

A Proposal to Provide
GLP-1 Pharmacy Benefit Management Solutions

Request for Information No: 270-20240419GLP

State of North Carolina

The North Carolina State Health Plan for Teachers and State Employees

May 31, 2024

REDACTED SUBMISSION

SUBMITTED BY EXPRESS SCRIPTS, INC.



EXPRESS SCRIPTS®

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- **Addendum 1; Issued May 6, 2024**



May 29, 2024

Kimberly Alston
Contracting Agent
North Carolina Department of State Treasurer
State Health Plan Division
3200 Atlantic Avenue
Raleigh, NC 27604

Re: Express Scripts' Submission for North Carolina State Health Plan RFI No. 270-20240419GLP

Dear Ms. Alston:

Express Scripts appreciates the opportunity to present information on our GLP-1 solutions for the North Carolina State Health Plan (Plan) relating coverage for Plan members using GLP-1, GIP-GLP-1 agonists, and other molecular entities for weight loss purposes.

We offer a powerful set of health services to advance innovation now and for the future. We help drive value for plan sponsors by leveraging our game-changing capabilities, our deep understanding of health conditions and disease states, and our connections across the health ecosystem to deliver solutions designed with your specific needs in mind. With our integrated pharmacy solutions, we seamlessly manage services for needs across the full pharmacy spectrum, from daily prescriptions to specialized therapies for complex conditions.

Express Scripts recognizes that battling to maintain a healthy weight is hard enough; but being severely overweight negatively impacts almost every aspect of a person's health and can lead to the diagnosis of several debilitating diseases, including diabetes, heart disease, and cancer. We are uniquely positioned to deliver a suite of innovative weight management solutions that can help members who can benefit the most from anti-obesity medications start, and stay on, their medication as prescribed.

For more information, please see the accompanying response, which details our solutions. We look forward to the potential for working with you to help solve your toughest challenges in the pharmacy benefit today and in the future.

As you review our submission, please feel free contact me with any questions at 949.412.1440 or roger_holland@express-scripts.com.

Sincerely,

A handwritten signature in blue ink, appearing to read 'R. Holland'.

Roger Holland
Vice President of Sales – Public Sector

STATE OF NORTH CAROLINA	REQUEST FOR INFORMATION NO. 270-20240419GLP
Department of State Treasurer NC State Health Plan for Teachers and State Employees	Due Date: May 31, 2024, 2:00 PM ET
Refer ALL Inquiries to: Kimberly Alston, Contracting Agent	Issue Date: April 19, 2024 Commodity: 851017 Health Administration Services
E-Mail: Kimberly.Alston@nctreasurer.com with a copy to SHPCContracting@nctreasurer.com	Using Agency Name: NC State Health Plan for Teachers and State Employees

MAILING INSTRUCTIONS: Respondents shall submit one (1) signed, original paper response, and one (1) electronic copy on a flash drive and one (1) redacted electronic copy on a flash drive, if applicable pursuant to Section 3.0.D. The address label shall clearly note the RFI number as shown below. It is the responsibility of the submitting entity to have the RFI in this office by the specified time and date of opening.

<u>DELIVERY ADDRESS</u>
RFI NO. 270-20240419GLP NC Department of State Treasurer State Health Plan Division Attn: Kimberly Alston, Contracting Agent 3200 Atlantic Avenue, Raleigh, NC 27604


NOTICE TO RESPONDENTS

Responses to this RFI will be received at the address above until May 31, 2024, 2:00 PM ET.

QUESTIONS

Email written questions no later than April 30, 2024, 5:00 PM ET to Kimberly.Alston@nctreasurer.com with a copy to SHPCContracting@nctreasurer.com.

EXECUTION

RESPONDENT NAME: Express Scripts, Inc.	E-MAIL: AWKautzner@express-scripts.com	
STREET ADDRESS: One Express Way	P.O. BOX: N/A	ZIP: 63121
CITY & STATE: St. Louis, Missouri	TELEPHONE NUMBER: 949.412.1440	TOLL FREE TEL. NO: 800.332.5455
TYPE OR PRINT NAME & TITLE OF PERSON SIGNING: Adam Kautzner, President, Evernorth Care Management & Express Scripts	FAX NUMBER: 888.843.0604	
AUTHORIZED SIGNATURE: 	DATE: May 29, 2024	

Express Scripts' GLP-1 Solutions

RFI Number: 270-20240419GLP

Project Understanding

The North Carolina State Health Plan for Teachers and State Employees (the Plan) is focused on improving the health and care of North Carolina teachers and school personnel, state employees, retirees, and their dependents, and deserves a partner who will help provide superior pharmacy benefit programs. The Plan is a leader in providing cost-effective, high quality healthcare benefits for its members. As costs continue to rise, specifically for glucagon-like peptides (GLP-1s) and gastric inhibitory polypeptide (GIP) agonists, maintaining coverage for these highly valued medications is a challenge for publicly funded plans.

Express Scripts recognizes that battling to maintain a healthy weight is hard enough; but being severely overweight negatively impacts almost every aspect of a person's health and can lead to the diagnosis of several debilitating diseases, including diabetes, heart disease, and cancer. We are uniquely positioned to deliver a suite of innovative weight management solutions that can help members who can benefit the most from anti-obesity medications start, and stay on, their medication as prescribed.

How do you continue to offer high-value benefits while also managing to increasing budget constraints? In our response to the Plan's RFI, we demonstrate how we can partner with you to provide Plan participants with a high-quality benefit solutions that enable the Plan to effectively manage GLP-1, GIP-GLP-1 agonists, and other similar new molecular entities, for the purpose of weight loss in a manner that is financially sustainable for the Plan.

EncircleRx, part of our data-driven weight management portfolio, helps plan sponsors reduce costs and enhance outcomes. Cardiometabolic is a hybrid term that describes the relationship between obesity, type-2 diabetes and cardiovascular disease. It's becoming a widely recognized and urgent concern among health care researchers, providers, plans and most of all, patients. EncircleRx: Cardiometabolic gives clients optionality and predictability in managing cardiometabolic – obesity, diabetes, and cardiovascular disease – with the first-ever GLP-1 financial guarantee from a PBM.

[Redacted content]

[Redacted content]

Please see the responses below for details on how our EncircleRx Cardiometabolic solution can support the Plan's objectives, including program details and cost and savings estimates.

Providing Benefit Coverage for Members

Cardiometabolic is an innovative Express Scripts' solution that encompasses cardiovascular disease, diabetes, and obesity — three highly comorbid conditions costing the U.S. roughly \$719 billion annually. These three conditions are inextricably linked; having one can often lead to future diagnoses of the others. Rising pharmacy costs in these three categories is a growing concern, and we know clients want options to help them manage the increase. This is where our EncircleRx: Cardiometabolic solution can help.

Express Scripts' EncircleRx: Cardiometabolic solution was designed to provide plans more optionality when managing cardiometabolic. GLP-1 management is a key component in this strategy, and our leverage with Pharma enables us to provide an industry-first solution to our valued clients. Today, GLP-1's for weight loss participating in EncircleRx Cardiometabolic program include Saxenda, Wegovy and Zepbound.

Program Framework for Coverage

With EncircleRx Cardiometabolic, we take a client-centered approach giving our clients more control over managing their GLP-1 growth, with the objective being to significantly manage down costs and maintain your financial stability in this area. As the largest PBM and with our leverage with Pharma, we are able to provide an industry-first solution to our valued clients with more stringent criteria, **all while remaining rebate-eligible in these key categories.**

Through this program, we focus on:

- The appropriate patient population, ensuring that only the right patients have access to these therapies by focusing on **UM, BMI, and clinical documentation.**
- Secondly, we are looking at **appropriate prescriber and pharmacy management** to ensure the correct medications are being prescribed and filled appropriately.
- Lastly, we are focused on ensuring **demonstrated outcomes.** Partnering with Omada, our virtual chronic care provider, we educate, motivate, and hold the patient accountable to his or her weight loss goals and continually support them on their weight loss journey.

We believe this industry-leading approach is necessary to ensure appropriate patient access to these medications, while ensuring every patient has the support they need to positively respond to therapy and maintain a lifelong healthy lifestyle and weight. These efforts combine to reduce pharmacy drug spend, improve patient outcomes, and supply those patients with the highest support they require.

By combining medication with educational and behavioral support, we can reduce these patients' risks of further development of cardiovascular disease, diabetes, obesity, and the myriad of comorbid conditions that are associated with these diseases.

Estimated Plan Savings via EncircleRx Cardiometabolic

[REDACTED]

[REDACTED]

[REDACTED]

Program Variances for Specific Indications

[REDACTED]

Client Audit and Compliance Support

Express Scripts complies with all federal, local, and state laws and regulatory requirements. Beyond ownership independence, our definition of transparency centers around a diligent focus on contractual and regulatory compliance and an audit and reporting policy that allows our clients to validate our compliance to contractual and regulatory terms and conditions, including validation of pricing and source of profit. To ensure transparency in our pricing, we disclose our principal sources of revenue derived from pharmaceutical manufacturers, wholesale distributors, and network pharmacies to our clients. To demonstrate compliance with the terms and conditions of this program, the EncircleRx program is auditable through the standard audit protocol provided to each Express Scripts client.

Eligibility Parameters and Coverage Requirements

Our program was developed to address the cardiometabolic triad which can negatively impact total healthcare costs. One of the most clinically effective and safe therapeutics on the market today to combat obesity, diabetes and minimize adverse effects for those patients with cardiovascular disease is the class of GLP-1 agonists. With that said, our program does not require involving other agents to obtain access to GLP-1s. Rather, we strictly manage access to those members who are most at risk for adverse outcomes of their condition. We leverage comprehensive utilization management strategies for these medications through higher BMI requirements and clinical documentation of diabetes, as well as required participation in a lifestyle modification program.

Upon initial client enrollment in the program, the patient will be educated on the EncircleRx Cardiometabolic program, as well as the lifestyle modification program requirements through our vendor, Omada. As the program stands today, the patient is expected to weigh themselves four times and engage with the vendor's application four (4) times in a rolling 30-day window. This may include a variety of interactions, including completing a lesson, interacting with their coach, or successfully tracking their meals for a set period of time. Completed program patient engagement requirements are combined with an active prior authorization from the prescriber to allow for adjudication. As the patient progresses along their journey, their prior authorization is reassessed to make sure they have lost the prerequisite body mass of 5%. If they have not, their therapy is re-evaluated and potentially discontinued. Additionally, if the patient is deemed unengaged with the Omada program, the adjudication of this prescription is paused until engagement is re-established. Before this occurs, they will be "nudged" by Omada to re-engage and continue to work with the app and their coach.

To combat inappropriate prescribing of GLP-1s, the EncircleRx program includes a GLP-1 Anti-Fraud Protection team. The GLP-1 Anti-Fraud Protection team employs a multifaceted approach, including increased monitoring and fraud prevention, to ensure appropriate prescribing, filling and adherence. This comprehensive strategy involves proactive analytics, targeted prescriber outreach, investigation and tools such as the Prescriber NPI Block to safeguard against inappropriate use.

Program Participation Requirements

[REDACTED]

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Program Cost Estimates

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Technology Components for Express Scripts' GLP-1 Solution

Express Scripts' EncircleRx Cardiometabolic solution requires member engagement through the Omada Health app for the lifestyle management component of our solution. Once enrolled, members will receive a free cellular connected digital scale to enter and digitally store their weight readings in the Omada app for easy tracking. Based on each member's needs, members may also be eligible for a glucometer and blood pressure cuff when packaged with applicable SafeGuardRx solutions, including the Weight Management Care Value program. Our solution does not require the Plan to install any equipment or software.



REQUEST FOR INFORMATION (RFI) ADDENDUM

Issuing Agency:	North Carolina State Health Plan for Teachers and State Employees
RFI Number:	270-20240419GLP
RFI Description:	GLP-1 Solutions
RFI Opening Date and Time:	May 31, 2024, 2:00 PM ET
Addendum Number:	1
Addendum Date:	May 6, 2024
Purchasing Agent:	Kimberly Alston

FAILURE TO RETURN THIS ENTIRE ADDENDUM MAY SUBJECT YOUR RESPONSE TO REJECTION.

1. Addendum Number 1 is in response to questions submitted. Responses to questions begin on the next page.
2. Return one signed copy of this Addendum with your RFI response.

Execute Addendum Number 1. RFI Number 270-20240419GLP:

Respondent: Express Scripts, Inc.

Authorized Signature: 

Name and Title (Print): Adam Kautnzer

President, Evernorth Care Management & Express Scripts

Date: May 29, 2024

**REQUEST FOR INFORMATION:270- 20240419GLP
ADDENDUM NUMBER:1**

Question #	Document Section	Respondent Question	State's Response
1	General	Since [Our Business] and the procedure of endoscopic sleeve gastroplasty (ESG) isn't a GLP-1 or manufacturer, what is your suggestion for us re: the RFI? We believe that ESG would be an excellent option for the NCSHP to consider.	Pursuant to RFI Section 3.0 C. 2. "Multiple Responses," the Plan requests that you submit any information, potential solutions, or alternatives relevant to the matter of weight loss benefits/solutions, for the Plan's review and consideration as a response to the RFI.
2	General	What is the timeline for a potential decision? What is the desired go-live date?	This is a request for information only, and not a request for services. There is not a set timeline for any decisions. In the Plan's sole discretion, the Plan may take any feasible and financially sound steps to address the fiscal issues of coverage for GLP-1 and GIP-GLP-1 agonists for weight loss, including other potential weight loss alternatives for Plan members.
3	General	Who is North Carolina State Health Plan for Teachers and State Employees pharmacy benefit manager? Is RX carved in or out of the health plan?	The Plan's Pharmacy Benefit Manager (PBM) is CVS Caremark. Pharmacy is carved out from the medical benefit. The Plan's current third-party administrator is Blue Cross Blue Shield of North Carolina.
4	Section 1.0, Page 2	Is there a current vendor providing these services? If so, how may I obtain copies of any incumbent contract documents?	The Plan discontinued coverage for GLP-1s, GIP-GLP-1 agonists, and other similar new molecular entities, for the purpose of weight loss effective April 1, 2024. These benefits were provided through the Plan's PBM Contract. No current vendor provides services that includes these molecular entities as a covered benefit for weight loss. The Plan follows the provisions of the North Carolina Public Records Act for public documents with requests submitted to PublicRecords@nctreasurer.com .
5	Section 2.0, Page 2	Who/what type of physician was prescribing the majority weight loss drugs?	There were no limitations on the type of provider with prescribing authority that can prescribe these medications. That is true for all medications. The requirement is only that the member have a valid prescription and meet the utilization management requirements (if applicable).
6	Section 2.0, Page 2	If this RFI greenlights a solicitation, what is the estimated time frame for procurement?	This is a request for information only, and not a request for services. There is not a set timeline for any decisions. In the Plan's sole discretion, the Plan may take any feasible and financially sound steps to address the fiscal issues of coverage for GLP-1 and GIP-GLP-1 agonists for weight loss, including other potential weight loss alternatives for Plan members.

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ADDENDUM NUMBER:1**

Question #	Document Section	Respondent Question	State's Response
7	Section 2.0, Page 2	What is the anticipated contract value?	This is a request for information only, and not a request for services. We do not have an anticipated contract value at this time.
8	Section 2.0, Page 2	<p>What is the number of patients who were taking GLP-1 and GIPs for weight loss in 2023? What is the estimated growth year over year? Goals for the program for the next 5 years?</p>	<p>There were approximately 24,750 utilizers in calendar year 2023. The estimated growth year over year is 51.2% in 2024; 28.6% in 2025 and 14.8% in 2026.</p> <p>The Plan's goal is to have a solution in place that permits benefit coverage for Plan Members in a financially sustainable manner.</p>
9	Section 2.0 B.1., Page 2	<p>B. Establish a pricing framework that would permit the Plan to provide such benefit coverage in a fiscally responsible manner in order to maintain financial sustainability. For example, the Plan seeks the ability to:</p> <ol style="list-style-type: none"> 1. Pay for varying percentages of the unit cost according to medical necessity considerations. <p>Can you please elaborate on what this is referring to (i.e., GLP-1)?</p>	Under this cost model, the member's cost share for the medication would vary based on need. For example, a member with a lower BMI and no chronic conditions would have a higher cost share than someone with a BMI of 40 and multiple comorbidities.
10	Section 2.0 B., Page 2	<p>Is there a list of medications that ideally would be included for weight loss? Will the state consider "off-label" prescriptions i.e., Ozempic for weight loss instead of Wegovy or Moujaro instead of Zepbound? Is the state open to alternative options such as sterile compounding for these medications while they're on the FDA shortage list?</p>	<p>The specific brand names may expand over time but currently include Saxenda, Wegovy, and Zepbound.</p> <p>The Plan is aware of the possibility for off label use by prescribers and have put specific utilization management guidelines in place to avoid this. The Plan is not interested in off labeled use of a GLP-1, GIP-GLP-1 agonist FDA approved for diabetes (Ozempic, Mounjaro, etc) within our current PBM framework. Consequently, any off labeled use would have to be fully separate from the existing pharmacy benefit administrative processes.</p> <p>The Plan is open to reviewing all legal, feasible, and fiscally sound solutions. Any solution would have to be structured such that it would be administratively feasible.</p>

**REQUEST FOR INFORMATION:270- 20240419GLP
ADDENDUM NUMBER:1**

Question #	Document Section	Respondent Question	State's Response
11	Section 2.0 C., Page 2	<p>What were the specific parameters for coverage for GLP-1 and GIPs for weight loss before they were removed from the plan?</p> <p>Is there any data from when the meds were covered on efficacy of certain programs or requirements?</p>	<p>The Plan was using the standard utilization management guidelines for the GLP-1 and GIP-GLP-1s for weight loss provided by our PBM (CVS Caremark). This included a prior authorization in line with FDA approved BMI criteria, participation in a comprehensive weight management program for at least 6 months prior to using drug therapy, and quantity limits. Prior to 1/1/2024 this prior authorization permitted attestation from providers and did not require documentation.</p> <p>CVS Caremark updated the standard UM beginning 1/1/2024. This update requires documentation of BMI and comorbid conditions (if applicable). However, the update does not require documentation for participation in a weight management program - CVS permits an attestation. Grandfathered members eligible after 1/1/2024 that had prior authorizations due between 1/1/2024-4/1/2024 were subject to these new guidelines.</p>
12	Section 2.0 C.1., Pages 2 and 3	<p>Would group sessions, virtual coaching or webinar format be allowable for lifestyle coaching options?</p> <p>Will you allow any health coaches who are not certified NBC-HW? (National board-certified health wellness)</p>	<p>Pursuant to RFI Section 3.0 C. 2. "Multiple Responses," the Plan is open to reviewing all alternatives and potential solutions.</p>
13	Section 2.0 C.4., Page 3	<p>Please explain the prohibition on BMI measurements via telehealth. Given the rural nature of North Carolina, in person measurement requirement is likely a very large barrier to care.</p>	<p>The Plan begins within a frame of reference that a provider should meet with the patient to assess BMI and clinical necessity. However, solutions that meet the objective of ensuring an accurate and medically appropriate diagnosis and include components to subsequently ensure correct measurements that maintain accountability for continuation of therapy would be welcomed.</p>
14	Section 2.0 D.1., Page 3	<p>Is a waist to height or waist to hip ratio acceptable in lieu of BMI for program qualification?</p>	<p>The Plan prefers to use BMI for program qualifications if for no other reason than it is used by the FDA for indication, but the Plan would be open to multiple measures that represent alternative thinking.</p>

**REQUEST FOR INFORMATION:270- 20240419GLP
ADDENDUM NUMBER:1**

Question #	Document Section	Respondent Question	State's Response
15	Section 2.0 D.3., Page 3	Are there any specific qualifications or components required for the weight loss lifestyle management?	There are on specific requirements, but documentation of participation and completion will be required. Attestations will not be sufficient.
16	Section 2.0 E., Page 3	<p>What are the determinants of the program decision in terms of weighted value?</p> <ul style="list-style-type: none"> -Price -Patient experience -Overall value -Small business/Local NC business 	There are no set determinants for making program decisions at this time. The Plan will review all submissions for feasibility and achieving the Plan's fiscal goals solutions.