January 1, 2024 Annual Update

Intended for: Consultants, brokers, commercial and health plan employers using the Elixir standardized formularies



Elixir Drug Management Philosophy

Proactive Drug Management

Reduce unnecessary spend with a focus on improving member care

Balanced Formulary Strategy

Safe, effective and affordable medications for members while maintaining or improving the quality of care and limiting financial exposure

Utilization Management

Evidence based clinical strategy to guide the right patient to the right therapy



2024 Notable Updates

- ✓ Overall < 1% member disruption
- ✓ Ongoing formulary maintenance with recent generic availability
- ✓ Victoza to be disadvantaged
- ✓ Flovent HFA/Diskus to be disadvantaged



January 2024 Formulary Update

	National Ex	Select Ex
Positive Tier Change Providing cost savings to our members	Multiple generic products	
Negative Tier Change Move up a tier because the drug demonstrated less value (clinically or financially) against other drugs in the class	7 products	None
Exclusions Occurs when there is no clinical value over other drugs in the class. Strategy provides savings to our clients while maintaining choice for members	None	27 products
Drug Management Strategy Prior Authorization, Specialty, Medical Only, Non-Essential Drug	None	



Formulary Change Summary: National Ex Updates

National Ex 2024 Tier Change Moving To Non-Preferred Status			
Therapeutic Category	Formulary Alternative	Non-Preferred Tier	
Diabetes - GLP-1 Agonist	MOUNJARO, OZEMPIC, RYBELSUS, TRULICITY	VICTOZA	
Oncology - Hematopoietic	ZIEXTENZO	FULPHILA	
Respiratory - Inhaled corticosteroids	ARNUITY, ASMANEX, QVAR	FLOVENT DISKUS, FLOVENT HFA	
Respiratory - Combination Inhalers	budesonide/formoterol, breyna	SYMBICORT	
Infertility	PREGNYL	NOVAREL, CHORIONIC GONADOTROPIN	

National Ex 2024 Change Addition Of Step Therapy (Current utilizers will be grandfathered)		
Therapeutic Category	Primary Treatment	Secondary Treatment
Digestive Enzymes	CREON and ZENPEP	PANCREAZE, PERZYE, VIOKACE



Formulary Change Summary: Select Ex Updates

Select EX 2024 Excluded	Medications With Covered Alternatives	
Therapeutic Category	Formulary Alternative	Formulary Exclusion
Analgesics/Anti-inflammatory	COSENTYX, ENBREL, HUMIRA, STELARA, TREMFYA, OTEZLA, XELJANZ, XELJANZ XR	SIMPONI ARIA
Antibiotic	doxycycline	DORYX MPC TAB
Anticonvulsants	lamotrigine tablet, zonisamide capsules	LAMICTAL ODT, lamotrigine ODT, ZONISIDE SUS 100 mg/5 ml
Cardiovascular - Antihypertensives	candesartan, irbesartan, losartan, losartan/HCTZ, olmesartan, telmisartan, valsartan, valsartan/HCTZ	EDARBI, EDARBYCLOR, telmisartan/HCTZ
Cardiovascular - Antihyperlipidemics	colesevelam tablet	colesevelam packet
Corticosteroids	prednisone	RAYOS
Dermatology - Cosmetic	No alternative, cosmetic use not covered/Benefit election	BOTOX COSMETIC
Dermatology - Acne	isotretinoin 20 mg, 30 mg	isotretinoin 25 mg, 35 mg
Diabetes - GLP-1 Agonist	MOUNJARO, OZEMPIC, RYBELSUS, TRULICITY	VICTOZA
Endocrine	calcitriol capsule, phenburane, sapopterin	calcitriol solution, doxercalciferol, javygtor packet, powder, Paricalcitol, RAVICTI
Infertility	PREGNYL	NOVAREL, CHORIONIC GONADOTROPIN
Oncology - Hematopoietic	ZIEXTENZO	FULPHILA
Ophthalmic - Anti-infective/Steroid	neomycin/polymixin/dexamethasone	NEOMYCIN/POLY/HC
Osteoporosis	risedronate IR	risedronate 35 mg DR
Respiratory - Inhaled corticosteroids	ARNUITY, ASMANEX, QVAR	FLOVENT DISKUS, FLOVENT HFA
Respiratory - Combination Inhalers	budesonide/formoterol, breyna	SYMBICORT
Sleep Disorder Agents	sodium oxybate, XYWAV	XYREM
Urinary Agents	dutasteride and tamsulosin separately	dutasteride/tamsulosin



National Ex and Select Ex 2024 Updates

Brand products with generic equivalents			
Cardizem LA	Hetlioz	Naftin gel 2%	Timoptic PF 0.25%
Dalisrep	Keveyis	Naprelan 750 mg	Trokendi XR
Delestrogen	Matzim LA 420 mg	Pradaxa 150 mg	Verlan PM
Divigel	Mirvaso 0.33% gel	Suprep	

*National Ex: Products moving to non-preferred tier

*Select Ex: Products moving to exclude



Affordable Care Act Out-of-Pocket (OOP) Maximum Limit Changes

The Patient Protection and Affordable Care Act (PPACA) requires limits for consumer spending on in-network essential health benefits. These are known as out-of-pocket maximum limits and apply to all non-grandfathered plans. Changes for 2024 are as follows:

	2023 ACA OOP Maximums	2024 ACA OOP Maximums
Individual	\$9,100	\$9,450
Family	\$18,200	\$18,900

2023 Vaccine Additions:

- COVID-19 vaccines
- RSV vaccines



IRS Limits for High Deductible Health Plans

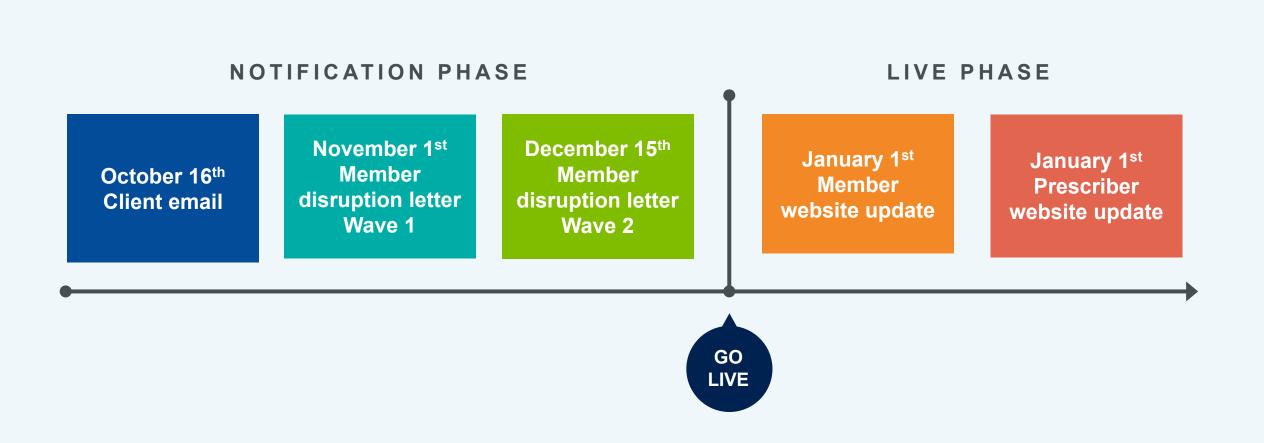
High Deductible Health Plans (HDHP) offer solutions for employers to contain rising health care costs by requiring members to meet a high deductible before plan benefits become available. However, the need to meet that high deductible can cause members to forgo taking medications that can prevent serious health conditions which increase long term health care costs. By applying a preventive drug list to the HDHP plan design, employers can allow members access to preventive drug products, as defined by IRS guidance, at low or zero dollar copays prior to meeting their deductible.

	2023 HDHP Maximums	2024 HDHP Maximums
Individual	\$7,500	\$8,050
Family	\$15,000	\$16,100

NO CHANGES TO THE 2024 OFFERING OUTSIDE OF IRS LIMITS



January 1, 2024 Communication Timeline





FAQ

1. How does a plan optimize formulary savings?

As your PBM, Elixir negotiates with drug manufacturers to provide savings on high-cost medications. The trade relations team in conjunction with the clinical team analyzes each drug class to find the right mix of clinical and manufacturer rebates. This approach allows Elixir to maintain a competitive net cost option while ensuring that a clinical alternative is available. In order to be most effective, we manage certain drug categories with exclusions, step therapies, or copay tiering. Using effective formulary management, we are able to pass on higher rebate value to our clients. This approach is visible in our National Ex and Select EX formularies. Clients opting into the National Ex or Select Ex formularies will be provided a detailed analysis of formulary disruption.

2. With more drug exclusions, won't member disruption increase?

Formulary exclusions are typically due to exorbitant pricing, generic availability, or lower cost alternatives that treat the same condition. Whenever there are drug exclusions, there is potential member disruption. However, it is important to note that disruption does not necessarily equal dissatisfaction, with the appropriate communication plans are in place. Elixir proactively notifies members using excluded medications of therapeutically equivalent formulary alternatives. Many times, the recommended alternative may lead to a lower member copay as well.

3. What if a member does not want to switch from the drug that is now being excluded?

A team of pharmacists at Elixir work to ensure an appropriate clinical alternative is always available. We encourage a member to speak to a pharmacist or their prescriber about the alternative medications to get comfortable with the switch. If the prescriber feels the switch is inappropriate, then they can submit a prior authorization.



FAQ

4. Will we 'grandfather' or allow any members currently taking an excluded medication to continue with their treatment?

Members that are taking medications to treat complex conditions, such as the following will be grandfathered

- Oncology
- Inflammatory conditions (e.g. rheumatoid arthritis, Crohn's disease, psoriasis, etc.)
- Multiple Sclerosis
- Hematologic conditions
- Hepatitis C Antivirals

Grandfathering allows a member who has been stabilized on a medication to continue taking it. New to therapy patients will still have access to excluded drugs via the non-formulary exception (NFE) process.

5. Will we communicate changes to doctors/providers?

Disrupted members will receive a 60-day written notification about changes to their drug therapy. The letter will list preferred alternatives so that the member can consult with their providers. Elixir also conducts automated outbound calls where the member has the option to talk to an Elixir representative and initiate an exception process with their provider.



