



COALITION PBM CASE STUDY

Making Pharmacy Benefits Work for Plan Sponsors and Members

Coalition Profile

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Nevada Business Group on Health (NVBGH) is a 501(c)6, founded in 1995 by public and private employers committed to containing healthcare costs, in part, by changing the delivery model costs of health care services in Northern Nevada. The original vision was to gain the ability to negotiate their own contracts for essential healthcare services while implementing strategies to build a healthy workforce.

NVBGH is continuously evolving to meet the dynamic changes in the healthcare market, including the founding of [Nevada Health Partners](#) (NHP) in 2002. For both NVBGH and NHP, the focus is on data, community health, and education. Connecting human resources, benefits, healthcare, and risk management professionals who share common responsibilities and serving as a

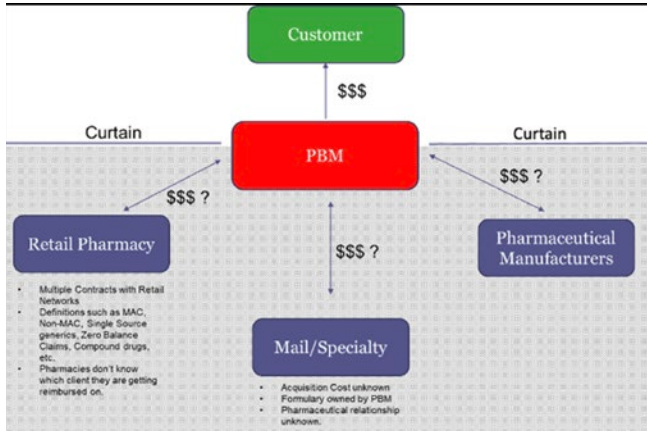
trusted resource for solutions to emerging issues and critical challenges is mission critical.

PBM Background

NVBGH/NHP provides ongoing education about pharmacy benefit manager (PBM) practices to employers aiming to understand the system, secure better-than-average customer service, and achieve a cost that is competitive and understood.

Many employers/purchasers across the national coalition community, are challenging slow-moving PBM and pharma legislation to stop the cycle of PBM secrets through group purchasing strategies and direct contracting. By introducing a model that takes the PBM pieces — purchasing, administration, delivery system, and rebates — true transparency can be achieved. This is illustrated by what goes on behind the PBM curtain.

Old Model



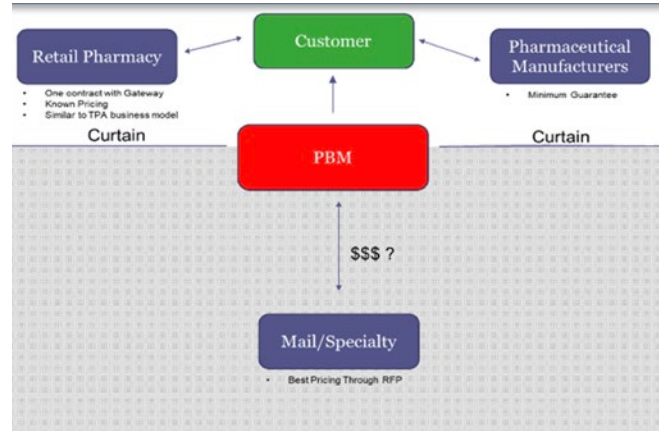
**NO CHECKS AND BALANCES;
LIMITED SELF-ADVOCACY**

With a belief that pharmacy benefits should work in the best interest of plan sponsors, employees and their families — not the other way around — NVBGH/NHP is now able to ensure a flexible pharmacy benefit plan that leads to lower costs, better customer service, and higher patient satisfaction. During the first year of the new model, there was a **29% decrease** in overall healthcare spend.

Lessons Learned

- ▶ Understand how the National Alliance and its coalition members are addressing PBM misalignment and how the available tools and resources and accelerate local progress (see linked resources, below).
- ▶ Pull back the PBM curtain and understand fully what's happening behind it.
- ▶ Work with vendors that have powerful analytics engines and use financial, clinical, and operational insights to develop customized solutions.

New Model



**SEPARATE CONTRACTS
(NETWORK, REBATE AGGREGATOR,
PHARMACY BENEFIT ADMINISTRATOR);
MEMBER CONTROL**

- ▶ Choose a trusted subject matter expert who will oversee the PBM and provide counsel on rising drugs costs, predatory practices, and emerging high-cost therapies, in addition to ensuring transparency and navigating complex regulations like the Consolidated Appropriations Act, 2021.
- ▶ Preserve checks and balances by breaking PBM agreements into three contracts (network, rebate aggregator, pharmacy benefit administrator).

National Alliance Resources

- [PBM Placemats](#)
- [PBM Vendor Engagement Template](#)
- [Playbook for Employers](#)
- [Playbook on Biosimilars](#)
- [Employers Beware: Alternative Funding Program](#)
- [Fox Guarding the Henhouse](#)
- [Shawn Gremminger's Statement for the Hearing: 340B Drug Pricing Program](#)
- [Pharmacy Savings Calculator](#)

Learn more



**MEDICAL AND
PHARMACY DRUGS**



340B PROGRAM