Open Session Agenda Item 6b

CalPERS Pharmacy Benefits Contracting Update

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CalPERS Pharmacy Benefits

OptumRx (self-insured), Blue Shield and Kaiser (fullyvendors insured)

Primarily patient or caregiver administered drugs covered under the pharmacy benefit

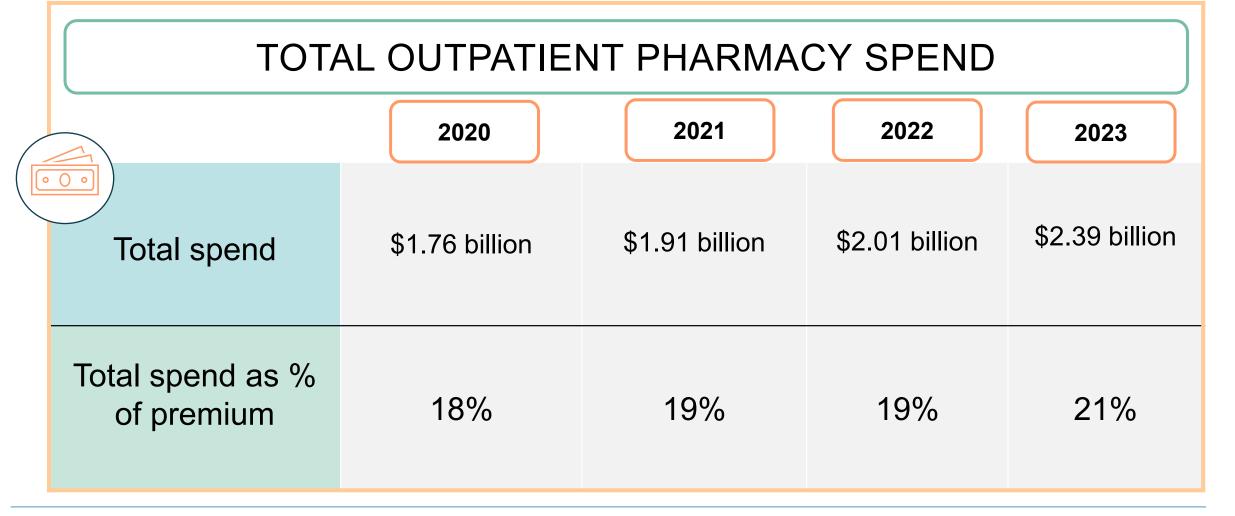


Our HMO and PPO health plans

Primarily provider administered drugs (e.g., infusions, some injections, etc.) covered under the medical benefit



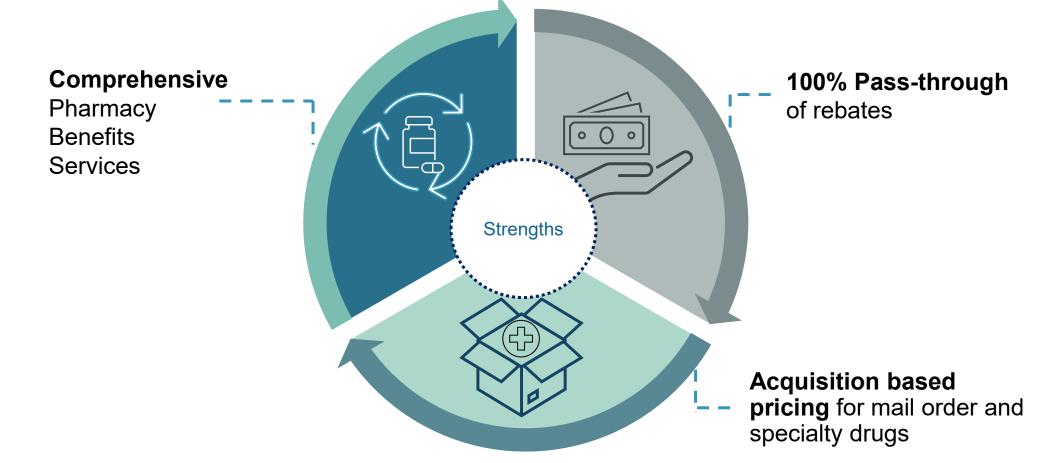
Importance of our Pharmacy Vendor





CalPERS PBM Contract

Optum Rx: Original 5-year contract with two extensions, ending December 31,2025





Objectives for Pharmacy Benefits Contract

Affordability

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- Pricing arrangement that ensures stability for CalPERS and its members.
- Measure and assess pharmacy and medical spend with a focus on both trend and total cost of care.

 Substantial performance guarantees linked to timely access, safety & exceptional customer service.

Quality & Access

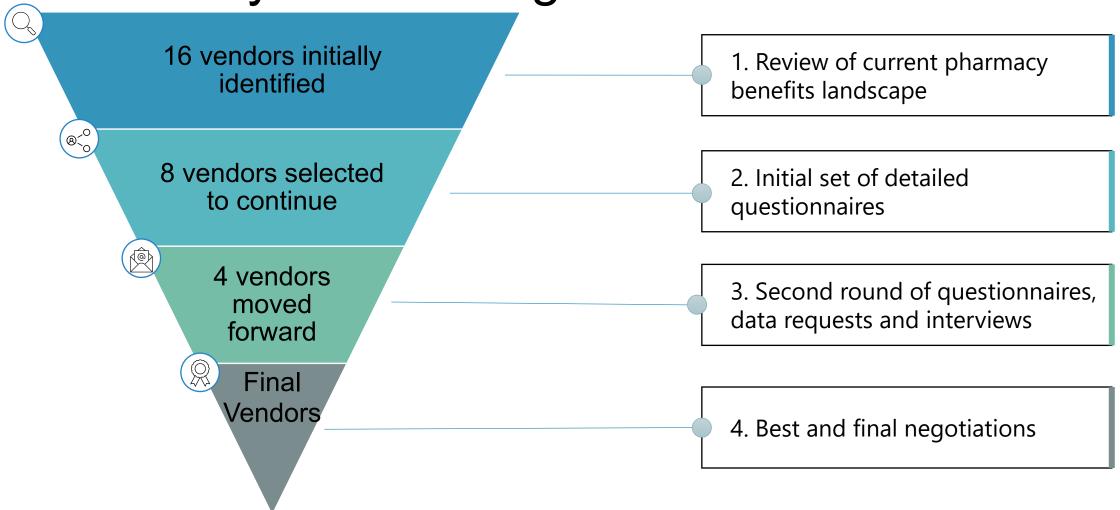
 Support our population health goals through Quality Alignment Measure Set alignment



- Full transparency of all relevant financial information.
- Complete audit rights to ensure integrity of administrative, clinical and payment services.



Pharmacy Contracting Process





Second Round Evaluation

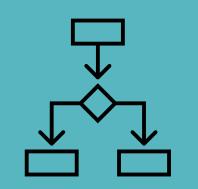
Financial Evaluation

Financial aspects of each submission including rebates, pricing and guarantees including overall cost trend



Clinical Evaluation

Clinical aspects of each submission including formulary and utilization management, biosimilar approach and specialty management



Operational Evaluation

Operational elements of each submission such as audit rights, transparency, flexibility and data capabilities



Performance Guarantees

PBM accountability aligned with CalPERS financial and quality objectives:

- Seeking at least 100% of fees at-risk for controlling cost and improving quality
- Potential \$150 million at-risk over five-year contract with additional dispensing fees at risk if utilization exceeds projections

Cost trend guarantees will help ensure financial predictability throughout the contract and aligns with efforts under the PPO medical contract as well as with OHCA growth targets



Quality guarantee focuses on two Quality Alignment Measure Set (QAMS) measures to align with and support quality efforts across medical and pharmacy contracts



These are groundbreaking guarantees in the pharmacy benefits industry



Negotiations





Financial

- -Net value
- -Cost Trend Guarantee
- -Basic vs Medicare



Clinical

- -Formulary
- -Utilization Management

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Contract Terms

- -Auditing
- -Transparency



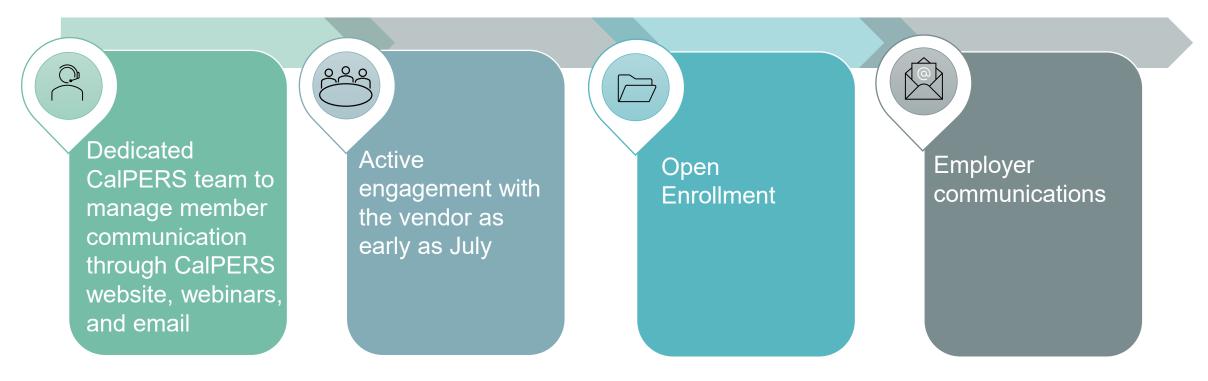
Pharmacy Disruption: Considerations for Clinical Care and Member Experience

Formulary Disruption	Network Disruption	Utilization Management Changes	Member Experience Changes
Formulary exclusions and tier placement changes	Changes to the pharmacy network including potential retail, mail order and specialty pharmacy changes	Utilization management & prior authorization protocol changes	Customer service interface with members



Transition and Implementation

Planning for extensive member outreach and communication regardless of whether we have a new vendor, because we will have a new contract.





Questions