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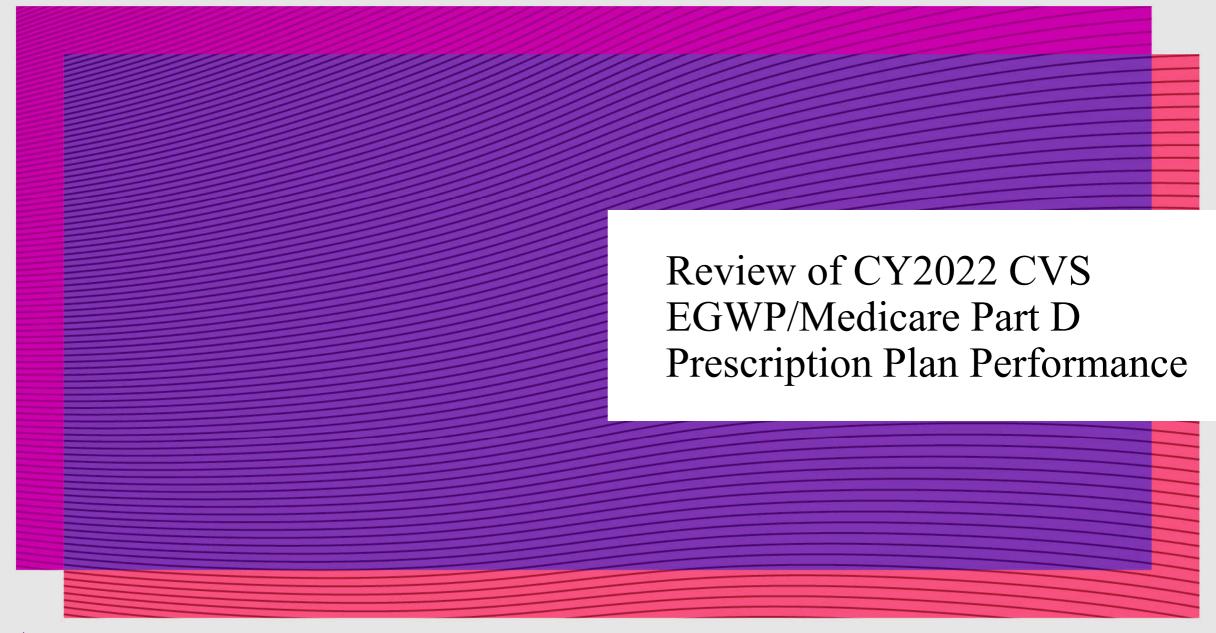
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CY2022 CVS EGWP/Medicare Part D Prescription Plan Key Metrics

	GHIP EGWP
Experience Period	Jan-Dec 2022
Eligible Members per Month	28,162
Total Gross Cost	\$176,901,969
Member Cost	\$8,829,292
Rebates, EGWP Offsets and Subsidies	\$112,896,672
Total Net Cost	\$55,176,005
Gross Cost PMPM	\$523.47
Member Cost PMPM	\$26.13
Member Cost Share	5.0%
Generic Dispensing Rate (GDR)	85.8%
Generic Substitution Rate	98.6%
% Mail Prescriptions (excl Retail 90)	8.1%
Total Specialty Gross Cost	\$67,744,828
Specialty Gross PMPM	\$200.46
Specialty % of Total Gross	38.3%
Specialty % of Total Rx	0.9%

GHIP EGWP compared to CVS Benchmark:

- Higher gross cost per member per month (PMPM)
- Lower member cost share PMPM
- Relatively consistent GDR, and generics were dispensed for nearly 99% of all Rx that had a generic equivalent
- Lower use of mail order due to higher retail 90 prescription utilization (not shown)
- Lower specialty drug gross cost PMPM

See appendix for similar key metrics for Commercial plan performance during CY2022 (July – December 2022).



CY2022 CVS EGWP/Medicare Part D Prescription Plan Performance

- Pharmacy benefits management under the State Employee Group Health plan has been administered by CVS Health since July 1, 2021 for Commercial (non-Medicare) plan participants and since January 1, 2022 for EGWP (Medicare) plan participants
 - Change impacted every participant enrolled in the State Employee Group Health plan
- CY2022 EGWP/Medicare Part D prescription plan performance results are now available for:
 - Financial performance guarantees
 - Member satisfaction survey
- Performance results for the Commercial FY2022 plan year (ending 6/30/2022) were reviewed with the SEBC in December 2022¹ and results for the FY2023 plan year (ending 6/30/2023) will not be available until late 2023

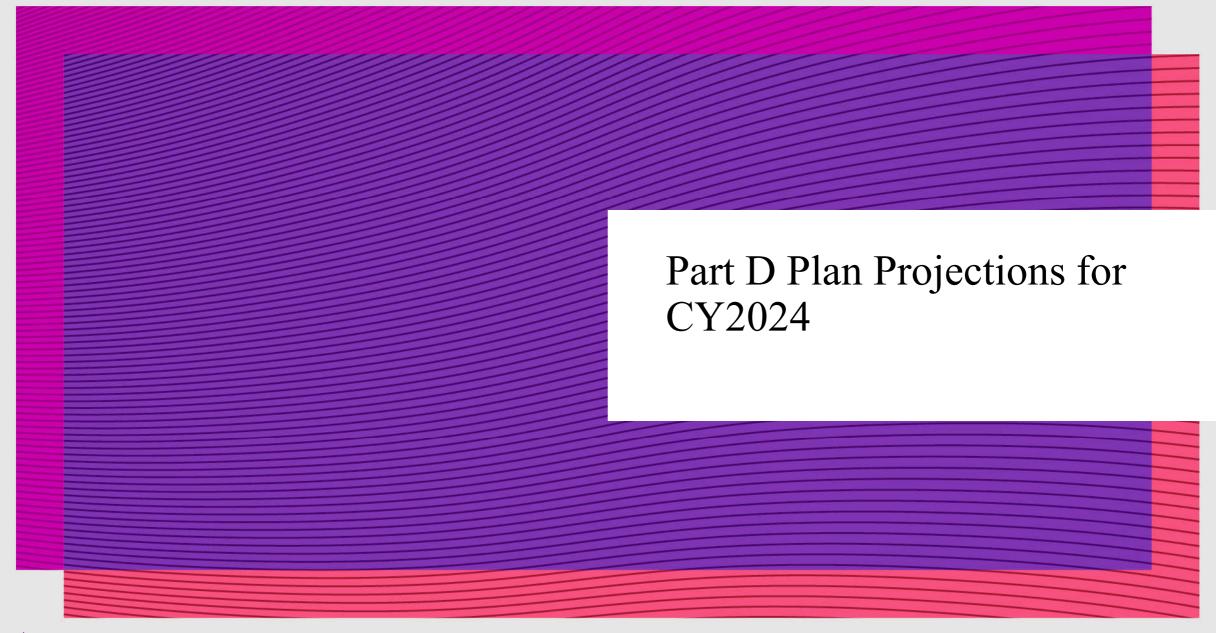
1 For further details about the Commercial FY2022 plan performance, see: https://dhr.delaware.gov/benefits/sebc/documents/2022/1219-cvs-commercial-plan-performance.pdf



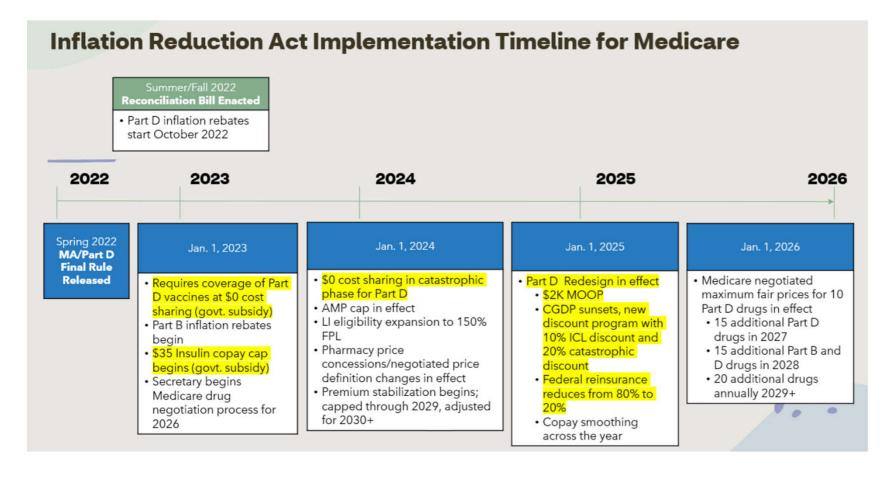
CVS EGWP Performance Guarantee Results, CY2022

- CVS met all performance guarantees (PGs) for the 2022 plan year (1/1/2022 12/31/2022)
- Types of performance guarantees currently in place with CVS for the GHIP EGWP include:
 - Financial accuracy of claims paid
 - Turnaround time to fulfill mail order prescriptions
 - Turnaround time to resolve member issues
 - Response time for coverage determinations (separate PGs for standard and for expedited requests)
 - Member satisfaction survey results
- Member satisfaction survey results are generally positive; highlights include:
 - Overall satisfaction with prescription benefit services: actual result of 94% vs. target of 90%
 - Further details are noted in the appendix





Inflation Reduction Act provisions impacting the State's EGWP



Yellow highlights =
Inflation Reduction Act
provisions that will affect
GHIP EGWP costs

Source: CVS Health.

MOOP = Maximum Out-of-Pocket.

CGDP = Coverage Gap Discount Program, also known as the "donut hole"

ICL = Initial Coverage Limit

Impact of Inflation Reduction Act on CY2024 projected EGWP cost

- CVS estimate of the impact of the Inflation Reduction Act on the State's EGWP for CY2024: Savings of \$5.3M
 - Driven by increase in CMS direct subsidy associated with \$35 cap on insulin copays
 - The State had previously implemented caps on insulin copays and other diabetes supplies and equipment, so EGWP plan costs are already reflecting similar coverage enhancements
- This has already been incorporated in the long-term projections for the GHIP as part of "Other Revenues"



State of Delaware SSI



RESULT

97% 93% 93% 79%

Sample dates



Surv ey method





RESULT

PERFORMANCE GUARANTEE (PG) REPORT CARD

06/17/22 - 09/14/22

4/22 Phone

one CV

CVS Standard 10/24/22 - 10/25/22

OVERALLEVALUATION

Overall Satisfaction With Prescription Benefit Services

RESULT

RESULT 94%

TARGET 90%

RESULT VS. TARGET

+4%

SATISFACTION	WITH CVS CAREMARK	SERVICES
		OLIVIOLO

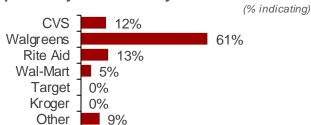
Mail Service Pharmacy
Usage: 23%

Overall satisfaction100%Ease of ordering medication91%Receiving by scheduled date97%



O	erall satisfaction	94%
Courtesy and professiona	lism	94%
Ability to use preferred ph	armacy	96%
Convenience of location		100%

Retail pharmacy most recently used





Overall satisfaction95% ^Right amount of information95% ^Locating prescription information95% ^



Overall satisfaction	
Effectively responding in one call	
Understanding your concern/inquiry	
Options and alternatives provided	



Mobile App Usage: 4%

Overall satisfaction	100%
Right amount of information	83%
Checking status of order	83%

Automated Phone System (APS) Usage: 11%

Overall satisfaction 100% ^
Resolution of request/question 100% ^



Member Communication

Overall satisfaction	98%
Quality of communications	97%
Status updates and reminders	96%



Non-CVS Care mark Service: Drug Benefit Plan

	Overall satisfaction	96%
Medications covered		94%
Out-of-pocket costs		92%
Ability to get prescribe	d medications	93%
	Out-of-pocket costs	Medications covered



Commercial Plan Key Metrics: FY2023, YTD through December 2022

	Commercial Plan (non-Medicare)
Experience Period	July – Dec 2022
Eligible Members per Month	101,532
Total Gross Cost	\$169,170,325
Member Cost	\$10,781,024
Total Net Cost	\$158,389,301
Gross Cost PMPM	\$277.70
Net Cost PMPM	\$260.00
Member Cost Share	5.3%
Generic Dispensing Rate (GDR)	79.0%
Generic Substitution Rate	97.3%
% Mail Prescriptions (excl Retail 90)	4.6%
Total Specialty Gross Cost	\$91,025,679
Specialty Gross PMPM	\$149.42
Specialty % of Total Gross	44.6%
Specialty % of Total Rx	1.4%

GHIP compared to CVS Gov't Benchmark:

- Lower member cost share (as % of total)
- Lower GDR but nearly the same generic substitution rate
- Comparable level of mail order utilization
- Higher specialty gross cost PMPM
- Comparable specialty utilization as % of total Rx