Drug insurance

INTEGRATED PLAN MANAGEMENT SOLUTIONS



Working with you to control drug costs

High-cost specialty medications are putting a strain on drug plans across the country.¹ Fortunately, you don't have to chose between paying big premiums for a drug benefit and taking care of your employees. As your insurer, we'll protect the financial integrity of your plan, while ensuring your employees receive the best, proven treatments to support their health and productivity.

¹ Specialty drugs' share of eligible costs has more than doubled in the past 10 years, from 14% in 2010 to 30% in 2019, though they account for only about 1% of claims. (Telus Health, 2020 Drug Data Trends)



A complete cost-control solution

Today's drug insurance environment is more complex than ever, so we've developed a multifaceted cost containment program around four winning strategies.

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CONTROLLING COSTS AT THE SOURCE

We offer a range of cost controls at the pharmacy to protect your plan from unnecessary expenses due to waste, misuse or overbilling.



OPTIMIZING DRUG CONSUMPTION

We use powerful financial incentives to encourage plan members to purchase more affordable, but equally effective medications.



SUPPORTING PLAN MEMBERS

We offer 24/7 pharmacist support to members who take certain specialty or maintenance medications, all while reducing costs for your plan.

EDUCATING PLAN MEMBERS

Knowledge is power. Our educational tools give plan members the information they need to make informed drug purchasing choices that support their health.

A POWERFUL COMBINATION

Our drug cost simulator² takes maximum fees and mark-ups into account. It also uses data from your own drug plan to give plan members a more accurate snapshot of what they'll pay – and how much they can save by choosing a generic equivalent.

EXPERTS WORKING FOR YOU

New medications are evaluated each month by our team of professionals, including licensed clinical pharmacists, to determine if they should be covered based on their proven clinical benefits, safety profile and cost-effectiveness.

PROACTIVE FRAUD AND ABUSE MANAGEMENT

Fraud and abuse control is a cornerstone of our overall risk management process. Our dedicated fraud and abuse detection team works around the clock to ensure the financial health of our clients' plans is not compromised by ineligible claims.

Controlling costs at the source

If not controlled, drug plans can lose money due to waste, over prescribing and excessive pharmacy billing. We've teamed up with our drug card provider to offer effective cost controls right at the pharmacy counter.

• Pharmacy fees and mark-ups Pharmacy fees and mark-ups vary according to province and each individual pharmacy's pricing practices. We review fee guides, market rates and our own claims data to set fair and reasonable pharmacy fees and mark-ups for each province.

Drug utilization review

Most plan members want to use their drug benefit safely and responsibly. Our drug utilization review (DUR) program helps them do that with effective controls at the pharmacy. The DUR reduces the risk of adverse events by warning pharmacists of potential drug-to-drug interactions and duplicate therapies. It can even be used to identify potential patterns of drug misuse and abuse.

 Hospital and provincial coordination
We ensure you don't pay more than necessary for drugs that should be covered by provincial plans or administered in hospital. If a plan member tries to fill a prescription for a specialty drug of this kind, the pharmacist will be notified that the drug cannot be reimbursed. The pharmacist can then refer the member to our Customer Contact Centre.

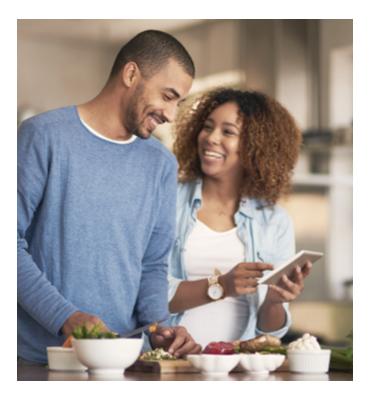


→ Optimizing drug consumption

We give you the power to positively influence your employees' drug purchasing behaviour right when they fill a prescription. By providing higher reimbursement rates for drugs that deliver greater value in terms of cost and effectiveness, we steer them toward treatments that benefit their health – and your plan.

 Tiered Plan with Dynamic Therapeutic Formulary

This optional two-tiered approach uses reimbursement incentives to encourage plan members to choose effective, lower-cost medications while still giving them access to other drugs covered by your plan. Tiered plans educate plan members about the cost of drugs and encourage them to participate in the decision-making process. Both tiers also include mandatory generic substitution.



Generic substitution

Generic drugs provide the same quality and effectiveness as brand name drugs, but offer superior value, making them a great option to help manage drug plan spending. Pharmacists can often replace a brand name drug with a far less expensive and equally effective generic version, but they can only do so if the patient agrees. With generic substitution, reimbursement incentives direct plan members toward effective, lower-cost generic products. The brand name drug's reimbursement is based on the cost of the least expensive available generic version.

You choose – mandatory or non-mandatory generic substitution

Mandatory generic substitution

Doesn't take the physician's handwritten "no substitution" order into account. So, to get the brand name drug, the plan member's physician must send us the *Request for Reimbursement of Brand Name Medications* form for our consideration.

Non-mandatory generic substitution

Accepts the physician's "no substitution" order. In such cases, the full cost of the brand name drug will be reimbursed, even if an equivalent generic drug is available.



G Supporting plan members

Plan members can become overwhelmed in today's complex world of prescription drugs. It's hard enough to be diagnosed with a medical condition without also having to worry about whether you're taking and storing your medications properly. We've teamed up with Express Scripts Canada (ESC) to offer programs for plan members that include 24/7 access to highly qualified pharmacists to guide and support them.

Active Pharmacy³

ESC's research shows that traditional drugs represent 69% of annual drug spend per claimant. With the Active Pharmacy option, plan members' maintenance medications are automatically refilled for 90 days (when appropriate) and conveniently delivered directly to them. This reduces their out-of-pocket costs and helps control your drug plan costs. Plan members will also have access to pharmacists who will work with them and their doctors to identify effective, lower-cost alternatives to their maintenance medications.



Patient Support Program for Specialty Drugs

When a plan member is diagnosed with a complex illness, it can turn their life upside down. These conditions often require costly specialty drugs with specific administration, storage and monitoring requirements. To help plan members cope with their new reality, we offer a comprehensive Patient Support Program for Specialty Drugs.³

Plan members will be able to count on a team of highly trained pharmacists with expertise in specialty drugs. The program goes way beyond just filling a prescription. The pharmacists take a global approach, offering insureds the option of working with their doctors to recommend equally effective lower-cost alternatives for their other medications. The program even includes advocate services to maximize plan members' access to available educational and financial resources, and a therapeutic resource centre to ensure continuous follow-ups on the state of their health and their adherence to treatment.

Prior Authorization

To ensure plan members receive the most appropriate, safe and cost-effective treatments, we require that certain medications be preapproved through our Prior Authorization (PA) program. Prior authorization allows us to confirm that high-cost specialty drugs are used safely and according to the approved indications.

A distinguishing feature of our PA program is our focus on direct communication with members. When a request is accepted or rejected, or if we require additional information, we don't just send a letter – we also call the plan member directly so we can answer any questions they may have and accelerate the decision-making process.

Or Educating plan members

Responsible drug plan use starts with good education. When plan members know more about drugs—including how they're priced and the value of generics they're far more likely to choose cost-saving options that benefit their health and your plan. Our website features informative videos and smart tools that give plan members everything they need to make informed choices.

Drug insurance webpage

We created a public drug education webpage to encourage all Canadians to use their drug insurance responsibly. It features lots of engaging content to promote safe, effective and financially responsible decisions. You'll find animated videos about how drugs are priced and the value of generics, tips to save on drugs, and links to helpful brochures.

• Drug cost simulator⁴

We put the power to make informed drug purchasing choices in the palm of your employees' hands. Available through our Omni mobile app and secure website, our drug cost simulator shows them how their drug claims will be reimbursed and how much they'll save by choosing an equally effective generic drug.

⁴ The drug cost simulator is not available with every plan.



About Desjardins Insurance

Desjardins Insurance offers a wide range of flexible life insurance, health insurance and retirement savings products and services. It has been providing innovative services to individuals, groups and businesses for over a century. Desjardins Insurance ensures the financial security of over five million Canadians from offices across the country. It is one of the top life insurance companies in Canada and a member of Desjardins Group, the leading cooperative financial group in Canada.

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