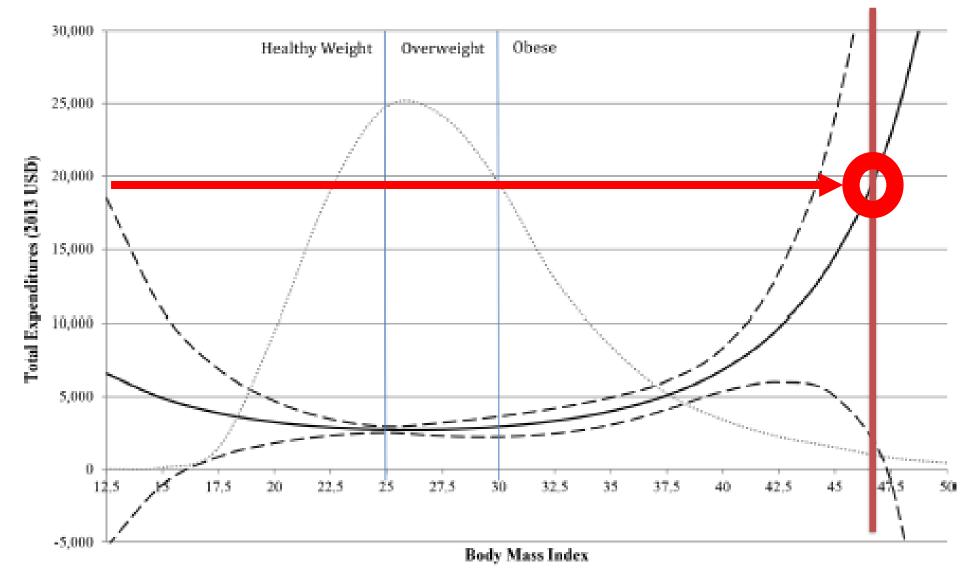
## Non-HMPR<sub>x</sub> Participant – Medical Plan Cost



Cost >20k: 22% (6/27)

### Conditions Increasing Spend

- Coronavirus (COVID-19) (ICU)
- Lap Gastric Bypass/Roux-En-Y
- Fatty Liver Disease
- Pulmonary Embolism
- Diagnosis of Diabetes: 22%





## Diabetes Cost Prevention



	N=	PMPY
Avg. Cost of Diabetes (10-Customers)	893	\$17,594
Avg. Cost of BMI ≥ 40 w/o Diabetes (2-Customers)	112	\$5,483
Difference		\$12,111

Rx Yr. 1 & Yr. 2	n=	Baseline	Year 1	Year 2	Change
A1c	23	5.7%	5.4%	5.2%	-0.5

Normal	Prediabetes	Diabetes
← 5.6%	5.7% - 6.4%	6.5% →

## Return on Investment



Claims Differential	Savings			
Claims Differential: <b>\$16,209 (Non-HMPR<sub>x</sub>) - \$13,973 (HMPR<sub>x</sub>)</b> (slide 13)	\$2,236			
Program Costs (\$105 x 12 months)	-\$1,260			
Savings PMPY Net of Cost	\$976			
Savings Net of Costs (n=27)	\$26,352			
Delaying the Diagnosis of Diabetes	Savings			
Non-HMPR <sub>x</sub> diagnosed with Diabetes (20%) (5 x \$12,111) (slide 15)	\$60,555			
Total Savings	\$86,907			
Program Costs (n=27)	\$34,020			
ROI (=savings net of costs ÷ program costs)	255%			
Each \$1 of program expense recovered, plus \$2.55 on the amount invested				

## Medical Weight Management Customers



- Caldwell County
- Cleveland County
- Durham Public Schools
- Edgecombe County
- Granville County
- Harnett County

- Haywood County
- Hertford County
- Nash County
- Person County
- Rowan County
- Wayne County





#### Diabetes - HealthMapRx<sup>TM</sup> Parts. vs. Non-Parts. (PMPY): 10 Self-Funded Customers

Customers	Start Date	Eligible	Enrollment	Engagement (%)	Length of Program
Sanford	7/1/2017	55	19	35%	2071
Cleveland	7/1/2017	98	89	91%	2071
Salisbury	5/1/2018	60	28	47%	1767
Edgecombe	7/1/2018	73	35	48%	1706
Rowan	7/1/2018	135	78	58%	1706
Halifax	2/1/2019	84	50	60%	1491
Robeson	2/1/2019	189	137	72%	1491
Wayne	7/1/2019	132	62	47%	1341
Prince George	7/1/2020	26	10	38%	975
Person County	10/1/2021	41	22	54%	518
Average		893	530	59%	1514





Diabetes - HealthMapRx<sup>TM</sup> Parts. vs. Non-Parts. (PMPY): 10 Self-Funded Customers

10-Customers		2022			
	Total	Medical	Rx	Total	
HMPR <sub>x</sub> Avg	530	\$7,979	\$9,198	\$17,177	
Non-HMPR <sub>x</sub> Avg	363	\$15,014	\$6,960	\$21,974	
Differential				\$4,797	
NC ESI Avg*				\$20,114	

# THANK YOU! f (o) in









