



**CHRISTIAN
BROTHERS
SERVICES**

1205 Windham Parkway
Romeoville, IL 60446-1679

Employee Benefit Trust
630.378.2900 • 800.807.0100 • 630.378.2504 fax
info@cbservices.org • cbservices.org



RE: Update on the Affordable Care Act (ACA)/Plan Changes, Effective January 1, 2015

As you are aware, many provisions of the Affordable Care Act (ACA) have already been put into effect. Since its inception, the Christian Brothers Employee Benefit Trust (CBEBT) has made system modifications, prepared and created reports with respect to applicable fees, and rewrote the Plan document to be ACA compliant, among other items. At their respective meetings, the Trustees of the CBEBT have and will continue to discuss the effects of the ACA and the necessary steps needed to be taken in order to be in compliance with the act. During their most recent meeting, the Trustees approved the following Plan changes for all Trust members. Some of the changes are a result of the Affordable Care Act, and some are changes made by our Pharmacy Benefits Manager (PBM), Express Scripts Inc. We are also excited to introduce an enhancement to the Trust aimed at improving the quality of lives of our members who suffer from asthma.

Medical and Prescription Drug Out-of-Pocket

Beginning in 2015, ACA no longer allows traditional* health plans to have in-network, out-of-pocket limits in excess of \$6,600 per individual or \$13,200 per family for medical and prescription drug costs. Because of this, some of the plans our members currently offer will need to be modified in order to be in conformity with ACA. Specifically, we will be instituting an out-of-pocket maximum for prescription drugs of \$1,600 per individual/\$3,200 per family. This would then allow employers to have medical out-of-pocket expense limits of no more than \$5,000 per individual/\$10,000 per family per the new ACA guidelines. New Summary of Benefits and Coverage (SBCs) will be sent to each plan administrator reflecting this change. Please make these available to your employees as soon as possible. The SBCs will also be available on our participant website mycbs.org/health after January 1, 2015.

Compound Drug Exclusions

Recently, Express Scripts (ESI) notified us they will be terminating coverage for many compound drug ingredients effective In addition to the compounding change above; ESI has also announced changes to its 2015 formulary list. At its most basic level, formularies are lists of drugs (generic and brand name) that offer the greatest overall value to plan participants. Formulary management enables patients and physicians to choose clinically appropriate and cost-effective drugs for specific conditions. For 2015, ESI will amend its formulary list and has already sent separate communications directly to those members who will be affected by these changes. The 2015 formulary list is now available on our website, as well as ESI's website. This list represents the most commonly prescribed drugs in an abbreviated version. The list is not all-inclusive and does not guarantee coverage as it is subject to change. In addition to using this list, members are encouraged to ask their doctor to prescribe generic drugs whenever appropriate. To view the list, please visit mycbs.org/health.

Prescription Drug Management

Step Therapy - The CBEBT has decided to expand the use of our Step Therapy Program. Step therapy is an approach to prescription drugs intended to control the costs and risks posed by prescription drugs. The patient begins medication(s) for a medical condition with the most cost-effective and safest drug therapy and progresses to other more costly or risky therapies only when and if necessary. Step therapy is required for certain prescribed medications. Typically, the Plan will allow benefits for the least expensive drug within the same drug class (Step 1) to see if it is effective. If it works well, no more "steps" are needed. However, if the patient does not have the desired outcome with the first drug, then a second drug, the next least expensive drug in the same class, will be tried (Step 2), and so forth until the patient finds the medication that is most effective. This program will be managed by ESI. There is nothing required of the patient as the program will automatically be implemented when certain medications are prescribed.

Quantity Limit Program - As with step therapy, the CBEBT is also pleased to continue and expand the Quantity Limit Program. Quantity limit is a quality, cost-savings program promoting the safe and appropriate use of medications. The program ensures that prescriptions contain the approved amount of medication covered by the Plan for a specific time period. The amount approved is based upon guidelines developed and approved by the manufacturer and the FDA. These limits affect only the amount of medication covered. The final decision regarding the amount prescribed remains between the patient and their physician. When members submit a prescription, the pharmacist will see an indicator on their system that the quantity exceeds the maximum allowed by the Plan. This message will also include the quantity allowed by the Plan. The pharmacist can then dispense the allowed quantity. The prescribing physician can always request an approval to dispense the original amount and strength prescribed by documenting the reasons for the higher quantity. If approved, the member is notified and can receive the original quantity prescribed.

Split Fill Program

New in 2015 is the Split Fill Program. The Split Fill Program allows patients taking certain, costly medications to order prescriptions for shorter time periods, usually 15 days in lieu of 30. This allows doctors and patients to try expensive medications that have serious side effects for a shorter time period, while their effectiveness and tolerance can be confirmed prior to paying for and ordering larger quantities of that medication. Patient adherence and medication waste are two long-standing issues that have plagued the treatment of complex diseases. Offering these medications for shorter time periods will lead to better management of these complex diseases which will lead to improved outcomes and increased quality of life. Nothing is required by the participant to access this program. ESI will communicate with and automatically enroll participants based upon the type of medication being prescribed.

Asthma Pilot Program

Also new in 2015 is the Asthma Pilot Program. The CBEBT has partnered with ESI to offer a new, technology driven program to help members with asthma better track and manage their condition and their use of inhalers. Some members identified will be given a wireless sensor that synchronizes with an application on their smart phone. The sensor is easy to use and snaps on to a rescue inhaler. After the inhaler is used, the sensor will record the information and upload it to the phone. The data is then fed to ESI to interpret and help members manage their asthma better. This program is optional and absolutely free to members. Those that do not wish to participate may opt out.

We realize these changes, as a result of the Affordable Care Act, as well as the other enhancements above can be very confusing. Please know that our team of professionals is ready to help you better understand the many benefits available through the CBEBT.

Questions: Gallagher (GBS) askgbs-wa@ajg.com/800-542-3737 and Christian Brothers (CB) ebcustomerservice@cbservices.org/800-807-0400