



**State of Vermont
Green Mountain Care Board**
144 State Street
Montpelier, VT 05620

**Act 193 of 2018
IMPACT OF PRESCRIPTION DRUG COSTS ON HEALTH
INSURANCE PREMIUMS**

In accordance with 18 V.S.A. § 4636

*Prepared by the
Green Mountain Care Board*

Posted June 11, 2021

Introduction

[Act 193 of 2018](#), an act relating to prescription drug price transparency and cost containment, requires the Green Mountain Care Board (GMCB) to report annually on the overall impact of drug costs on health insurance premiums in Vermont.

The reporting requirement set forth in Act 193 of 2018 applies to major medical health insurers with more than 1,000 covered lives in Vermont. The Green Mountain Care Board reviews rate filings in Vermont's fully-insured major medical market. From this population of regulated health insurers, MVP, Blue Cross and Blue Shield of Vermont (BCBSVT) and The Vermont Health Plan (TVHP) were identified as subject to the Act 193 reporting requirement.

MVP, BCBSVT and TVHP were required to submit information for all premiums reviewed in 2020, and assess the overall impact on premiums for all covered prescription drugs in the following three categories:

- a. 25 most frequently prescribed drugs and the average wholesale price for each drug;
- b. 25 most costly drugs by total plan spending and the average wholesale price for each drug;
- c. 25 drugs with the highest year-over-year price increases and the average wholesale price for each drug; and
- d. A breakdown of the total cost of pharmacy on overall premiums and the overall pharmacy trend for all filings under review.

This report summarizes the results from the collected data and includes additional materials to provide context for the information. The additional materials include:

1. Attachment One: Health Insurer Data (MVP, BCBSVT, TVHP)
2. Attachment Two: Pharmaceutical Supply Chain Diagram
3. Attachment Three: Components of Commercial Insurance Premiums
4. Attachment Four: Act 193 of 2018 and Copy of the Data Request Form

Summary of Results

Prescription drugs account for approximately 11.2% of the commercial premiums under review. Table One summarizes the impact of prescription drugs on premiums by:

- **Member Month:** the per-member per-month (PMPM) amount an individual consumer pays for prescription drugs as part of their monthly premium.
- **% Change:** the change in PMPM compared to the previous year.
- **% of Premium:** the percentage of monthly premium attributable to prescription drugs.

Table One: Prescription Drug Impact on Premium				
Carrier	Vermont Lives	PMPM	% Change	% of Premium
MVP	39,038	\$77.90	2.1%	13.6%
BCBSVT	47,002	\$119.52	10.6%	18.4%
TVHP	1,262	\$10.08	-45.5%	1.6%
Total/Weighted Average	87,302	\$69.17	-10.9	11.2%

The three prescription drugs with the greatest impact on premiums are Humira (CF) Pen, Humira Pen, and Stelara - all specialty drugs.

Table Two: Prescription Drugs with Greatest Impact on Premiums		
Product/NDC #	Therapeutic Class	% of Premium
Humira (CF Pen) / 00074055402	Inflammatory conditions: used to treat arthritis, plaque psoriasis, ankylosing spondylitis, Crohn's disease, and ulcerative colitis	1.7%
Humira Pen / 00074433902	Analgesics/anti-inflammatory: used to treat arthritis, plaque psoriasis, ankylosing spondylitis, Crohn's disease, and ulcerative colitis	0.7%
Stelara / 57894006103	Inflammatory conditions: used to treat plaque psoriasis, psoriatic arthritis, or Chron's disease	0.5%

As a component of commercial insurance premiums, prescription drugs are generally broken down into three categories:

- **Generic:** drugs that are the same as an existing approved brand name drug in dosage, intended use, safety, strength, route of administration, and quality. Generic drugs generally cost less than their brand-name counterparts because they do not have to repeat studies and testing required of the brand-name drugs to demonstrate their safety and effectiveness. According to the U.S. Food and Drug Administration (FDA), 9 out of 10 prescriptions filled in this country are for generic drugs.
- **Brand:** drugs developed and patented by a drug manufacturer and which, with FDA approval for safety and effectiveness, are sold under a proprietary, trademark-protected name. When the patent expires, the drug may be made available as a generic drug.
- **Specialty:** high-cost complex drugs and biologics typically used to treat chronic, serious, or life-threatening conditions such as cancer, rheumatoid arthritis, growth hormone deficiency, and multiple sclerosis. These drugs may require special handling or require unique storage, be difficult to administrate, and require additional patient education, support, and monitoring.

Tables Three and Four summarize the impact of generic, brand and specialty drugs on premiums. Table Three displays the impact on premium on a PMPM basis, and Table Four displays the impact as a percentage of premium.

Table Three: Drug Category \$ PMPM			
	Generic	Brand	Specialty
BCBSVT	\$14.06	\$35.14	\$70.31
MVP	\$6.17	\$22.31	\$49.42
TVHP	\$1.28	\$4.35	\$4.44

Table Four: Drug Category % of Premium			
	Generic	Brand	Specialty
BCBSVT	2.2%	5.4%	10.8%
MVP	1.07%	3.88%	8.60%
TVHP	0.2%	0.7%	0.7%

Methodology

Analysis Population

Major medical health insurers with more than 1,000 covered lives in Vermont are subject to the reporting requirement set forth in Act 193 of 2018. Under Vermont law, the Green Mountain Care Board reviews rate requests in the State’s fully-insured major medical health insurance market per 18 V.S.A. § 9375(b)(6); 8 V.S.A. § 4062(a).

Table Five, based on information contained in the rate filings of MVP, BCBSVT and TVHP, shows the number of Vermont lives and overall premiums for the filings subject to this reporting requirement in 2020.

Table Five: 2020 Filings - Vermont Lives and Premium ¹			
Company Name	Filing Name	Vermont Lives	Premium
MVP	Large Group HMO	2,058	\$12,531,327
MVP	Exchange Filing	36,980	\$248,934,672
BlueCross/BlueShield VT	Exchange Filing	39,354	\$292,726,577
BlueCross/BlueShield VT	Large Group	7,648	\$73,504,950
The Vermont Health Plan	Large Group	1,262	\$15,295,918
TOTAL		87,302	\$642,993,444

Price Reporting

18 V.S.A. § 4636 requires carriers to submit the “average wholesale price” (AWP) of the required drug categories. To ensure that carriers submitted data in a standard format, the following price reporting requirements were applied:

Average Wholesale Price

The AWP is the average price of a drug purchased at the wholesale level.² The price of a drug may change several times during a year. Carriers subscribe to commercial databases for access to the most current AWP of drugs.³ In order to synchronize the timeframe for the insurance rate filings under review with the timeframe for the prescription drugs under review, carriers were instructed to select AWP as of January 1, 2020.

Rebates and Discounts

Rebates are a significant factor in the price consumers pay for prescription drugs. A drug manufacturer will typically pay rebates to a pharmacy benefit manager (PBM), which shares a portion of the rebate with the health insurer. The health insurer can then factor rebate savings into its pharmacy claim experience when establishing future premiums. Manufacturers most often pay rebates on high-cost, brand name prescription drugs in competitive classes where there are interchangeable and competing products, aiming to incentivize the PBM to include the

¹ The dollar amount of the premium reflects the information submitted to the Board in the health insurer’s initial rate filing, not for any Board-ordered rate change, and the data submitted by the carrier.

² The use of the average wholesale price (AWP) was intended to protect confidential, competitive pricing information while allowing third-party payers, including government programs, to obtain access. However, AWP has been criticized as manipulatable and easily inflated relative to actual market prices for prescription drugs.

³ BCBSVT, TVHP and MVP use Medi-Span, considered to be the leading provider of drug information for the health care industry, to establish AWP.

manufacturer’s product on its formulary. Rebate contract terms are confidential, making actual price comparisons difficult. AWP does not consider rebates or their impact on actual prices paid by the consumer. Since rebates are not considered the percent of premium will be inflated.

National Drug Code

Any individual drug is available in different doses and package options. For example, Lisinopril is a generic drug used to treat high blood pressure and is available as a tablet or oral liquid, in different dosages and by different drug manufacturers. To ensure accurate analysis of equivalent drugs and avoid submissions based on different dose and package options, carriers were required to submit drug information based on the medication’s National Drug Code (NDC). NDCs are universal identifiers composed of a unique ten-digit, three-segment number for drugs in the United States. The three segments of the NDC identify the labeler, the product, and the commercial package size.

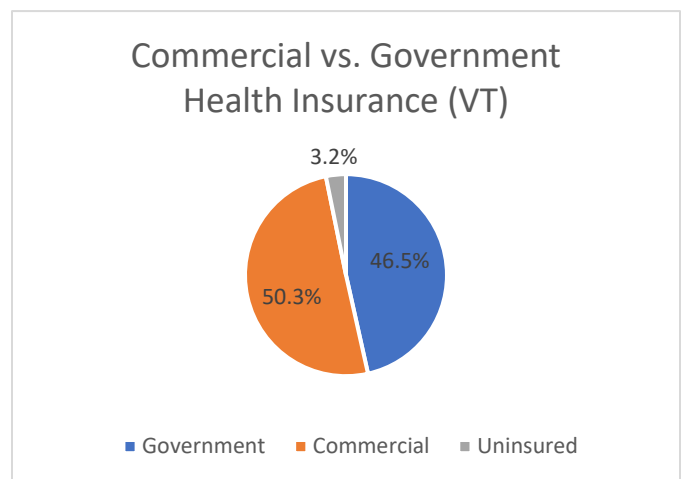
Health Insurance Coverage in Vermont

Vermonters receive health insurance coverage in a variety of ways, for example, through their employer, as an individual, or through the government. This report assesses the commercial, fully-insured population whose rate filings are reviewed by the Green Mountain Care Board, and which constitutes approximately 15% of Vermont’s total population.⁴

Table Six: Health Insurance Coverage Profile 2018

Category	# of Vermonters	% of Total Vermont Population
Commercial: Individual, Small and Large Group (Report Population)	94,415	15.1%
Commercial: Self-Insured	208,439	33.3%
Commercial: VT residents covered by insurers outside of VT	12,135	1.9%
Government: Medicaid/Medicare	291,510	46.5%
Uninsured	19,800	3.2%
Total Vermont Population	626,299	100.0%

Approximately 50% of Vermonters receive their coverage from commercial health insurance, compared with 46% from public health insurance. The Office of the Vermont Attorney General annually reports drug cost information on the public health insurance population, including a comparison of private and public drug payment methods, in the [Pharmaceutical Cost Transparency Report](#) required under 18 V.S.A. § 4635.



⁴ [Expenditure Analysis 2018](#), Green Mountain Care Board.

Attachment 1
Health Insurer Data (BCBSVT, TVHP, & MVP)

25 Most Frequently Prescribed Drugs

Insurer: BCBS

Table One: Breakdown by Product Name							
Please list the drugs in order from most frequently to least frequently prescribed, #1 representing the most frequently prescribed. Please use the AWP as of January 2020.							
Product Name	Labeler Name	NDC #	Therapeutic Category	Brand (B) or Specialty (S)	AWP	PMPM	% of Premium
1 FLUTICASON PROPRIONATE	FLUTICASON PROP 50 MCG SPRAY	00054327099	ALLERGIES	Generic	\$679,312.47	\$0.01	0.0%
2 ALBUTEROL SULFATE HFA	ALBUTEROL HFA 90 MCG INHALER	00093317431	ASTHMA	Generic	\$507,555.41	\$0.21	0.0%
3 FLUCELVAX QUAD 2020-2021	FLUCELVAX QUAD 2020-2021 SYR	70461032003	VACCINATIONS	Brand	\$171,305.09	\$0.16	0.0%
4 FLUARIX QUAD 2020-2021	FLUARIX QUAD 2020-2021 SYRINGE	58160088552	VACCINATIONS	Brand	\$96,422.94	\$0.11	0.0%
5 LISINOPRIL	LISINOPRIL 10 MG TABLET	68180098003	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$353,250.13	\$0.01	0.0%
6 FLUZONE QUAD 2020-2021	FLUZONE QUAD 2020-2021 SYRINGE	49281042050	VACCINATIONS	Brand	\$94,773.61	\$0.11	0.0%
7 SHINGRIX	SHINGRIX VIAL KIT	58160082311	VACCINATIONS	Brand	\$610,121.74	\$0.41	0.1%
8 VENTOLIN HFA	VENTOLIN HFA 90 MCG INHALER	00173068220	ASTHMA	Brand	\$257,217.27	\$0.11	0.0%
9 AFLURIA QUAD 2020-21 (3YR UP)	AFLURIA QUAD 2020-21 (3YR UP)	33332032001	VACCINATIONS	Brand	\$72,661.35	\$0.08	0.0%
10 SERTRALINE HCL	SERTRALINE HCL 100 MG TABLET	65862001305	DEPRESSION	Generic	\$779,648.07	\$0.01	0.0%
11 LANTUS SOLOSTAR	LANTUS SOLOSTAR 100 UNIT/ML	00088221905	DIABETES	Brand	\$2,697,714.01	\$1.54	0.2%
12 HYDROCHLOROTHIAZIDE	HYDROCHLOROTHIAZIDE 25 MG TAB	16729018317	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$18,491.49	\$0.00	0.0%
13 ELIQUIS	ELIQUIS 5 MG TABLET	00003089421	ANTICOAGULANT	Brand	\$2,659,062.68	\$1.45	0.2%
14 LISINOPRIL	LISINOPRIL 20 MG TABLET	68180098103	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$246,292.53	\$0.00	0.0%
15 OMEPRAZOLE	OMEPRAZOLE DR 40 MG CAPSULE	68462039710	HEARTBURN/ULCER DISEASE	Generic	\$1,534,561.73	\$0.00	0.0%
16 FLOVENT HFA	FLOVENT HFA 110 MCG INHALER	00173071920	ASTHMA	Brand	\$1,075,382.42	\$0.58	0.1%
17 OMEPRAZOLE	OMEPRAZOLE DR 20 MG CAPSULE	55111015810	HEARTBURN/ULCER DISEASE	Generic	\$841,783.05	\$0.00	0.0%
18 OMEPRAZOLE	OMEPRAZOLE DR 20 MG CAPSULE	00781286810	HEARTBURN/ULCER DISEASE	Generic	\$832,309.40	\$0.00	0.0%
19 CITALOPRAM HBR	CITALOPRAM HBR 20 MG TABLET	13668001005	DEPRESSION	Generic	\$437,909.05	\$0.00	0.0%
20 AMLODIPINE BESYLATE	AMLODIPINE BESYLATE 5 MG TAB	68180072003	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$329,065.91	\$0.00	0.0%
21 SYMBICORT	SYMBICORT 160-4.5 MCG INHALER	00186037020	ASTHMA	Brand	\$1,354,824.06	\$0.74	0.1%
22 HUMIRA(CF) PEN	HUMIRA(CF) PEN 40 MG/0.4 ML	00074055402	INFLAMMATORY CONDITIONS	Specialty	\$17,577,796.96	\$10.80	1.7%
23 PROAIR HFA	PROAIR HFA 90 MCG INHALER	59310057922	ASTHMA	Brand	\$203,057.74	\$0.09	0.0%
24 LISINOPRIL	LISINOPRIL 20 MG TABLET	43547035411	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$179,405.00	\$0.00	0.0%
25 MONTELUKAST SODIUM	MONTELUKAST SOD 10 MG TABLET	65862057490	ASTHMA	Generic	\$763,007.17	\$0.01	0.0%

Table Two: Breakdown by Category			
For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.			
	PMPM	% Change	% of Premium
Generic	\$0.28	1269%	0.0%
Brand	\$5.37	22.8%	0.8%
Specialty	\$10.80	64.8%	1.7%

25 Highest Priced Drugs

Insurer: BCBS

Table One: Breakdown by Product Name								
Please list the drugs in order from highest cost, #1 representing the highest cost. Please use the AWP as of January 1, 2020.								
Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or Specialty (S)		AWP	PMPM	% of Premium
1 HUMIRA(CF) PEN	HUMIRA(CF) PEN 40 MG/0.4 ML	00074055402	INFLAMMATORY CONDITIONS	Specialty		\$17,577,796.96	\$10.80	1.7%
2 HUMIRA PEN	HUMIRA PEN 40 MG/0.8 ML	00074433902	INFLAMMATORY CONDITIONS	Specialty		\$5,547,616.07	\$3.36	0.5%
3 STELARA	STELARA 90 MG/ML SYRINGE	57894006103	INFLAMMATORY CONDITIONS	Specialty		\$5,420,027.20	\$3.44	0.5%
4 ENBREL SURECLICK	ENBREL 50 MG/ML SURECLICK	58406003204	INFLAMMATORY CONDITIONS	Specialty		\$5,281,329.68	\$3.21	0.5%
5 TRIKAFTA	TRIKAFTA 100/50/75 MG-150 MG	51167033101	CYSTIC FIBROSIS	Specialty		\$4,530,706.84	\$2.94	0.5%
6 LANTUS SOLOSTAR	LANTUS SOLOSTAR 100 UNIT/ML	00088221905	DIABETES	Brand		\$2,697,714.01	\$1.54	0.2%
7 ELIQUIS	ELIQUIS 5 MG TABLET	00003089421	ANTICOAGULANT	Brand		\$2,659,062.68	\$1.45	0.2%
8 DUPIXENT SYRINGE	DUPIXENT 300 MG/2 ML SYRINGE	00024591401	SKIN CONDITIONS	Specialty		\$2,425,219.24	\$1.46	0.2%
9 HUMALOG	HUMALOG 100 UNIT/ML VIAL	00002751001	DIABETES	Brand		\$2,357,255.64	\$1.35	0.2%
10 STRENSIQ	STRENSIQ 80 MG/0.8 ML VIAL	25682001912	ENZYME DEFICIENCIES	Specialty		\$2,141,568.00	\$1.41	0.2%
11 HUMALOG KWIKPEN U-100	HUMALOG 100 UNIT/ML KWIKPEN	00002879959	DIABETES	Brand		\$2,017,005.12	\$1.18	0.2%
12 GLATIRAMER ACETATE	GLATIRAMER 40 MG/ML SYRINGE	00378696112	MULTIPLE SCLEROSIS	Specialty		\$1,863,350.37	\$1.05	0.2%
13 TRULICITY	TRULICITY 1.5 MG/0.5 ML PEN	00002143480	DIABETES	Brand		\$1,718,531.28	\$1.00	0.2%
14 COSENTYX PEN (2 PENS)	COSENTYX 300 MG DOSE-2 PENS	00078063941	INFLAMMATORY CONDITIONS	Specialty		\$1,582,198.33	\$0.99	0.2%
15 REVLIMID	REVLIMID 10 MG CAPSULE	59572041028	CANCER	Specialty		\$1,557,453.22	\$0.96	0.1%
16 BIKTARVY	BIKTARVY 50-200-25 MG TABLET	61958250101	HIV	Specialty		\$1,534,958.11	\$0.96	0.1%
17 OMEPRAZOLE	OMEPRAZOLE DR 40 MG CAPSULE	68462039710	HEARTBURN/ULCER DISEASE	Generic		\$1,534,561.73	\$0.00	0.0%
18 OZEMPIC	OZEMPIC 0.25-0.5 MG DOSE PEN	00169413212	DIABETES	Brand		\$1,459,241.36	\$0.84	0.1%
19 SYMBICORT	SYMBICORT 160-4.5 MCG INHALER	00186037020	ASTHMA	Brand		\$1,354,824.06	\$0.74	0.1%
20 XELJANZ	XELJANZ 5 MG TABLET	00069100101	INFLAMMATORY CONDITIONS	Specialty		\$1,201,178.90	\$0.73	0.1%
21 OZEMPIC	OZEMPIC 1 MG DOSE PEN	00169413602	DIABETES	Brand		\$1,191,733.82	\$0.70	0.1%
22 LYNPARZA	LYNPARZA 150 MG TABLET	00310067912	CANCER	Specialty		\$1,169,170.43	\$0.75	0.1%
23 EPCLUSA	EPCLUSA 400 MG-100 MG TABLET	61958220101	HEPATITIS C	Specialty		\$1,166,256.00	\$0.74	0.1%
24 TECFIDERA	TECFIDERA DR 240 MG CAPSULE	64406000602	MULTIPLE SCLEROSIS	Specialty		\$1,152,004.10	\$0.71	0.1%
25 HUMIRA(CF)	HUMIRA(CF) 40 MG/0.4 ML SYRINGE	00074024302	INFLAMMATORY CONDITIONS	Specialty		\$1,100,279.40	\$0.67	0.1%

Table Two: Breakdown by Category			
For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.			
	PMPM	% Change	% of Premium
Generic	\$0.00	0%	0.0%
Brand	\$8.81	26%	1.4%
Specialty	\$34.19	43%	5.3%

25 Drugs with highest year-over-year price increases

Insurer: BCBS

Table One: Breakdown by Product Name

Please list the drugs in order from highest year-over-year price increase, #1 representing the highest increase. Increases should be based on a percentage basis. Please use the AWP as of January 1, 2020.

Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or Specialty (S)	Substitute Product in alternate category	AWP	PMPM	% of Premium	% Increase
1 PREGABALIN	PREGABALIN 200 MG CAPSULE	72205001690	PAIN/INFLAMMATION	Generic		\$1,011.28	\$0.00	0.0%	1049%
2 AMLODIPINE-OLMESARTAN	AMLODIPINE-OLMESARTAN 10-40 MG	42571023830	HIGH BLOOD PRESS/HEART DISEASE	Generic		\$1,762.85	\$0.00	0.0%	734%
3 AMLODIPINE-OLMESARTAN	AMLODIPINE-OLMESARTAN 5-20 MG	42571023530	HIGH BLOOD PRESS/HEART DISEASE	Generic		\$1,646.54	\$0.00	0.0%	653%
4 CELECOXIB	CELECOXIB 200 MG CAPSULE	42571014405	PAIN/INFLAMMATION	Generic		\$9,417.08	\$0.00	0.0%	481%
5 CLOBETASOL PROPIONATE	CLOBETASOL 0.05% OINTMENT	70700010615	SKIN CONDITIONS	Generic		\$1,865.40	\$0.00	0.0%	461%
6 ACYCLOVIR	ACYCLOVIR 200 MG CAPSULE	69076014601	VIRAL INFECTIONS	Generic		\$2,287.12	\$0.00	0.0%	376%
7 TIMOLOL MALEATE	TIMOLOL MALEATE 0.5% EYE DROPS	17478028811	GLAUCOMA	Generic		\$848.50	\$0.00	0.0%	325%
8 TIMOLOL MALEATE	TIMOLOL MALEATE 0.5% EYE DROPS	17478028812	GLAUCOMA	Generic		\$742.45	\$0.00	0.0%	314%
9 CLOBETASOL PROPIONATE	CLOBETASOL 0.05% OINTMENT	70700010617	SKIN CONDITIONS	Generic		\$3,117.00	\$0.00	0.0%	310%
10 DULOXETINE HCL	DULOXETINE HCL DR 60 MG CAP	47335038383	DEPRESSION	Generic		\$11,935.31	\$0.00	0.0%	291%
11 PINDOLOL	PINDOLOL 5 MG TABLET	29033002801	HIGH BLOOD PRESS/HEART DISEASE	Generic		\$4,982.36	\$0.00	0.0%	250%
12 DULOXETINE HCL	DULOXETINE HCL DR 20 MG CAP	47335038186	DEPRESSION	Generic		\$5,356.80	\$0.00	0.0%	231%
13 METHYLPREDNISOLONE	METHYLPREDNISOLONE 4 MG DOSEPK	72647033104	INFLAMMATION/IMMUNE DISORDERS	Generic		\$1,772.72	\$0.00	0.0%	200%
14 PINDOLOL	PINDOLOL 10 MG TABLET	29033002901	HIGH BLOOD PRESS/HEART DISEASE	Generic		\$4,210.13	\$0.00	0.0%	200%
15 TIMOLOL MALEATE	TIMOLOL MALEATE 0.5% EYE DROPS	17478028810	GLAUCOMA	Generic		\$578.00	\$0.00	0.0%	182%
16 CELECOXIB	CELECOXIB 100 MG CAPSULE	42571014301	PAIN/INFLAMMATION	Generic		\$18,528.62	\$0.00	0.0%	173%
17 DULOXETINE HCL	DULOXETINE HCL DR 30 MG CAP	47335038281	DEPRESSION	Generic		\$9,442.30	\$0.00	0.0%	166%
18 GLYCOPYRROLATE	GLYCOPYRROLATE 1 MG TABLET	69076047501	GI DISORDERS	Generic		\$354.48	\$0.00	0.0%	152%
19 ESCITALOPRAM OXALATE	ESCITALOPRAM 20 MG TABLET	76282025110	DEPRESSION	Generic		\$133.65	\$0.00	0.0%	150%
20 ESCITALOPRAM OXALATE	ESCITALOPRAM 10 MG TABLET	76282025090	DEPRESSION	Generic		\$51.48	\$0.00	0.0%	150%
21 LIDOCAINE-TETRACAINE	LIDOCAINE-TETRACAINE 7%-7% CRM	71800063115	PAIN/INFLAMMATION	Brand		\$11,072.64	\$0.00	0.0%	132%
22 COMP-AIR NEBULIZER COMPRESSOR	COMP-AIR NEBULIZER SYSTEM	73796045801	MEDICAL SUPPLIES	Brand		\$615.00	\$0.00	0.0%	106%
23 GLYCOPYRROLATE	GLYCOPYRROLATE 2 MG TABLET	69076047601	GI DISORDERS	Generic		\$1,561.12	\$0.00	0.0%	106%
24 OXYCODONE HCL	OXYCODONE HCL 5 MG/5 ML SOLN	00406855605	PAIN/INFLAMMATION	Generic		\$122.55	\$0.00	0.0%	92%
25 ESCITALOPRAM OXALATE	ESCITALOPRAM 10 MG TABLET	76282025010	DEPRESSION	Generic		\$282.67	\$0.00	0.0%	89%

Table Two: Breakdown by Category

For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.

	PMPM	% Change	% of Premium
Generic	\$0.00	-3%	0.0%
Brand	\$0.00	-88%	0.0%
Specialty	\$0.00	0	0.0%

Pharmacy Trend: Impact on Premiums

Insurer: BCBS

Table One: Please provide a breakdown of the total cost of pharmacy on overall premiums for all filings under review.

	PMPM	% Change	% of Premium
Generic	\$14.06	1.7%	2.2%
Brand	\$35.14	5.7%	5.4%
Specialty	\$70.31	15.4%	10.8%

Table Two: Please provide the overall pharmacy trend for all filings under review.

	PMPM	% Change	% of Premium
Pharmacy Trend	\$119.52	10.6%	18.4%

25 Most Frequently Prescribed Drugs

Insurer: TVHP

Table One: Breakdown by Product Name							
Please list the drugs in order from most frequently to least frequently prescribed, #1 representing the most frequently prescribed. Please use the AWP as of January 2020.							
Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or			
				Specialty (S)	AWP	PMPM	% of Premium
1 SHINGRIX	SHINGRIX VIAL KIT	58160082311	VACCINATIONS	Brand	\$30,887.64	\$0.04	0.0%
2 HYDROCHLOROTHIAZIDE	HYDROCHLOROTHIAZIDE 25 MG TAB	16729018317	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$810.29	\$0.00	0.0%
3 FLUTICASON PROPIONATE	FLUTICASON PROP 50 MCG SPRAY	00054327099	ALLERGIES	Generic	\$10,613.08	\$0.00	0.0%
4 AMLODIPINE BESYLATE	AMLODIPINE BESYLATE 5 MG TAB	68180072003	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$14,287.19	\$0.00	0.0%
5 LISINAPRIL	LISINAPRIL 10 MG TABLET	68180098003	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$8,387.77	\$0.00	0.0%
6 ELIQUIS	ELIQUIS 5 MG TABLET	00003089421	ANTICOAGULANT	Brand	\$114,314.25	\$0.22	0.0%
7 AMLODIPINE BESYLATE	AMLODIPINE BESYLATE 5 MG TAB	67877019810	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$11,928.32	\$0.00	0.0%
8 ALBUTEROL SULFATE HFA	ALBUTEROL HFA 90 MCG INHALER	00093317431	ASTHMA	Generic	\$7,253.96	\$0.03	0.0%
9 LISINAPRIL	LISINAPRIL 20 MG TABLET	68180098103	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$7,517.13	\$0.00	0.0%
10 LISINAPRIL	LISINAPRIL 20 MG TABLET	43547035411	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$6,472.36	\$0.00	0.0%
11 LATANOPROST	LATANOPROST 0.005% EYE DROPS	59762033302	GLAUCOMA	Generic	\$10,574.97	\$0.00	0.0%
12 LATANOPROST	LATANOPROST 0.005% EYE DROPS	61314054701	GLAUCOMA	Generic	\$17,005.00	\$0.00	0.0%
13 SIMVASTATIN	SIMVASTATIN 20 MG TABLET	68180047903	HIGH BLOOD CHOLESTEROL	Generic	\$26,309.97	\$0.00	0.0%
14 HYDROCODONE-ACETAMINOPHEN	HYDROCODONE-ACETAMIN 5-325 MG	00406012301	PAIN/INFLAMMATION	Generic	\$1,378.16	\$0.00	0.0%
15 MELOXICAM	MELOXICAM 15 MG TABLET	29300012510	PAIN/INFLAMMATION	Generic	\$16,681.34	\$0.00	0.0%
16 TAMSULOSIN HCL	TAMSULOSIN HCL 0.4 MG CAPSULE	68382013201	URINARY DISORDERS	Generic	\$22,424.78	\$0.00	0.0%
17 LISINAPRIL	LISINAPRIL 5 MG TABLET	68180051303	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$4,978.57	\$0.00	0.0%
18 OMEPRAZOLE	OMEPRazole DR 20 MG CAPSULE	00781286810	HEARTBURN/ULCER DISEASE	Generic	\$24,609.88	\$0.00	0.0%
19 CHLORTHALIDONE	CHLORTHALIDONE 25 MG TABLET	75834010901	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$5,829.33	\$0.01	0.0%
20 OMEPRAZOLE	OMEPRazole DR 20 MG CAPSULE	55111015810	HEARTBURN/ULCER DISEASE	Generic	\$24,585.18	\$0.00	0.0%
21 AMOXICILLIN	AMOXICILLIN 500 MG CAPSULE	16714029904	INFECTIONS	Generic	\$368.71	\$0.00	0.0%
22 AMLODIPINE BESYLATE	AMLODIPINE BESYLATE 10 MG TAB	68180072103	HIGH BLOOD PRESS/HEART DISEASE	Generic	\$12,476.47	\$0.00	0.0%
23 LATANOPROST	LATANOPROST 0.005% EYE DROPS	24208046325	GLAUCOMA	Generic	\$2,852.46	\$0.00	0.0%
24 FLOVENT HFA	FLOVENT HFA 110 MCG INHALER	00173071920	ASTHMA	Brand	\$20,132.45	\$0.08	0.0%
25 ALENDRONATE SODIUM	ALENDRONATE SODIUM 70 MG TAB	65862032904	OSTEOPOROSIS	Generic	\$9,014.50	\$0.00	0.0%

Table Two: Breakdown by Category			
For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.			
	PMPM	% Change	% of Premium
Generic	\$0.05	78.6%	0.0%
Brand	\$0.34	-5.6%	0.1%
Specialty	NA	NA	---

25 Highest Priced Drugs

Insurer: TVHP

Table One: Breakdown by Product Name								
Please list the drugs in order from highest cost, #1 representing the highest cost. Please use the AWP as of January 1, 2020.								
Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or Specialty (S)		AWP	PMPM	% of Premium
				Generic (G), Brand (B) or Specialty (S)	AWP			
1 TAGRISSO	TAGRISSO 80 MG TABLET	00310135030	CANCER	Specialty		\$415,817.33	\$1.48	0.2%
2 HUMIRA(CF) PEN	HUMIRA(CF) PEN 40 MG/0.4 ML	00074055402	INFLAMMATORY CONDITIONS	Specialty		\$226,724.24	\$1.48	0.2%
3 ELIQUIS	ELIQUIS 5 MG TABLET	00003089421	ANTICOAGULANT	Brand		\$114,314.25	\$0.22	0.0%
4 COPAXONE	COPAXONE 40 MG/ML SYRINGE	68546032512	MULTIPLE SCLEROSIS	Specialty		\$90,979.20	\$0.60	0.1%
5 STELARA	STELARA 45 MG/0.5 ML SYRINGE	57894006003	INFLAMMATORY CONDITIONS	Specialty		\$83,098.20	\$0.00	0.0%
6 DUPIXENT SYRINGE	DUPIXENT 300 MG/2 ML SYRINGE	00024591401	SKIN CONDITIONS	Specialty		\$59,713.76	\$0.20	0.0%
7 LANTUS SOLOSTAR	LANTUS SOLOSTAR 100 UNIT/ML	00088221905	DIABETES	Brand		\$44,300.12	\$0.10	0.0%
8 VICTOZA 3-PAK	VICTOZA 3-PAK 18 MG/3 ML PEN	00169406013	DIABETES	Brand		\$41,811.48	\$0.26	0.0%
9 OMEPRAZOLE	OMEPRAZOLE DR 40 MG CAPSULE	68462039710	HEARTBURN/ULCER DISEASE	Generic		\$33,500.71	\$0.00	0.0%
10 HUMALOG KWIKPEN U-100	HUMALOG 100 UNIT/ML KWIKPEN	00002879959	DIABETES	Brand		\$33,351.55	\$0.18	0.0%
11 TRESIBA FLEXTOUCH U-200	TRESIBA FLEXTOUCH 200 UNIT/ML	00169255013	DIABETES	Brand		\$31,725.63	\$0.21	0.0%
12 SHINGRIX	SHINGRIX VIAL KIT	58160082311	VACCINATIONS	Brand		\$30,887.64	\$0.04	0.0%
13 NUPLAZID	NUPLAZID 34 MG CAPSULE	63090034030	MENTAL/NEURO DISORDERS	Specialty		\$30,202.80	\$0.00	0.0%
14 JARDIANCE	JARDIANCE 25 MG TABLET	00597015390	DIABETES	Brand		\$28,837.40	\$0.12	0.0%
15 ELIQUIS	ELIQUIS 2.5 MG TABLET	00003089321	ANTICOAGULANT	Brand		\$27,910.00	\$0.04	0.0%
16 LANTUS	LANTUS 100 UNIT/ML VIAL	00088222033	DIABETES	Brand		\$27,561.87	\$0.13	0.0%
17 DESCOVY	DESCOVY 200-25 MG TABLET	61958200201	HIV	Specialty		\$26,528.88	\$0.17	0.0%
18 SIMVASTATIN	SIMVASTATIN 20 MG TABLET	68180047903	HIGH BLOOD CHOLESTEROL	Generic		\$26,309.97	\$0.00	0.0%
19 PREZISTA	PREZISTA 800 MG TABLET	59676056630	HIV	Specialty		\$25,335.33	\$0.17	0.0%
20 OMEPRAZOLE	OMEPRAZOLE DR 20 MG CAPSULE	00781286810	HEARTBURN/ULCER DISEASE	Generic		\$24,609.88	\$0.00	0.0%
21 OMEPRAZOLE	OMEPRAZOLE DR 20 MG CAPSULE	55111015810	HEARTBURN/ULCER DISEASE	Generic		\$24,585.18	\$0.00	0.0%
22 OLUMIANT	OLUMIANT 2 MG TABLET	00002418230	INFLAMMATORY CONDITIONS	Specialty		\$24,308.28	\$0.16	0.0%
23 COMBIVENT RESPIMAT	COMBIVENT RESPIMAT 20-100 MCG	00597002402	COPD	Brand		\$24,051.78	\$0.12	0.0%
24 ATORVASTATIN CALCIUM	ATORVASTATIN 40 MG TABLET	60505258009	HIGH BLOOD CHOLESTEROL	Generic		\$23,978.05	\$0.00	0.0%
25 JANUVIA	JANUVIA 100 MG TABLET	00006027731	DIABETES	Brand		\$23,291.28	\$0.15	0.0%

Table Two: Breakdown by Category			
For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.			
	PMPM	% Change	% of Premium
Generic	\$0.00	0.0%	0.0%
Brand	\$1.57	-8.4%	0.2%
Specialty	\$4.25	61.5%	0.7%

25 Drugs with highest year-over-year price increases

Insurer: TVHP

Table One: Breakdown by Product Name									
Please list the drugs in order from highest year-over-year price increase, #1 representing the highest increase. Increases should be based on a percentage basis. Please use the AWP as of January 1, 2020.									
Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or Specialty (S)	AWP	PMPM	% of Premium	% Increase	
1	TIMOLOL MALEATE	TIMOLOL MALEATE 0.5% EYE DROPS	17478028811	GLAUCOMA	Generic	\$194.10	\$0.00	0.0%	337%
2	TIMOLOL MALEATE	TIMOLOL MALEATE 0.5% EYE DROPS	17478028812	GLAUCOMA	Generic	\$48.75	\$0.00	0.0%	335%
3	ASPIRIN EC	ASPIRIN EC 81 MG TABLET	49483048112	PAIN/INFLAMMATION	Generic	\$2.50	\$0.00	0.0%	122%
4	BUDESONIDE	BUDESONIDE 0.5 MG/2 ML SUSP	69097031987	ASTHMA	Generic	\$664.74	\$0.00	0.0%	85%
5	METFORMIN HCL	METFORMIN HCL 850 MG TABLET	60429011227	DIABETES	Generic	\$114.60	\$0.00	0.0%	67%
6	MERCAPTOPYRINE	MERCAPTOPYRINE 50 MG TABLET	69076091302	CANCER	Generic	\$185.40	\$0.00	0.0%	62%
7	COMP-AIR NEBULIZER COMPRESSOR	COMP-AIR NEBULIZER SYSTEM	73796045801	MEDICAL SUPPLIES	Brand	\$61.50	\$0.00	0.0%	51%
8	PANTOPRAZOLE SODIUM	PANTOPRAZOLE SOD DR 40 MG TAB	31722071390	HEARTBURN/ULCER DISEASE	Generic	\$13,116.20	\$0.00	0.0%	47%
9	HYOSCYAMINE SULFATE	HYOSCYAMINE 0.125 MG TAB SL	42192033901	GI DISORDERS	Generic	\$34.00	\$0.00	0.0%	47%
10	BISACODYL	BISACODYL EC 5 MG TABLET	00904674880	CONSTIPATION	Generic	\$0.64	\$0.00	0.0%	42%
11	NALTREXONE HCL	NALTREXONE 50 MG TABLET	00406117001	CHEMICAL DEPENDENCE	Generic	\$320.63	\$0.00	0.0%	42%
12	PANTOPRAZOLE SODIUM	PANTOPRAZOLE SOD DR 20 MG TAB	31722071290	HEARTBURN/ULCER DISEASE	Generic	\$3,904.53	\$0.00	0.0%	35%
13	METFORMIN HCL	METFORMIN HCL 500 MG TABLET	60429011118	DIABETES	Generic	\$37.35	\$0.00	0.0%	34%
14	METFORMIN HCL	METFORMIN HCL 500 MG TABLET	60429011110	DIABETES	Generic	\$17.39	\$0.00	0.0%	30%
15	METFORMIN HCL	METFORMIN HCL 1,000 MG TABLET	60429011318	DIABETES	Generic	\$171.84	\$0.00	0.0%	26%
16	METHYLPHENIDATE HCL	METHYLPHENIDATE 5 MG TABLET	00406114201	ATTENTION DISORDERS	Generic	\$20.46	\$0.00	0.0%	18%
17	METHYLPHENIDATE HCL	METHYLPHENIDATE 20 MG TABLET	00406114601	ATTENTION DISORDERS	Generic	\$125.84	\$0.00	0.0%	18%
18	NALTREXONE HCL	NALTREXONE 50 MG TABLET	00406117003	CHEMICAL DEPENDENCE	Generic	\$384.75	\$0.00	0.0%	15%
19	METHYLPHENIDATE ER	METHYLPHENIDATE ER 27 MG TAB	00406012701	ATTENTION DISORDERS	Generic	\$656.91	\$0.00	0.0%	15%
20	INSULIN SYRINGE	BD INS SYRN UF 1 ML 12.7MMX30G	08290328411	DIABETES	Brand	\$158.48	\$0.00	0.0%	15%
21	DORZOLAMIDE HCL	DORZOLAMIDE HCL 2% EYE DROPS	60429011410	GLAUCOMA	Generic	\$97.86	\$0.00	0.0%	15%
22	NUPLAZID	NUPLAZID 34 MG CAPSULE	63090034030	MENTAL/NEURO DISORDERS	Specialty	\$30,202.80	\$0.00	0.0%	15%
23	VITAMIN D3	VITAMIN D3 1,000 UNIT TABLET	54629005024	VITAMINS AND MINERALS	Generic	\$50.62	\$0.00	0.0%	13%
24	DORZOLAMIDE-TIMOLOL	DORZOLAMIDE-TIMOLOL EYE DROPS	60429011510	GLAUCOMA	Generic	\$141.48	\$0.00	0.0%	10%
25	VIVOTIF	VIVOTIF EC CAPSULE	69401000002	VACCINATIONS	Brand	\$206.38	\$0.00	0.0%	10%

Table Two: Breakdown by Category			
For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.			
	PMPM	% Change	% of Premium
Generic	\$0.00	-94%	0.0%
Brand	\$0.00	0.0%	0.0%
Specialty	\$0.00	0.0%	0.0%

Pharmacy Trend: Impact on Premiums

Insurer: TVHP

Table One: Please provide a breakdown of the total cost of pharmacy on overall premiums for all filings under review.			
	PMPM	% Change	% of Premium
Generic	\$1.28	-39.8%	0.2%
Brand	\$4.35	-31.7%	0.7%
Specialty	\$4.44	-55.6%	0.7%

Table Two: Please provide the overall pharmacy trend for all filings under review.			
	PMPM	% Change	% of Premium
Pharmacy Trend	\$10.08	-45.5%	1.6%

25 Most Frequently Prescribed Drugs

Insurer: MVP

Table One: Breakdown by Product Name								
Please list the drugs in order from most frequently to least frequently prescribed, #1 representing the most frequently prescribed. Please use the AWP as of January 2020.								
Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or Specialty (S)	AWP	PMPM	% of Premium	
1 LISINAPRIL	LUPIN PHARMACEUTICALS	68180098003	ANTIHYPERTENSIVES	G	\$ 0.98	\$0.00	0.00%	
2 HYDROCHLOROTHIAZIDE	ACCORD HEALTHCARE	16729018317	DIURETICS	G	\$ 0.08	\$ 0.00	0.00%	
3 LISINAPRIL	LUPIN PHARMACEUTICALS	68180098103	ANTIHYPERTENSIVES	G	\$ 1.05	\$ 0.00	0.00%	
4 OMEPRAZOLE	GLENMARK PHARMACEUTICALS	68462039710	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	G	\$ 7.40	\$ 0.00	0.00%	
5 OMEPRAZOLE	AUROBINDO PHARMA	59651000205	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	G	\$ 4.15	\$ 0.00	0.00%	
6 ALBUTEROL SULFATE HFA	TEVA PHARMACEUTICALS USA	00093317431	ANTIASTHMATIC AND BRONCHODILATOR AGENTS	G	\$ 8.71	\$ 0.16	0.03%	
7 SERTRALINE HYDROCHLORIDE	AUROBINDO PHARMA	65862001305	ANTIDEPRESSANTS	G	\$ 2.85	\$ 0.00	0.00%	
8 LANTUS SOLOSTAR	SANOFI-AVENTIS U.S.	00088221905	ANTIDIABETICS	B	\$ 34.02	\$ 1.40	0.24%	
9 PROAIR HFA	TEVA RESPIRATORY	59310057922	ANTIASTHMATIC AND BRONCHODILATOR AGENTS	G	\$ 9.44	\$ 0.12	0.02%	
10 OMEPRAZOLE	DR.REDDY'S LABORATORIES, INC.	55111015810	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	G	\$ 4.15	\$ 0.00	0.00%	
11 CITALOPRAM HYDROBROMIDE	TORRENT PHARMACEUTICALS	13668001005	ANTIDEPRESSANTS	G	\$ 2.56	\$ 0.00	0.00%	
12 LISINAPRIL	SOLCO HEALTHCARE	43547035411	ANTIHYPERTENSIVES	G	\$ 1.06	\$ 0.00	0.00%	
13 LISINAPRIL	SOLCO HEALTHCARE	43547035311	ANTIHYPERTENSIVES	G	\$ 0.99	\$ 0.00	0.00%	
14 LISINAPRIL	LUPIN PHARMACEUTICALS	68180051303	ANTIHYPERTENSIVES	G	\$ 0.95	\$ 0.00	0.00%	
15 PANTOPRAZOLE SODIUM	TORRENT PHARMACEUTICALS	13668042990	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	G	\$ 4.08	\$ 0.00	0.00%	
16 BUPROPION HYDROCHLORIDE ER (XL)	PAR PHARMACEUTICAL	10370010250	ANTIDEPRESSANTS	G	\$ 4.77	\$ 0.01	0.00%	
17 OMEPRAZOLE	NORTHSTAR RX	16714074703	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	G	\$ 4.21	\$ 0.00	0.00%	
18 ATORVASTATIN CALCIUM	MYLAN	00378395177	ANTIHYPERLIPIDEMICS	G	\$ 5.77	\$ 0.02	0.00%	
19 AMLODIPINE BESYLATE	LUPIN PHARMACEUTICALS	68180072003	CALCIUM CHANNEL BLOCKERS	G	\$ 1.73	\$ 0.00	0.00%	
20 FLUOXETINE HCL	AUROBINDO PHARMA	65862019399	ANTIDEPRESSANTS	G	\$ 2.61	\$ 0.00	0.00%	
21 CITALOPRAM HYDROBROMIDE	TORRENT PHARMACEUTICALS	13668001001	ANTIDEPRESSANTS	G	\$ 2.69	\$ 0.00	0.00%	
22 AMLODIPINE BESYLATE	LUPIN PHARMACEUTICALS	68180072103	CALCIUM CHANNEL BLOCKERS	G	\$ 2.38	\$ 0.00	0.00%	
23 FLUOXETINE HCL	AUROBINDO PHARMA	65862019301	ANTIDEPRESSANTS	G	\$ 2.67	\$ 0.00	0.00%	
24 GABAPENTIN	CIPLA USA	69097094312	ANTICONVULSANTS	G	\$ 0.25	\$ 0.00	0.00%	
25 LISINAPRIL	LUPIN PHARMACEUTICALS	68180051703	ANTIHYPERTENSIVES	G	\$ 1.54	\$ 0.00	0.00%	

Table Two: Breakdown by Category				
For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.				
	PMPM	% Change	% of Premium	
Generic	\$0.35	199.45%	0.06%	
Brand	\$1.40	-49.46%	0.24%	
Specialty	\$0.00	0.00%	0.00%	

25 Highest Priced Drugs

Insurer: MVP

Table One: Breakdown by Product Name							
Please list the drugs in order from highest cost, #1 representing the highest cost. Please use the AWP as of January 1, 2020.							
Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or Specialty (S)			% of Premium
				AWP	PMPM		
1 HUMIRA PEN	ABBVIE	00074055402	ANALGESICS - ANTI-INFLAMMATORY	S	\$ 3,104.46	\$ 5.27	0.92%
2 HUMIRA PEN	ABBVIE	00074433902	ANALGESICS - ANTI-INFLAMMATORY	S	\$ 3,104.46	\$ 4.06	0.71%
3 STELARA	JANSSEN BIOTECH	57894006103	DERMATOLOGICALS	S	\$ 26,405.53	\$ 2.11	0.37%
4 ENBREL SURECLICK	AMGEN	58406044504	ANALGESICS - ANTI-INFLAMMATORY	S	\$ 1,583.90	\$ 1.72	0.30%
5 TAKHZYRO	SHIRE US INC.	47783064401	HEMATOLOGICAL AGENTS - MISC.	S	\$ 13,242.00	\$ 1.49	0.26%
6 LANTUS SOLOSTAR	SANOFI-AVENTIS U.S.	00088221905	ANTIDIABETICS	B	\$ 34.02	\$ 1.40	0.24%
7 NOVOLOG FLEXPEN	NOVO NORDISK	00169633910	ANTIDIABETICS	B	\$ 44.71	\$ 1.03	0.18%
8 GILENYA	NOVARTIS	00078060715	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	S	\$ 328.43	\$ 1.01	0.17%
9 NOVOLOG	NOVO NORDISK	00169750111	ANTIDIABETICS	B	\$ 34.72	\$ 0.96	0.17%
10 VICTOZA	NOVO NORDISK	00169406013	ANTIDIABETICS	B	\$ 122.90	\$ 0.89	0.16%
11 ELIQUIS	B-M SQUIBB U.S. (PRIMARY CARE)	00003089421	ANTICOAGULANTS	B	\$ 9.42	\$ 0.84	0.15%
12 TECFIDERA	BIOGEN IDEC	64406000602	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	S	\$ 165.52	\$ 0.75	0.13%
13 SYMDEKO	VERTEX PHARMACEUTICALS, INC.	51167066101	RESPIRATORY AGENTS - MISC.	S	\$ 480.00	\$ 0.74	0.13%
14 ENBREL SURECLICK	AMGEN	58406003204	ANALGESICS - ANTI-INFLAMMATORY	S	\$ 1,552.22	\$ 0.70	0.12%
15 STELARA	JANSSEN BIOTECH	57894006003	DERMATOLOGICALS	S	\$ 26,405.54	\$ 0.70	0.12%
16 OTEZLA	AMGEN	59572063106	ANALGESICS - ANTI-INFLAMMATORY	S	\$ 67.96	\$ 0.67	0.12%
17 TRULICITY	LILLY	00002143480	ANTIDIABETICS	B	\$ 455.64	\$ 0.64	0.11%
18 TRIUMEQ	VIIV HEALTHCARE	49702023113	ANTIVIRALS	S	\$ 121.28	\$ 0.61	0.11%
19 COPAXONE	TEVA NEUROSCIENCE	68546032512	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	S	\$ 583.20	\$ 0.60	0.11%
20 GLATOPA	SANDOZ	00781323434	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	S	\$ 216.41	\$ 0.59	0.10%
21 EPCLUSA	GILEAD SCIENCES	61958220101	ANTIVIRALS	S	\$ 1,068.00	\$ 0.58	0.10%
22 SYMBICORT	ASTRAZENECA LP	00186037020	ANTIASTHMATIC AND BRONCHODILATOR AGENTS	B	\$ 40.80	\$ 0.54	0.09%
23 ORKAMBI	VERTEX PHARMACEUTICALS, INC.	51167080901	RESPIRATORY AGENTS - MISC.	S	\$ 224.13	\$ 0.54	0.09%
24 ZYTIGA	JANSSEN BIOTECH	57894019506	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES	S	\$ 217.74	\$ 0.51	0.09%
25 COSENTYX SENSOREADY PEN	NOVARTIS	00078063968	DERMATOLOGICALS	S	\$ 6,214.69	\$ 0.51	0.09%

Table Two: Breakdown by Category				
For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.				
	PMPM	% Change	% of Premium	
Generic	\$0.00	0.00%		0.00%
Brand	\$6.30	-3.69%		1.10%
Specialty	\$23.17	-4.03%		4.03%

25 Drugs with highest year-over-year price increases

Insurer: MVP

Table One: Breakdown by Product Name

Please list the drugs in order from highest year-over-year price increase, #1 representing the highest increase. Increases should be assessed on a percentage basis. Please use the AWP as of January 1, 2020.

Product Name	Labeler Name	NDC #	Therapeutic Category	Generic (G), Brand (B) or Specialty (S)	AWP	PMPM	% of Premium	% Increase
1 CELECOXIB	MICRO LABORATORIES	42571014301	ANALGESICS - ANTI-INFLAMMATORY	G	\$ 4.62	\$ -	0.00%	1131%
2 CELECOXIB	MICRO LABORATORIES	42571014401	ANALGESICS - ANTI-INFLAMMATORY	G	\$ 7.57	\$ 0.00	0.00%	1111%
3 CELECOXIB	MICRO LABORATORIES	42571014405	ANALGESICS - ANTI-INFLAMMATORY	G	\$ 7.57	\$ 0.00	0.00%	1111%
4 FLUOXETINE HCL	PHARMACEUTICAL ASSOCIATES	00121072104	ANTIDEPRESSANTS	G	\$ 0.98	\$ 0.00	0.00%	879%
5 PROMETHAZINE/CODEINE	NOSTRUM LABORATORIES	70408018534	COUGH/COLD/ALLERGY	G	\$ 0.45	\$ -	0.00%	326%
6 HALOPERIDOL	PHARMACEUTICAL ASSOCIATES	00121058104	ANTI-PSYCHOTICS/ANTIMANIC AGENTS	G	\$ 0.45	\$ -	0.00%	276%
7 NIVA-PLUS	NIVAGEN PHARMACEUTICALS	75834005001	MULTIVITAMINS	B	\$ 0.71	\$ 0.00	0.00%	276%
8 LIDOCAINE HCL JELLY	AKORN	17478071130	DERMATOLOGICALS	G	\$ 3.06	\$ 0.00	0.00%	270%
9 COMP AIR COMPRESSOR NEBULIZER	OMRON MANAGED HEALTHCARE	73796045801	MEDICAL DEVICES AND SUPPLIES	B	\$ 61.50	\$ 0.00	0.00%	211%
10 PANTOPRAZOLE SODIUM	CAMBER PHARMACEUTICALS	31722071390	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	G	\$ 16.27	\$ 0.00	0.00%	209%
11 PANTOPRAZOLE SODIUM	CAMBER PHARMACEUTICALS	31722071290	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS	G	\$ 16.27	\$ 0.00	0.00%	209%
12 PREDNISOLONE SODIUM PHOSPHATE	PHARMACEUTICAL ASSOCIATES	00121075908	CORTICOSTEROIDS	G	\$ 0.31	\$ 0.00	0.00%	187%
13 ESTAZOLAM	MAYNE PHARMA	51862006901	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS	G	\$ 5.92	\$ 0.00	0.00%	178%
14 ESTAZOLAM	MAYNE PHARMA	51862007001	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS	G	\$ 5.92	\$ 0.00	0.00%	150%
15 HYDROCORTISONE	ANI PHARMACEUTICALS	62559013807	ANORECTAL AND RELATED PRODUCTS	G	\$ 0.36	\$ 0.00	0.00%	100%
16 METHYLPHENIDATE HYDROCHLORIDE ER	MAYNE PHARMA	51862026401	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	G	\$ 10.98	\$ 0.00	0.00%	89%
17 METHYLPHENIDATE HYDROCHLORIDE ER	MAYNE PHARMA	51862026301	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS	G	\$ 10.74	\$ 0.00	0.00%	89%
18 ONETOUCH ULTRA 2	LIFESCAN INC	53885044801	MEDICAL DEVICES AND SUPPLIES	G	\$ 27.60	\$ 0.00	0.00%	53%
19 ONETOUCH VERIO	LIFESCAN INC	53885065701	MEDICAL DEVICES AND SUPPLIES	G	\$ 27.60	\$ 0.00	0.00%	53%
20 GUANFACINE HCL	EPIC PHARMA	42806004801	ANTIHYPERTENSIVES	G	\$ 1.27	\$ 0.00	0.00%	46%
21 ATROPINE SULFATE	AKORN	17478021502	OPHTHALMIC AGENTS	B	\$ 22.30	\$ -	0.00%	45%
22 ALBUTEROL SULFATE	HI-TECH	50383074120	ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS	G	\$ 2.90	\$ 0.00	0.00%	45%
23 BENZEPRO FOAMING CLOTHS	PRUGEN	42546001660	DERMATOLOGICALS	G	\$ 10.41	\$ 0.00	0.00%	44%
24 OXYBUTYNIN CHLORIDE	NOVITIUM PHARMA	70954000530	URINARY ANTISPASMODICS	G	\$ 0.76	\$ 0.00	0.00%	40%
25 CLOMIPRAMINE HCL	MALLINCKRODT PHARM	00406880801	ANTIDEPRESSANTS	G	\$ 11.24	\$ 0.00	0.00%	39%

Table Two: Breakdown by Category

For the 25 prescription drugs listed in Table One, provide the weighted PMPM by drug category and the % change from last year's filings.

	PMPM	% Change	% of Premium
Generic	\$0.01	-40.20%	0.00%
Brand	\$0.00	0.00%	0.00%
Specialty	\$0.00	0.00%	0.00%

Pharmacy Trend: Impact on Premiums

Insurer: MVP

Table One: Please provide a breakdown of the total cost of pharmacy on overall premiums for all filings under review.

	PMPM	% Change	% of Premium
Generic	\$6.17	-43.0%	1.07%
Brand	\$22.31	3.3%	3.88%
Specialty	\$49.42	12.5%	8.60%

Table Two: Please provide the overall pharmacy trend for all filings under review.

	PMPM	% Change	% of Premium
Pharmacy Trend	\$77.90	2.1%	13.6%

Attachment 2
Pharmaceutical Supply Chain: Flow of Prescription Drugs and Money

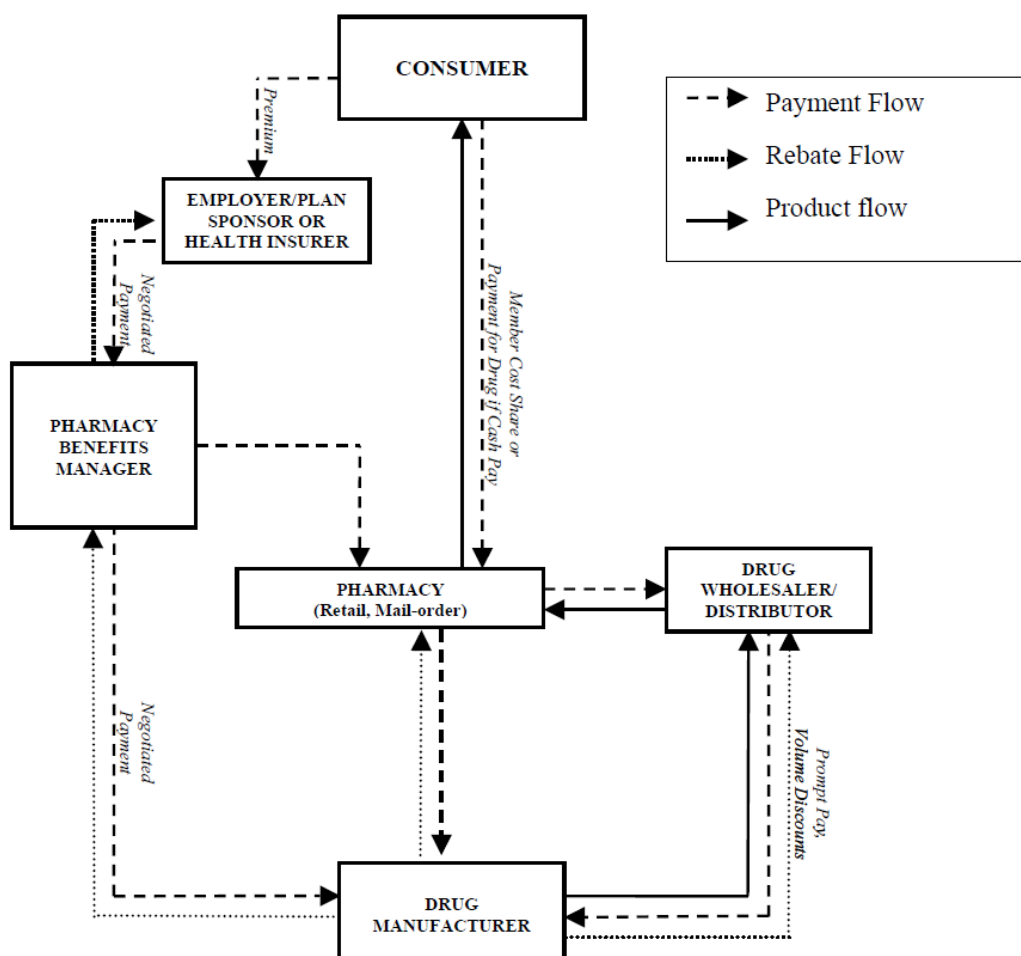
Carriers subject to the reporting requirement were asked to provide a brief description of the following:

Explain the flow of prescription drugs and money from the manufacturer to your company's customers.

In this explanation, please include:

1. *The role of each industry segment involved in the supply chain process (manufacturer, wholesaler distributor, pharmacies, pharmacy benefit managers, etc).*
2. *The flow of funds between each industry segment, including stages at which discounts and rebates are negotiated.*
3. *How does your company determine AWP? For example, does your company subscribe to a commercial drug information price database, and if so, please provide the name of that company.*

Below is diagram of a typical pharmaceutical supply chain⁵ and the answers to these questions from each carrier.



⁵ [The Kaiser Family Foundation: Follow the Pill: Understanding the U.S. Commercial Pharmaceutical Supply Chain](#)

MVP Responses

Question: Explain the flow of prescription drugs and money from the manufacturer to your company's customers. In this explanation, please include:

1. The role of each industry segment involved in the supply chain process (manufacturer, wholesaler distributor, pharmacies, pharmacy benefit managers, etc.).

Answer: CVS Caremark is the PBM for MVP Health Care. CVS Caremark contracts directly with network pharmacies. Twice a month, CVS Caremark bills MVP for claims adjudicated through network pharmacies. Rates between the PBM and the Health Plan are negotiated upon contract renewal.

2. The flow of funds between each industry segment, including stages at which discounts and rebates are negotiated.

Answer: CVS Caremark, when contracting with drug manufacturers, conducts a comprehensive assessment of multiple factors including the pipeline, overall category and price trends, and evolving evidence based care standards in addition to monitoring the competitive landscape when making decisions related to contract negotiations. MVP's independent P&T committee reviews and approves drug coverage, tiering, and clinical utilization management policies associated with the MVP formularies.

CVS Caremark contracts with drug manufacturers for pharmaceutical rebates, which are shared with MVP Health Care. CVS Caremark remits to MVP earned rebates quarterly upon collections. Rates and rebates between the PBM and the Health Plan are negotiated upon contract renewal.

3. How does your company determine AWP? For example, does your company subscribe to a commercial drug information price database, and if so, please provide the name of that company.

Answer: The CVS Caremark source of Average Wholesale Price (AWP) data is Medi-Span. We load AWP updates to the system on a daily basis.

BCBSVT/TVHP Responses

Question: Explain the flow of prescription drugs and money from the manufacturer to your company's customers. In this explanation, please include:

- 1. The role of each industry segment involved in the supply chain process (manufacturer, wholesaler distributor, pharmacies, pharmacy benefit managers, etc.).**

Answer: Industry Roles

- Manufacturers – They develop, get FDA approval for and manufacture the drugs
- Wholesalers – They distribute the drugs to the pharmacies
- Pharmacies – They dispense the medications to the patients and submit the claim to the PBM for reimbursement
- Pharmacy Benefit Managers (PBM) – They process the claims on behalf of the health plans
- Health Plans – They decide what the pharmacy benefits and utilization management programs will be

- 2. The flow of funds between each industry segment, including stages at which discounts and rebates are negotiated.**

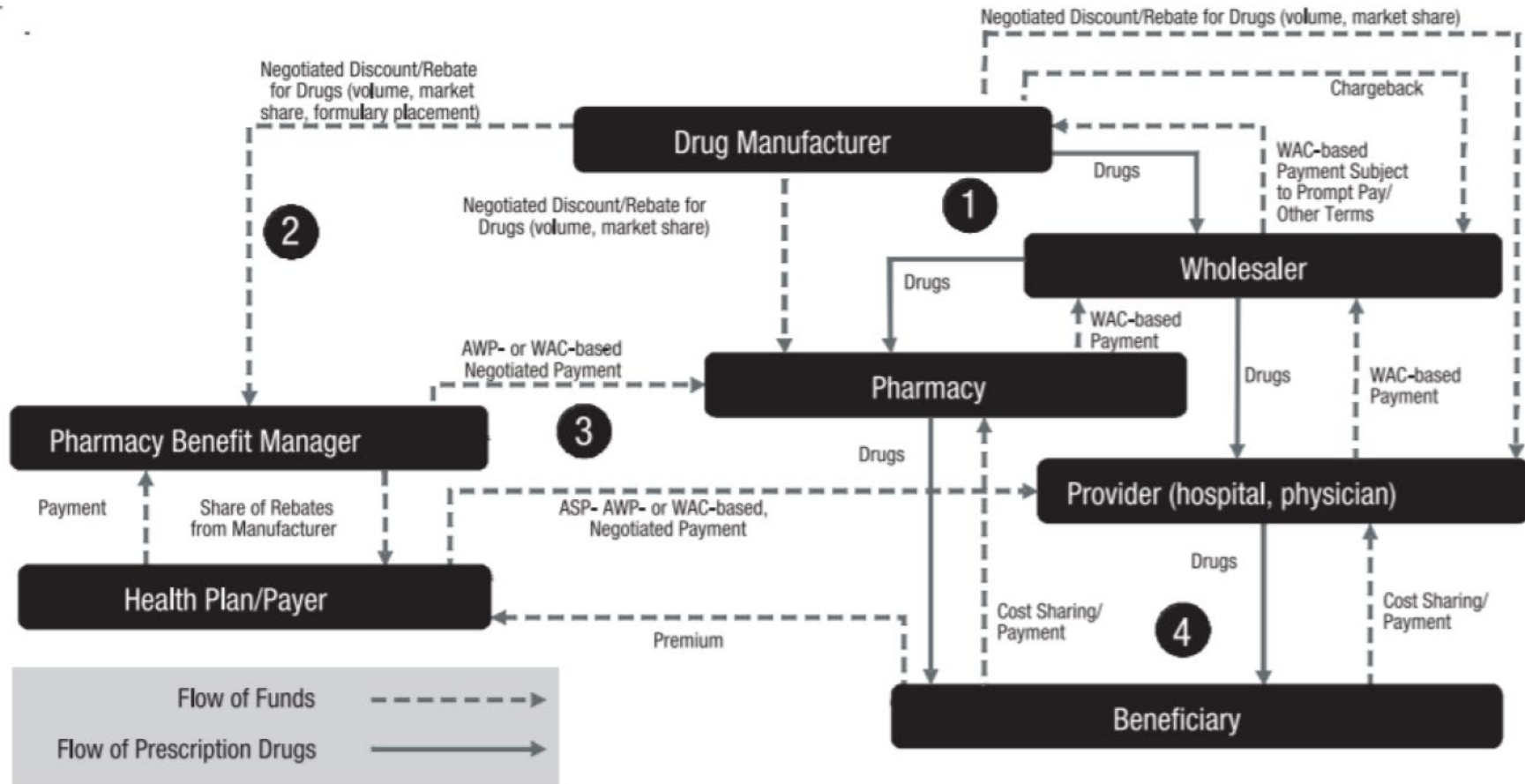
Answer: Please see the attached file titled "Pharmacy Industry Cash Flow Diagram" (page 21 of report).

- 3. How does your company determine AWP? For example, does your company subscribe to a commercial drug information price database, and if so, please provide the name of that company.**

Answer: AWP is published by Medi-Span which is a company owned by Wolters Kluwer.

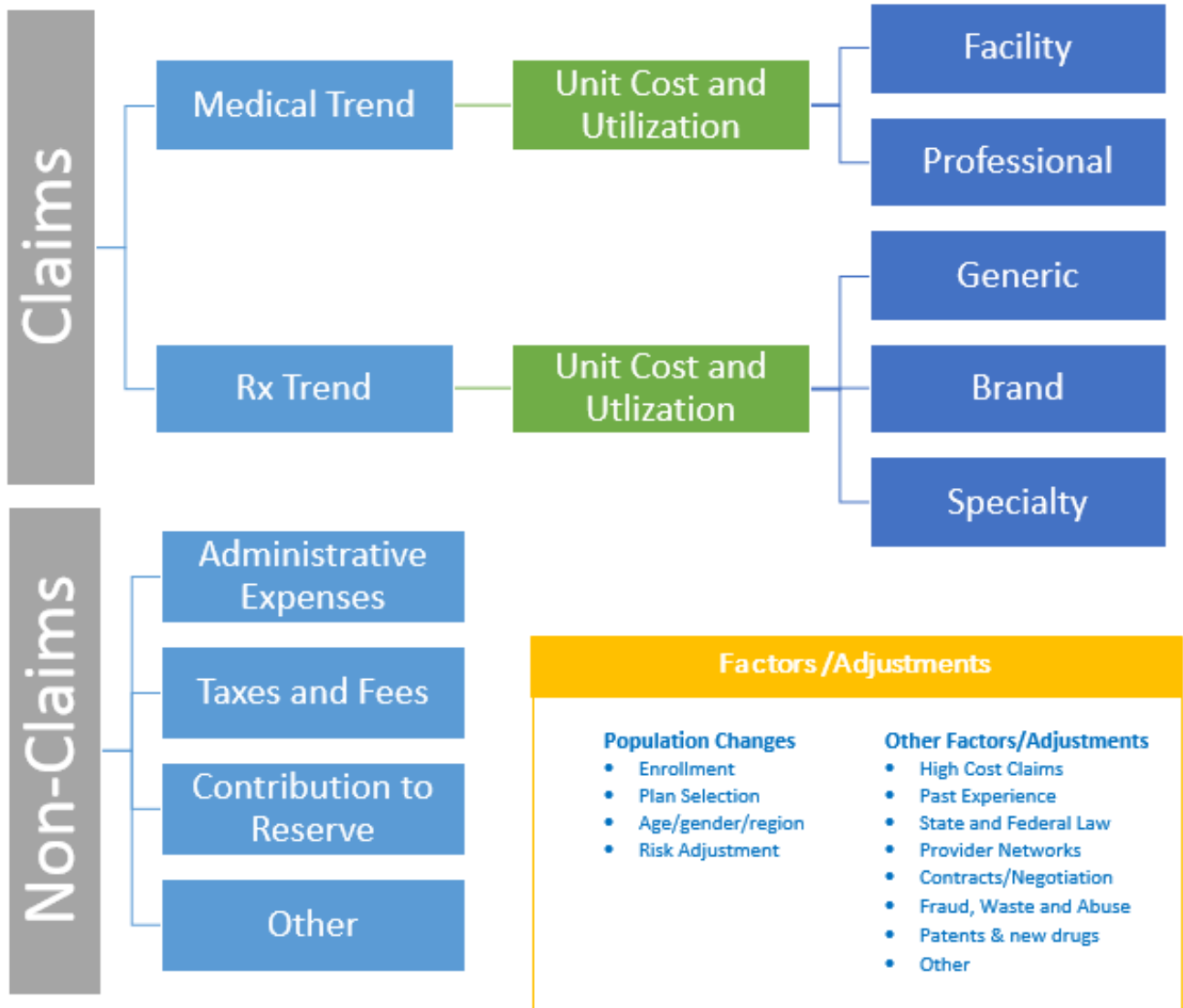
BCBSVT Pharmacy Industry Cash Flow Diagram

Drug Distribution Model



Attachment 3
Components of Commercial Insurance Premiums

The following diagram shows the basic components of commercial insurance premiums. Approximately 85-92% of premium costs are a result of claims costs. The remainder is attributable to non-claims costs such as administrative expenses, taxes and fees, and contribution to reserves. Prescription drugs are accounted for in the Rx Trend section of the Claims component.



Attachment 4
Act 193 of 2018

Sec. 8. 18 V.S.A. § 4636 is added to read: § 4636. IMPACT OF PRESCRIPTION DRUG COSTS ON HEALTH INSURANCE PREMIUMS; REPORT

(a)(1) Each health insurer with more than 1,000 covered lives in this State for major medical health insurance shall report to the Green Mountain Care Board, for all covered prescription drugs, including generic drugs, brand-name drugs, and specialty drugs provided in an outpatient setting or sold in a retail setting:

- (A) the 25 most frequently prescribed drugs and the average wholesale price for each drug;
- (B) the 25 most costly drugs by total plan spending and the average wholesale price for each drug; and
- (C) the 25 drugs with the highest year-over-year price increases and the average wholesale price for each drug.

(2) A health insurer shall not be required to provide to the Green Mountain Care Board the actual price paid, net of rebates, for any prescription drug.

(b) The Green Mountain Care Board shall compile the information reported pursuant to subsection (a) of this section into a consumer-friendly report that demonstrates the overall impact of drug costs on health insurance premiums. The data in the report shall be aggregated and shall not reveal information as specific to a particular health benefit plan.

(c) The Board shall publish the report required pursuant to subsection (b) of this section on its website on or before January 1 of each year.

Copy of Request Data Form

Green Mountain Care Board
Impact of Prescription Drug Costs on Health Insurance Premiums
Request for Data

Pursuant to 18 V.S.A. § 4636, please provide the following information and data:

1. Explain the flow of prescription drugs and money from the manufacture to your company's customers. In this explanation, please include:
 - a. The role of each industry segment involved in the supply chain process (manufacturer, wholesaler distributor, pharmacies, pharmacy benefit managers, etc.).
 - b. The flow of funds between each industry segment, including stages at which discounts and rebates are negotiated.
 - c. How does your company determine AWP? For example, does your company subscribe to a commercial drug information price database, and if so, please provide the name of that company.

2. Using the attached form, demonstrate the overall impact on premiums for all covered prescription drugs in the 4 categories listed below. All covered prescription drugs include generic drugs, brand-name drugs, and specialty drugs provided in an outpatient setting or sold in a retail setting. The requested information is limited to rates reviewed by the Green Mountain Care Board (fully-insured individual, small group and large group):
 - a. 25 most frequently prescribed drugs and the average wholesale price for each drug;
 - b. 25 highest priced drugs by total plan spending and the average wholesale price for each drug;
 - c. 25 drugs with the highest year-over-year price increases and the average wholesale price for each drug; and
 - d. A breakdown of the total cost of pharmacy on overall premiums and the overall pharmacy trend for all filings under review.

Instructions

- a. Review is limited to filings reviewed by the Green Mountain Care Board: fully-insured individual, small group and large group plans. Please calculate requested data based on the sum of subject filings.
- b. The average wholesale price should be reporting according to its cost on January 1, 2020.
- c. Indicate the National Drug Code for each product.
- d. Submit to the Green Mountain Care Board no later than November 15, 2020 to Christina McLaughlin (Christina.McLaughlin@vermont.gov).