

Pharmacy Benefit Manager (PBM) Process Update

Tuesday, August 11, 2026



Agenda

Historical Perspective
Request for Proposal (RFP) Process
Notification
Evaluation
Recommendation
Post-RFP
Revised Proposal
Challenges



What is a PBM?

A PBM is a third-party company that acts as a middleman between health insurance plans, drug makers, and pharmacies.

Primary duties include:

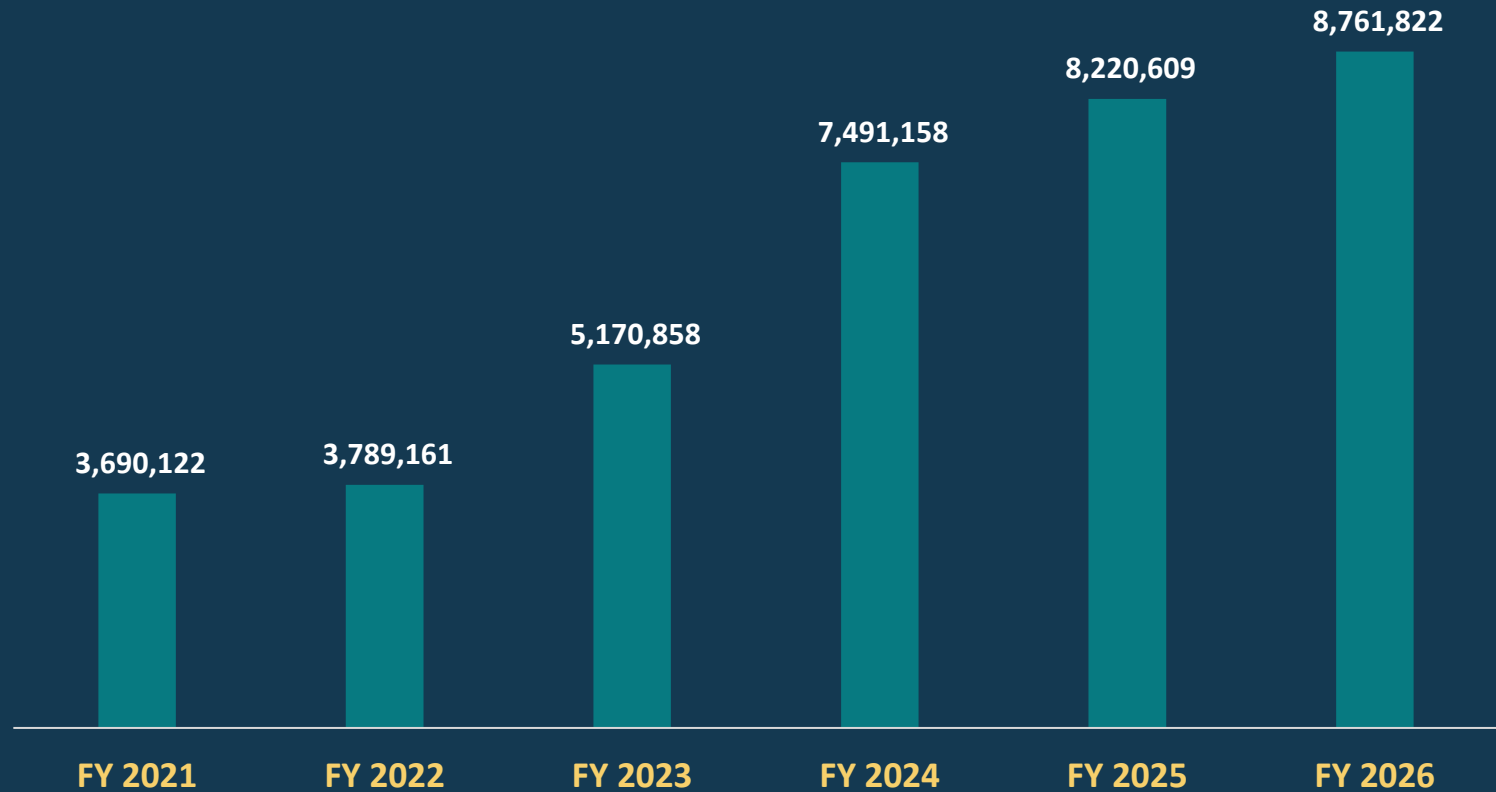
- Formulary creation
- Rebate negotiation
- Network setup
- Claim processing



Historical Perspective

Pharmacy, Net Cost by Fiscal Year

Plan membership
has remained
steady since FY2021



Historical Perspective

What is driving the cost increase?

- FY 2024: Switch from Kintegra to Atrium
- Rising costs
 - High claimants
 - Specialty drug utilization
 - GLP-1 utilization



Historical Perspective – Rising Costs

Specialty Drugs

- 2.5% of our plan population had a prescription in most recent year
- 0.8% of all scripts; 33% of total drug costs
- Drug cost is the primary driver

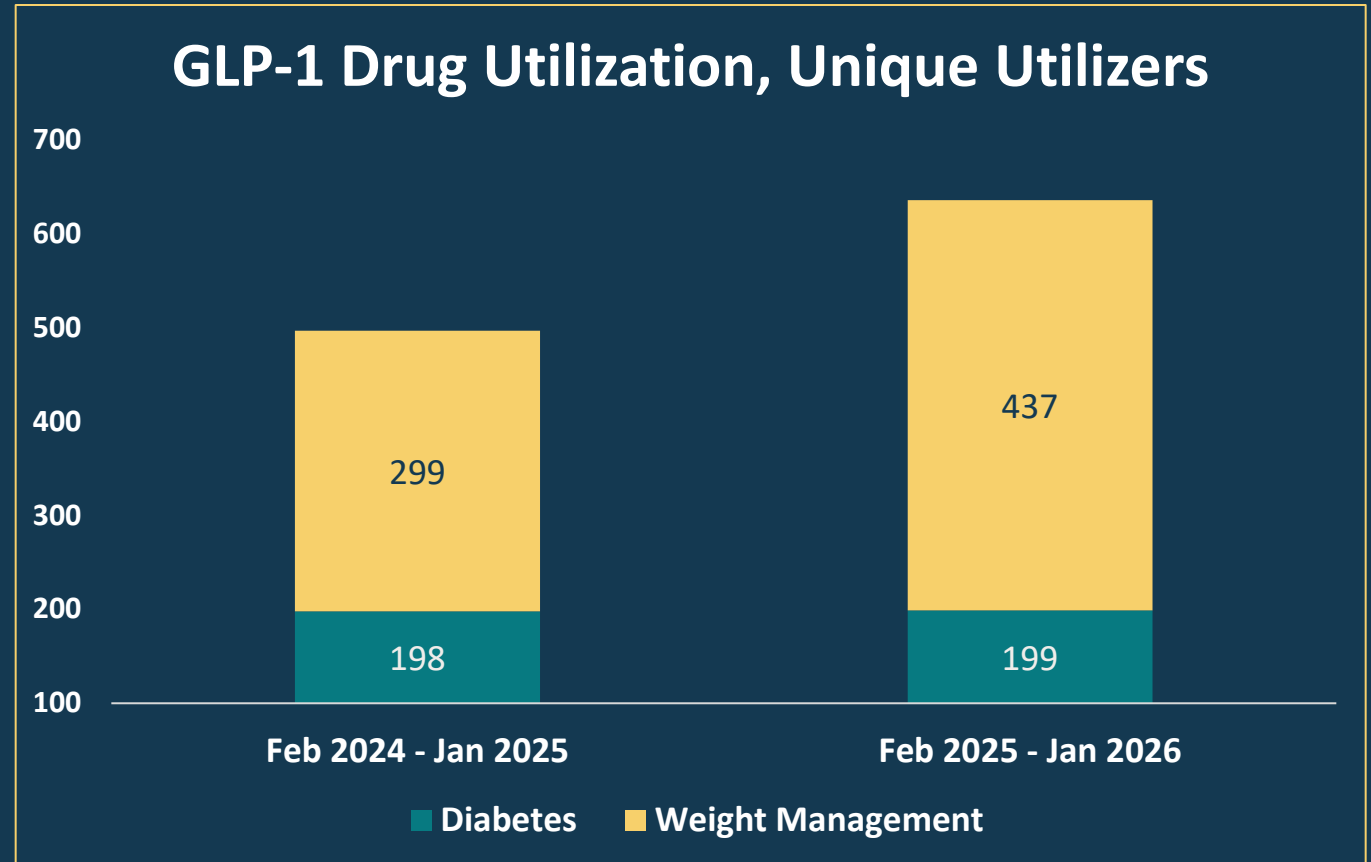
Traditional Drugs

- Weight management and diabetes increases in most recent year
- 99.2% of all scripts; 67% of total drug costs
- Volume of scripts is the driver



Historical Perspective – Rising Costs

Review Period	Total Paid, GLP-1
Feb 2024 – Jan 2025	\$2,825,259
Feb 2025 – Jan 2026	\$5,427,754
Increase	\$2,602,495



RFP Process - Notification

Mark III acts as the County's consultant related to our self-insurance plan

- Managed the PBM RFP process
- Issued RFP January 5, 2026
- Responses were due January 28, 2026
- Contract award: 3 years, two 1-year renewals

Request for Proposal

For

Gaston County Government

Prepared by



Mark III
Employee Benefits

January 2026



RFP Process - Evaluation

The County established a team to evaluate proposals from prospective vendors, with Mark III leading the process.

- Representatives: County Manager's Office, Human Resources, Public Health, Budget, and Finance
- First evaluation meeting was March 13, 2026
- Vendor presentations were March 31 – April 1, 2026





2026 – 2027 Pharmacy Contract Bid

PBM Repricing Summary		Prime Therapeutics - 2025 PY	Prime Therapeutics - 2026 PY	ESI - 2026 PY	CVS - 2026 PY	Liviniti - 2026 PY	Liviniti/RxCompass - 2026 PY*
Contract Type		NDCLevelContract	NDCLevelContract	NDCLevelContract	NDCLevelContract	NDCLevelContract	NDCLevelContract
Total Claims Gross Drug Cost (Repriced Claims 10/1/24 - 9/30/25)		\$13,805,853	\$13,667,794	\$13,656,331	\$13,369,556	\$12,812,897	\$12,812,897
PEPM		\$663.49	\$656.85	\$656.30	\$642.52	\$615.77	\$615.77
PMPM		\$375.24	\$371.49	\$371.18	\$363.38	\$348.25	\$348.25
(+) Dispensing fee (+) Admin Fees		\$129,898	\$131,210	\$235,402	\$267,840	\$396,480	\$708,600
(-) Member paid (Estimated Forecast)		\$1,104,468	\$1,093,424	\$1,092,506	\$1,069,564	\$1,025,032	\$1,025,032
(-) Variable Copay		\$0	\$0	\$0	\$0	\$0	\$482,733
(-) TeleSaver Rx		\$0	\$0	\$0	\$0	\$0	\$243,754
(-) Rebates (Estimated Forecast)		\$5,445,754	\$5,657,158	\$5,237,991	\$5,532,029	\$4,260,570	\$4,260,570
(-) International Sourcing		\$0	\$0	\$0	\$0	\$0	\$1,114,678
(-) PAP Sourcing		\$0	\$0	\$0	\$0	\$0	\$218,839
Historical Net Rx Spend (Less Member Cost, Less Rebates)		\$7,385,528	\$7,048,422	\$7,561,235	\$7,035,802	\$7,923,775	\$6,175,891
PEPM		\$354.94	\$338.74	\$363.38	\$338.13	\$380.80	\$296.80
PMPM		\$200.74	\$191.57	\$205.51	\$191.23	\$215.37	\$167.86
Predicted Net Rx Spend (Trended Claims, Less Member Cost, Less Rebates)	13.00%		\$9,467,429	\$9,978,213	\$9,402,025	\$10,191,477	\$8,443,593
PEPM			\$454.99	\$479.54	\$451.85	\$489.79	\$405.79
PMPM			\$257.32	\$271.21	\$255.55	\$277.00	\$229.50
Rebate Credit Loss				\$2,722,877	\$2,722,877	\$2,722,877	\$2,722,877
*Due to termination of Blue Cross NC Pharmacy Contract							

Total Net Forecasted Cost	\$9,467,429	\$12,701,090	\$12,124,902	\$12,914,354	\$11,166,470
---------------------------	-------------	--------------	--------------	--------------	--------------

Eligible Employees	1,734
Eligible Members	3,066

*Liviniti RxCompass illustrated savings are net of rebate loss for alternative sourcing strategy.

**ESI is offering a transition fund of \$20 per member (~\$60k).

**CVS is offering a transition fund of \$5 per member (~\$15k).

***Does not include any additional fees charged by Blue Cross NC due to carveout of pharmacy benefit services.

RFP Process - Recommendation

RFP Evaluation Team recommended the County stay with current PBM, Prime, and reassess after new plan year

- Prime was lowest cost, when factoring in rebate credit loss
- Established relationship
- Uncertainty around plan changes (prior to budget adoption)
- Simultaneous broker RFP



Post RFP Process – Revised Proposal

Liviniti reached out to Mark III in late April 2026 with a revised proposal

- BCBSNC agreed to an integration concession
 - BCBSNC had to obtain special approval
 - Decision required by April 30, 2026
- Liviniti improved financial terms to offset fee increases
 - Liviniti funds integration cost
 - BCBSNC waived a contractual rebate loss provision



2026 – 2027 Pharmacy Contract Bid – Revision



PBM Repricing Summary		Prime Therapeutics - 2025 PY	Prime Therapeutics - 2026 PY	ESI - 2026 PY	CVS - 2026 PY	Liviniti - 2026 PY	Liviniti/RxCompass - 2026 PY*
Contract Type		NDCLevelContract	NDCLevelContract	NDCLevelContract	NDCLevelContract	NDCLevelContract	NDCLevelContract
Total Claims Gross Drug Cost (Repriced Claims 10/1/24 - 9/30/25)		\$13,805,853	\$13,667,794	\$13,656,331	\$13,369,556	\$12,300,381	\$12,300,381
PEPM		\$663.49	\$656.85	\$656.30	\$642.52	\$591.14	\$591.14
PMPM		\$375.24	\$371.49	\$371.18	\$363.38	\$334.32	\$334.32
(+) Dispensing fee (+) Admin Fees		\$141,926	\$143,360	\$235,402	\$267,840	\$441,280	\$753,400
(-) Member paid (Estimated Forecast)		\$1,104,468	\$1,093,424	\$1,092,506	\$1,069,564	\$1,076,283	\$984,030
(-) Variable Copay		\$0	\$0	\$0	\$0	\$0	\$482,733
(-) TeleSaver Rx		\$0	\$0	\$0	\$0	\$0	\$243,754
(-) Rebates (Estimated Forecast)		\$5,445,754	\$5,657,158	\$5,237,991	\$5,532,029	\$4,472,834	\$4,472,834
(-) International Sourcing		\$0	\$0	\$0	\$0	\$0	\$1,114,678
(-) PAP Sourcing		\$0	\$0	\$0	\$0	\$0	\$218,839
Historical Net Rx Spend (Less Member Cost, Less Rebates)		\$7,397,556	\$7,060,572	\$7,561,235	\$7,035,802	\$7,192,544	\$5,536,913
PEPM		\$355.52	\$339.32	\$363.38	\$338.13	\$345.66	\$266.10
PMPM		\$201.06	\$191.91	\$205.51	\$191.23	\$195.49	\$150.49
Predicted Net Rx Spend (Trended Claims, Less Member Cost, Less Rebates, Other)	13.00%		\$9,479,579	\$9,978,213	\$9,402,025	\$9,369,538	\$7,713,907
PEPM			\$455.57	\$479.54	\$451.85	\$450.29	\$370.72
PMPM			\$257.65	\$271.21	\$255.55	\$254.66	\$209.66

Rebate Credit Loss	\$0	\$0	\$0	\$0
*Due to termination of Blue Cross NC Pharmacy Contract				

Blue Cross NC Rx Carveout Fee		\$208,080	\$208,080	\$208,080	\$208,080
*\$10 PEPM					
Total Net Forecasted Cost	\$9,479,579	\$10,186,293	\$9,610,105	\$9,577,618	\$7,921,987

Eligible Employees	1,734
Eligible Members	3,066

*Liviniti RxCompass illustrated savings are net of rebate loss for alternative sourcing strategy.

**ESI is offering a transition fund of \$20 per member (~\$60k).

**CVS is offering a transition fund of \$5 per member (~\$15k).

***Does not include any additional fees charged by Blue Cross NC due to carveout of pharmacy benefit services.

Post RFP Process - Challenges

What are the current challenges?

- Integration Timeline
- Potential for major disruption to employees and retirees
- Proposals were based off prior formulary
 - Majority of GLP-1 excluded 10/1/2026



Questions?

