Pharmacy Benefit Management for

Client Logo Goes Here

Presented by: Coventry/First Script

Date

firstscript
Who We Are

Over 35 years of industry experience with roots in both clinical and network services aggregated within a single data warehouse

Coventry’s Rich Data Store

- 15 Years Historic Data
- 43M Injured Workers
- 5.7M Clinical Cases
- 373 M Medical Transactions
- 58M Prescriptions
Coventry Partnerships

Employers
- COMPASS GROUP
- KOHL'S
- Marriott
- aramark
- CVS pharmacy

TPAs
- GALLAGHER BASSETT
- sedgwick.
- ESIS

Carriers
- Liberty Mutual Insurance
- Alaska National Insurance Company
- ZURICH
- TRAVELERS
- AIG

State/Federal
- Commonwealth of Virginia Workers' Compensation Program

Specialty
- PARADIGM OUTCOMES
- VectraRx
Coventry Solutions

**Network Solutions**
- National broad-based
- Outcomes-based Networks
- State Certified Networks
- DME/Home Health
- Pharmacy
- Physical Medicine
- Diagnostics/Radiology
- Out-of-Network

**Clinical Solutions**
- 24/7 Nurse Triage
- Utilization Review
- Case Management
  - Telephonic
  - Field-based
  - RTW Programs
  - Specialty/CAT
- Independent Medical Evaluations
- Global inSight® Risk Model
- Clinical Pharmacy Management (PBM)

**Technology Solutions**
- Bill Review
- Coventry Connect Customer Portal
- Insight by Coventry
- Mobile Computing

**Risk Modeling**
- Medical
- Pharmacy
- Claim
- Behavioral
- Co-morbidities
- Employer data
Today’s Agenda

- Product Overview
- Regulatory
- Coventry Connect
- Reporting
Pharmacy Benefit Management
First Script – The People

Customer Service
- Designated Account Management Team
- Customer-focused support teams
- First Script customer service team
  - Tucson, AZ, 24/7/365

Clinical
- Designated Account Clinical Pharmacist
- Clinician resource program support (Nurse, Pharmacist, Medical Director)
  - “Ask the Pharmacist”

Data Analytics
- Industry’s largest data warehouse
- Standard report packages
- Custom report writing
- Self serve analysis
- Clinical expertise
- Actionable focus

Regulatory
- Government relations
  - Influence
- Regulatory compliance
  - Enforcement
- Business liaison
  - Expertise
Product Overview
Pharmacy Strategy

There is more to the pharmacy cost equation than price alone
Seeing the bigger picture drives claim outcomes
First Script Strategy

**Smart Prior Authorization (Smart PA)**
Provide clinical recommendations to assist in prescription decision-making.

**Customizable Formulary Management**
Configurable to meet client program goals while delivering the best outcomes.

**Drug Mix Management**
Guideline & evidence-based rules target prescriptions lacking clinical value and address alternative medications.

**Drug Utilization Assessment and Peer-to-Peer Review**
Pharmacist review and peer prescriber outreach take a deep-dive approach into medication therapy analysis.

**Opioid Strategy**
Multiple tools work together to prevent, manage, and mitigate adverse outcomes and deaths.

**Urine Drug Monitoring (UDM)**
Targeted analysis identifies the right injured workers and prescribers to engage.

**RxProfile**
Visual dashboards highlight high-risk drug concerns and opportunities for course correction.

**Utilization Review (UR)**
UR decisions and referrals are seamlessly integrated delivering better outcomes.

**Stewardship**
Strategies measure program performance and continually identify program enhancement opportunities.
First Script Strategy

**Provider Engagement**
Network Provider relationships strengthen outcomes through increased communication, support, and education.

**Pharmacy Specialty Nurse (RxRN)**
Specialized case managers focus on at-risk claims experiencing complex pharmacy utilization.

**Injured Worker, Provider, and Case Manager Coordination**
Targeted outreach and education to foster commitment and improve outcomes.

**Case Management Integration**
Case Managers benefit from PBM information and vice versa.

**Bill Review (BR)**
Prescriptions on medical bills benefit from integrated pricing and utilization controls.

**Pharmacy Network**
More than 70,000 pharmacies including all major chains and most independent pharmacies.

**Out-of-Network Programs**
Contracts include physician-dispensers, 3rd party billers, clinics, and mail order pharmacies.

**Reporting**
The industry’s largest data warehouse and sophisticated online tools support self-serve drill down reporting.

**Coventry Connect®**
Online portal simplifies pharmacy utilization decision-making.
Regulatory
Regulatory/Clinical Oversight

**Work Comp Regulatory & Legislative Affairs (RLA)**
Review proposals and notify potentially impacted businesses

**First Script Regulatory Review**
Identify impact for Clinical, Finance, and Operations

**First Script Clinical**
Coordinate changes, manage client communications, provide training
Available Heat Maps

Compounds

Direction of Care

Formulary Treatment

Medical Marijuana

Opioid Limits/Guidelines

Fee Schedule Savings

MEDICAL MARIJUANA

OPIOID STATE LIMITS/GUIDELINES

FEE SCHEDULE SAVINGS
Coventry Connect
Coventry Connect®

Coventry Connect is your single point of access to Coventry solutions for timely and efficient claims management

- Online referrals for all Coventry products
- Authorize bills, prescriptions, DME, and ancillary orders
- View case notes and documents
- Respond to clinical alerts
- Communicate with customer service
Reporting
Coventry’s Business Insight Tools

- Coventry Connect
- Insight by Coventry
- Risk Modeling
- Data Warehouse

14 Years Historic Data
41M Injured Workers
5.4M Clinical Cases
55M Prescriptions
312M Medical Transactions

Coventry's Business Insight Tools
14 Years Historic Data
41M Injured Workers
5.4M Clinical Cases
55M Prescriptions
312M Medical Transactions
Thank You

Client Logo

Clinical

Cost

Service

coventry
returning people to work, to play, to life
Expanded/Supplemental Slides

[See notes section for recommendations as to where to insert this supplemental material within the main deck]
Enhanced Decision Support: Smart PA

- Claim Demographic
- Prescription History
- Medical Guidelines
- Data Warehouse
- DUR/Formulary Rules
- Juris/State Regulations

Smart PA

Adjuster Decision

Proprietary
Enhanced Decision Support: Smart PA

Basic Smart PA

Bringing the clinician to you

Continuous rule updates as clinical trends evolve
- MED logic
- Injury jurisdiction
- Configurable look-back
- Quantity and utilization controls
- Generic substitution logic
- Historical medical data
- Specific clinical messaging for majority of drugs and drug classes
- Step therapy

Automated Smart PA

Let us do the work for you

Less unnecessary touch-points for claim adjudicators
- Auto-approve and/or auto-deny targeted medications
- Notification of auto-adjudication sent to handling adjuster

Customized Smart PA

Right message to right person

Meaningful messaging supports focused intervention
- Routing Smart PA messages to internal and external resources (i.e., Nurse, Pharmacist)
- Notices may be actionable and/or informational
Enhanced Decision Support: Basic Smart PA
Rule configuration supporting formulary (medication-specific messaging)

Smart PA Recommend denial

DENY FILL for Smith, Bob

Recommend denial – This product is a combination drug kit containing two or more products packaged together for the user’s convenience. It combines over-the-counter medications, prescription medications, and/or medical devices and supplies and is sold at a much higher cost than when these products are sold individually. Additionally, some of the components may not be necessary for the injured worker. Recommend that the components of this kit are prescribed individually if determined medically necessary.
Enhanced Decision Support: Basic Smart PA

Rule configuration supporting state formulary/regulation (jurisdiction-specific messaging)

Script for Targeted Medication → Jurisdiction California → Non-Exempt, Unlisted, or Multisource Brand per MTUS → NO

YES

Non-Exempt, Unlisted, or Multisource Brand per MTUS → Follow Additional Smart PA Logic → Adjuster Decision

DENY FILL for Smith, Bob

Recommend denial – Recommend denial until UR decision has been met – Per California Guidelines, the following medication is considered a non-exempt, unlisted, or multisource (brand with generic available) drug and must undergo prospective or retrospective UR (Utilization Review).

OK
Enhanced Decision Support: Automated Smart PA
Auto-adjudication (medication- or class-specific messaging)

This medication was automatically approved based on the recommendation of recommend approve as injured worker is currently on at least one of the following: Tricyclic antidepressants, anticholinergic drugs, anti-emetics, and/or opioid analgesics. Please note, this auto approval is only in regards to the medication and is not related to Doctor and Eligibility Prior Authorizations.
Customized Message Routing & Pharmacy Risk Case Manager Engagement

Complex Claim Pharmacy Management

- RxRN (Pharmacy Specialty Nurse) or Case Manager notified on claims that are at risk due to emerging and complex pharmacy utilization

Examples of prior authorizations routed for Clinical Management:

- Compounds
- Topicals
- Medical foods
- Hypnotics
- MED over 90
- High risk drug combos
- Generic opportunities
- Specialty drugs

Closed loop process applies edits at the point-of-sale system
**Enhanced Decision Support: Customized Smart PA**
Customized message routing (real-time clinical intervention messaging)

**Start**

- High MED: Script exceeds 90 per day

- Smart Prior Authorization Generated

- Clinician Sent PA Notification

- Adjuster Sent PA Notification

- Prescriber and Injured Worker Outreach

- Conduct Review

- Clinician Recommendation

- Adjuster Decision

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**DENY FILL for Smith, Bob**

**Alert** Please allow a minimum of two hours for the clinician to review the file and provide recommendations BEFORE taking any action on this notification.
Enhanced Decision Support: Customized Smart PA
Customized message routing (real-time clinical intervention messaging)

Current use of opioid
AND
NO historical naloxone
AND
Varying combinations of prescription and medical history “triggers” associated with an increased risk of adverse outcomes with opioid use

Injured worker has met the criteria for being considered at risk of opioid overdose. Recommend prescription for preferred opioid overdose reversal agent Narcan (naloxone) Nasal Spray. Please refer to [resource] and follow procedure to perform outreach and education related to preventing opioid overdose and direct injured worker and/or provider in obtaining prescription for Narcan Nasal Spray. Notify adjuster.

DENY FILL for Smith, Bob

Injured worker has met the criteria for being considered at risk of opioid overdose. Recommend prescription for preferred opioid overdose reversal agent Narcan (naloxone) Nasal Spray. Please refer to [resource] and follow procedure to perform outreach and education related to preventing opioid overdose and direct injured worker and/or provider in obtaining prescription for Narcan Nasal Spray. Notify adjuster.

OK
Provider Engagement: Network Prescriber Program

Benefits

- Increases patient safety
- Positively affects outcomes
- Reduces inappropriate utilization
- Promotes collaboration
- Strengthens provider relationships
- Improves quality of care
- Ensures guideline adherence

Concerns Addressed by NPP

- High-risk medications
- Clinical/safety concerns
- Physician dispensing
- Dangerous drug combinations
- Fraud, waste, and abuse
Pharmacy and Total Claim Management

**Pre-fill**
- Pharmacy Transactions

**Post-fill**
- Paper Bills

**Pre-pay**

**RULES ENGINE:**
- Cost Controls
- Utilization Management
- Safety Edits
- Clinical Expertise

**Data Warehouse**

**Clinical Solutions**

**Comprehensive Pharmacy Management/Outcomes**

Integrated pharmacy bill review offers ease of use and a seamless experience for our clients through receipt of all internal and external pharmacy bills, application of utilization management, acquisition and payment of approved scripts, and direct billing.
Pharmacy Specialty Nurse (RxRN)

Specially-trained and return-to-work focused
Focused on claims at risk due to emerging and complex pharmacy utilization

Primary objectives:
- Ensure patient engagement, safety, and education
- Confirm pharmacy utilization is medically appropriate
- Support a timely recovery
- Enable timely medical stability and return-to-work
- Consult with Coventry case managers when complex pharmacy issues are identified
- Coordinate with adjusters on pharmacy issues
- Collaborate with PBM team to manage the total claim
- Review monthly customer PBM trend reports
Formulary Management

Gold Standard
First Script Formulary

- Pharmacy and Therapeutics Committee
  - Cost
  - Place in therapy
  - Treatment guidelines
  - Alternative agents
  - Evidence-based medicine

Customized
Customer Driven

Customized to meet program goals and deliver best outcomes
- Injury type/diagnosis code
- Claim
- Medication classes
- Jurisdiction
State-Based Drug Formularies

First Script manages regulatory updates including state formulary implementation and treatment guideline adherence, client and stakeholder communications, and training

- Coventry Government Relations influence legislation
- Ongoing coordination between Government Relations and First Script Clinical Team
- State formulary rules drive automated, juris-driven Smart PA messaging
Risk Analytics: RxProfile
Identify injured workers most at risk for adverse outcomes

Rx Events
- Opioid overutilization
- Multiple prescribers
- Dangerous drug combinations

Adjuster/Nurse Review
- Triage High Risk Profiles
  - Pass the risk profile to CM if assigned or assign to CM
  - Review file & request consultation with PBM pharmacist
  - Request a DUA/P2P
  - Request Utilization Review (UR)
  - Refer for Urine Drug Test (UDT)

Claim Profile
- Analytics
Drug Utilization Assessment/Peer-to-Peer

Seeing the Bigger Picture

DUA and P2P review works hand-in-hand to identify at-risk claims and produce desired outcomes with positive impacts to patient safety, recovery, and reductions in spend through the elimination of inappropriate pharmacy utilization.

DUA/P2P Program Highlights:

• Network Prescriber Program
• Closed Loop Process
• Outcome Reports
• Continued Risk Monitoring
• Clinical Support
Clinical Solutions by Therapeutic Category

**Opioids**
Prevention, intervention & oversight, and recovery

**Compounds**
Manual review of every compound medication that attempts to process, regardless of channel

**Price Opportunists**
Addressing compound kits, convenience packs, and private label topical analgesics

**Specialty & Biologics**
Identification and management of specialty pharmaceuticals to ensure appropriate place in therapy, utilization, distribution, diagnostic testing, and oversight
Pharmacy Roadmap
Roadmap – Product Development

Continual analysis of current and emerging market conditions and consideration of the macro environments in which we operate are part and parcel to our core capabilities and ongoing product development

- Employers’ costs for workers’ comp outpace benefits
- Reduced unemployment
- Aging workforce
- Affordable Care Act effects
- Chronic pain
- Prescription drug abuse
- Big data technology
- Telehealth
- Leading Pharmacy cost drivers
- Regulatory changes
- Precision Medicine
- Automation
- Mergers and acquisitions
Roadmap – Pharmacy Areas of Focus

Thoughtfulness and innovation drive our focus on improved claim outcomes and return to work, to play, and to life

- Risk analytics and data insight
- Biopsychosocial model of care
- Pain management solutions
- Clinical decision support
- Impactful prescriber relationships

Health Impacts

Source: Kaiser Family Foundation issue brief

10% HEALTH CARE
20% SOCIAL AND ENVIRONMENTAL FACTORS
30% GENETICS
40% INDIVIDUAL BEHAVIOR
Industry Trends to Watch

- Electronic prescribing
- PDMP Integration
- Prescriber report card
- Medical cannabis
- Abuse deterrent lock timers
- Wearable technology
- Digital medicine
- Precision medicine
- Zip-Drug
- 3-D pill printing
Appendix:
Supplemental Materials
Drug Utilization Assessment/Peer-to-Peer

First Script Clinical Oversight
- Prescriptions processed through First Script
- Rx Profile identifies at-risk claim
- Coventry Connect® alert

Drug Utilization Assessment and Peer-to-Peer Review
- Licensed pharmacist completes the DUA
- Leverage network provider program
- Assessment provided and P2P performed

Ongoing Oversight and Outcomes Reporting
- Obtain signed prescriber agreement
- Close the loop through point-of-sale edits
- Quarterly outcomes reporting post P2P

Proprietary
Confidential & Proprietary 43
Clinical Solutions—Opioids

In alignment with our Enterprise-Wide Opioid Strategy, First Script tools work together to prevent, manage, and ultimately mitigate the risk of death and adverse claim outcomes related to use of opioids.

Prevention

Intervention & Oversight

Recovery
Clinical Solutions – Compounds

Compound medications are not approved by the FDA and are disproportionately expensive

90% Not medically necessary according to medical guidelines

85% of compound spend is filled out-of-network

Out-of-Network (OON)
First Script identifies OON compound medications in the bill review system for review prior to payment

In Network
First Script generates a Smart PA for all compound transactions
Clinical Solutions – Price Opportunists

- Identify and control pharmacy price opportunists in the market that add little-to-no value clinically but increase costs exponentially.

- The program reroutes targeted NDCs for clinical review and intervention, repricing, denied payment, and/or recommendation of therapeutic alternatives.

- Examples:
  - Compounds
  - Compound Kits
  - Convenience Packs
  - Private Label Topical Analgesics (PLTAs)
Clinical Solutions – Specialty & Biologics

• Specialty medications, which are typically used to treat patients with complex, chronic conditions, continue to be a major area of pharmaceutical development and can have significant costs.

• Our targeted solution offers careful oversight and patient selection along with effective drug delivery, and addresses:
  • Patient safety-related drug stability and immunogenicity concerns
  • Evidence-based recommendations for place in therapy, applicable companion tests, and consideration for alternative therapeutic options where appropriate
  • Patient education, appropriate utilization, and treatment regimen adherence
First Fill Philosophy

- First Fill program can be customized for individual customers
- No out-of-pocket expense for injured worker
- First Script bears financial risk for First Fill scripts until the claim is accepted
  - If claim deemed non-compensable, First Script pays for prescription(s)
- All First Fill scripts are processed online against established benefit plan parameters

First Fill Workflow
Network Pharmacy Coverage

Over 97% of all pharmacies in the country, with all of major chains and most independent pharmacies included, for \(\approx 70,000\) locations.

Additional pharmacies located in US Territories, Associated States and US Government Agencies
Network Pharmacy – Mail Order

- Supplies prescriptions to injured workers with limited access to retail pharmacy locations
- One-on-one claimant assistance
- All fills undergo the same utilization controls established for the retail pharmacy program
- Online tools offer easy access to prescription information, refills, and valuable health information
Formulary/Drug Strategy – State Formularies

**Coordinate**
Regulatory, Clinical, Bill Review, Case Management, UR, Ops, DUA, Account Management, and Marketing assess and coordinate to implement

**Communicate**
Information sent to clients (notice of proposed formulary and First Script's plan for implementation)

**Implement**
Impact analysis and communication to clients throughout implementation process

**Notify**
Notifications sent to impacted injured workers and prescribers

**Smart PA**
Script rejects based on state formulary rule, prior authorization with customized messaging (juris, next steps) presented to Adjuster

**Educate**
Client training as needed
State Formulary Communication (e.g., CA)

Prescribers informed via mail
- CA formulary and guidance
- Protocols to follow
- Potential impacted patients & drugs

Injured workers notified via mail
- CA formulary & possible impact

Client communications via bulletin and proactive impact analysis
- CA formulary & guidance
- Potential impacted patients & drugs
- Customized PA messaging for CA specific scenarios

Client training
- Formulary & rules
- Timeline & requirements
- Internal/external workflow
- Resources
- Q&A

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Regulatory Update Bulletin

Subject: California Drug Formulary Finalizes Regulations

The California Department of Industrial Relations’ Division of Workers’ Compensation (DWC) has given its final approval to adopt a drug formulary for the medical treatment of injured workers. It will be effective January 1, 2018.

What you can expect from First Script:
We will mail letters to prescribers to review the new formulary guidelines and their effective dates. These letters will also advise prescribers when Utilization Review (UR) is required and how to obtain more information. First Script will email all schedulers managing California injured workers, allowing them to determine how their claims will be impacted. First Script account managers will have access to list of affected injured workers.

If you have any questions, please contact your local First Script representative or your Account Manager for more information.

Steps First Script has taken towards compliance:
- The MTUS benefitdrug list for California jurisdiction claims will be effective within First Script on January 1, 2018.
- Messaging from First Script to provide guidance on how to appropriately handle a prescription request after January 1, 2018.

Overview of the Medical Treatment Utilization Schedule (MTUS) Drug Formulary:
- A drug dispensed on or after 1/1/18 for outpatient use shall be subject to the MTUS Drug Formulary, regardless of the date of injury. For injuries prior to 1/1/18, the Drug Formulary should be phased in with the prescriber being responsible for getting a safe course of treatment including a process for safe weaning and including a progression report.
- Compound drugs must be authorized prospectively prior to being dispensed.
- A “combination drug,” defined as “a fixed dose combination of two or more active drug ingredients into a single dosage form that is FDA-approved for marketing,” shall be designated as an “unauthorized” drug notwithstanding the ingredients that make up the combination drug unless the combination drug is specifically included on the MTUS Drug List.
- For an unlisted drug, authorization through prospective review must be obtained prior to the time the drug is dispensed (refers to the Utilization Review process).
- The MTUS drug formulary does not apply to drugs administered by a physician. However, the physician-administered drug treatment is subject to relevant provisions of the MTUS, including the MTUS Treatment Guidelines.

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Confidential & Proprietary
Available Heat Maps

COMPOUND MEDICATIONS
Available Heat Maps

DIRECTION OF CARE

- In all instances, employee has the right to choose a treating provider.
- Employer or Carrier has the right to control initial treatment provider for non-emergency treatment, but only under certain programs.
- Employer or Carrier has the right to designate at least the initial treatment provider for non-emergency care.
Available Heat Maps

FORMULARY TREATMENT GUIDELINES
Available Heat Maps

OPIOID STATE LIMITS/GUIDELINES
Available Heat Maps

FEE SCHEDULE SAVINGS
## Coventry Connect® Adjuster Dashboard

### Pending Authorizations

Select an Action or click a row to view Authorization details.

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<tr>
<th>Submit Date</th>
<th>Claim Number</th>
<th>Claimant</th>
<th>Auth Type</th>
<th>Drug</th>
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<td>OXYCODONE-ACETAMINOPHEN 10-325</td>
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<td>GASTRO Intestinal</td>
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Reporting Portal: Summary Map

Top 10 Therapeutic Classes

- ANTICONVULSANTS
- ANALGESICS, NARCOTIC SUSTAINED...
- MUSCLE RELAXANTS
- OPHTHALMIC PREPARATIONS
- ANALGESICS, NARCOTIC SHORT ACTING
- ANTIDEPRESSANT MEDICATIONS ...
- DERMATOLOGICAL/TOPICAL ...
- ANTI-INFECTIVE MEDICATIONS
- IMPOTENCE MEDICATIONS

Top 10 Drugs

- LYRICA
- OCYNTA ER
- CYMBALTA
- VOCODIN
- AMRUX
- BACLOFEN
- DURAGESIC
- CIALIS
- RESTASIS
Reporting Portal: Metric Visualization
Reporting Portal: Opioid Utilization
# Reporting Portal: Rx Drill Down

![Reporting Portal: Rx Drill Down](image)

### Therapeutic Class

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<th>Invoice #</th>
<th>Invoice Month</th>
<th>State</th>
<th>Network</th>
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<th>Brand Generic Indicator</th>
<th>Drug Name</th>
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<th>Opioid Script Count</th>
<th>Fee Schedule Amount</th>
<th>Billed Amount</th>
<th>Savings Amount</th>
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### Overall Summary

- **Total Count**: 1,982
- **Total Amount**: 446
- **Total Value**: 423,955.6
- **Total Savings**: 203,329.14
- **Total Savings Percentage**: 46.16%
Interactive Reporting Portal
Strategic Communications

- Monthly Newsletter
- Regulatory Updates
- Clinical Bulletins
- Thought Leadership

First Script Prescription Benefit News

First Script Clinical Bulletin

Subject: Updates to the ODG Drug Formulary

As of November 30, 2017, the Official Drug Formulary for Workers’ Compensation in Oklahoma and Tennessee was updated to include new medications and remove some that were no longer available. The updated drug list is available on our website.

First Script Regulatory Bulletin

Subject: Nevada Medical Fee Schedule Update

On February 1, 2018, the state of Nevada implemented a new fee schedule for medical services. The new schedule replaces the old one and includes changes in rates for various services. Providers are encouraged to review the new schedule and adjust their billing practices accordingly.

Formulary Treatment Guidelines

First Script PBM has developed a list of preferred medications for each condition. This list is updated regularly to include the latest treatments. Providers are encouraged to use these guidelines to determine the most effective and cost-efficient treatment options for their patients.
Drug Trends – Year over Year Analysis

2017 Drug Trends Compilation
A year in review

Proprietary Drug Trends – Year over Year Analysis

Average Wholesale Price (AWP) Trends

Morphine Equivalent Dose (MED) Trends

2017 Highlights

Overall Prescription Trends
- 6.8% increase in opioid prescriptions
- 6.7% increase in antibiotic prescriptions

Average Wholesale Price (AWP)
- 4.4% increase in average wholesale prices

Opioids
- 14.4% increase in opioid prescriptions
- 10.7% increase in antibiotic prescriptions

Compound Drugs
- 60.0% increase in compound prescriptions
- 52.7% increase in antibiotic prescriptions

Generic Utilization
- 1.0% point decrease in generic utilization

The usage of opioids is an ongoing concern with an increased number of opioid prescriptions.

A 6.6% decline in opioid prescriptions per prescription is the largest drop in the last three years.

This significant decline in opioid utilization is attributed to a strong partnership between First Script and our clients. We have worked diligently to implement various initiatives that have contributed to reduced opioid use in the past three years.

Proprietary
# Implementation Model & Timeline

## Implementation Life Cycle 90 - 120 Days

<table>
<thead>
<tr>
<th>Assessment &amp; Scoping</th>
<th>Design &amp; Development</th>
<th>Test, Train, and Go Live</th>
<th>Production Validation Support &amp; Transition</th>
</tr>
</thead>
</table>

### Assessment & Scoping
- Internal kickoff to define requirements, assign project resources, and coordinate contacts
- Client kickoff meeting
- Weekly status call and topic sessions
- EDI file mapping program setup and reporting
- Detail plan draft
- Scope/business requirements document drafted
- Requirements finalized and approved by client and Coventry

### Design & Development
- Detailed project plan completed
- IT development
- Account set-up and configuration
- Training and staffing plan development

### Test, Train, and Go Live
- Pre-defined testing schedule executed following completion of required IT development by both parties
- Load client claim and history data
- Collateral communication materials developed and approved
- Client training
- Reporting configuration, setup, and customization tested
- Go-live approved
- Go-live

### Production Validation Support & Transition
- Claim processing validated
- Pharmacy benefit management validated
- Billing and collections validated
- Reporting Validated
- Monitoring
- Full transition to account management and operations teams