

# EHCONNECT

2020 EXCELLENCE
IN BENEFITS
AWARD WINNER
Theresa O' Callaghan, Kaman

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To learn more, visit www.takeda.com or www.lundbeck.com

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Visit employershealthco.com/events to register and stay informed on upcoming events!

### Christopher V. Goff CEO & General Counsel

Christopher 8. Loge

## WELCOME TO OUR NEWEST CLIENTS

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Edgewell Personal Care Company

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Georg Fischer Inc.

Healthcare Partners Investments, LLC and The Physicians' Group

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The G.I. Alliance

Trinity Metro

US Renal Care Inc.

## MESSAGE

## FROM CHRIS

Charles Darwin is quoted as saying, "It is not the strongest of the species that survive, nor the most intelligent, but the one most responsive to change." There is no question we have all experienced our fair share of change over the past year. As we progress through 2021, we will once again be confronted with the need to change as we consider return to work challenges, employee vaccinations and a host of regulatory and employment law updates.

Even with these changes, one thing has remained constant: health care costs continue to rise, and plan sponsors and their participants are striving for ways to save money while improving their experience. The team at Employers Health is here to help! Our commitment to our clients' success remains steadfast as we continue to deliver on our promises for better outcomes, better experiences and lower costs. We continue to make improvements to our solutions, grow our team and seek out new and innovative products and services that our clients find valuable.

On the growth side, I am proud to share that our sales team achieved a record-breaking year in 2020. We added 37 new clients to the organization, surpassing the sales team's goal by securing \$260 million in new pharmacy spend. Thank you to the many consultants who afforded us the opportunity to participate in competitive evaluations and to those who continue to place their trust in us by awarding us new business. While industry consolidation continues at

a record pace, consultants and their clients see the value that collaborative purchasing through Employers Health can have both now and in the future.

Additionally, the transition to all virtual events resulted in another positive change for the organization. While we look forward to the days when we can meet again in person, more people than ever attended our events in 2020 and we were able to offer even more opportunities for benefits professionals and their consultants to network and learn. This year will bring even more learning opportunities to our clients. Be sure to check out an impressive line-up of upcoming events.

An unfortunate reality exasperated by the events of 2020 is an exponential increase in depression and anxiety. We are thankful for the American Psychiatric Association Foundation and its Center for Workplace Mental Health (CWMH) that provided the article on page three. CWMH, along with our Right Direction initiative, provide excellent materials for employers working to provide mental health resources to their employees.

Finally, on page 17, you'll see our first Excellence in Benefits Spotlight featuring the 2020 award recipient Theresa O'Callaghan of Kaman Corporation. In 2021, the award will be presented at the Employers Health Annual Meeting this fall, so be sure to watch for details later this year on how to nominate a deserving employee benefits professional.

# Employers Health Designated as a Great Place to Work-Certified Company

Employers Health is recognized as a Great Place to Work-Certified™ company for the fourth consecutive year.

Using validated employee feedback gathered with Great Place to Work's rigorous, data-driven For All methodology, certification confirms employees have a consistently positive experience at the organization. Great Place to Work is the global authority on workplace culture, employee experience and the leadership behaviors proven to deliver market-leading revenue and increased innovation. 100% of employees rated Employers Health as a great place to work compared to 59% of employees at a typical U.S.-based organization.

"We congratulate Employers Health, on its certification," said Sarah Lewis-Kulin, Vice President of Best Workplace List Research at Great Place to Work. "Organizations that earn their employees' trust create great workplace cultures that deliver outstanding business results."





## Employee Mental Health & Well-being During & Beyond COVID-19

Credit to the American Psychiatric Association Foundation's Center for Workplace Mental Health for permission to reprint. Visit it at workplacementalhealth.org

Employers recognize their workforce as a highly valuable resource.

Over the past few years, employers of all sizes and representing diverse industries began to focus on more effectively addressing workplace mental health. No longer was it an afterthought, but a business imperative.

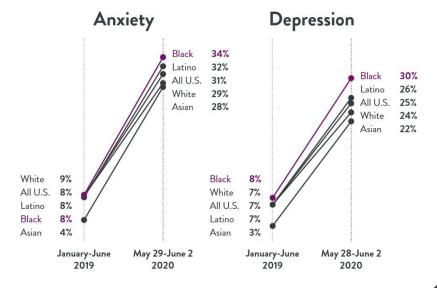
Now, with the COVID-19 pandemic, our nation is experiencing a surge in

people showing signs of depression, anxiety and other serious mental health distress. Recent data from the U.S. Census Bureau shows nearly a tripling of people experiencing signs of depression and anxiety<sup>1</sup>.

In this unprecedented time, the pandemic is causing high levels of stress, anxiety, and uncertainty about job security, health, finances and the future.

Anxiety and depression symptoms have more than tripled since 2019, with Black Americans shouldering the heaviest burden.

Percent screening positive for anxiety and depression



Essential workers have remained on the job causing fears and distress for them and their families. For those working remotely, many are learning their employers are preparing for them to return to worksites. This will come as a relief to some but cause high stress for others. A recent PwC survey<sup>2</sup> identified these areas of employee concern about returning to work:

51%	Fear of getting sick from being at work
24%	Unwillingness to use public transportation to commute to work
21%	Managing responsibilities as a parent or caregiver
15%	Taking care of ill family members

The PwC survey also identified ways in which employees want their employers to keep them safe:

56%	Provide personal protective equipment
51%	Provide assurances that employees will be notified if a colleague gets sick
51%	Require customers to follow prescribed safety and personal hygiene practices
50%	Provide assurances on cleanliness and disinfecting practices
49%	Provide a clear response and shut-down protocols if someone tests positive
45%	Promote and enforce social distancing
45%	Require mandatory testing for employees returning to work after being out sick with the virus

Provide a method for employees to 42% give feedback on COVID-19 policies

and practices

This survey and other reports make clear that employees are anxious about returning to work, which is likely to cause higher levels of stress, distraction and to impact productivity. In recognition of these challenges, some employers are offering employees the option of working remotely permanently.

Whether employees are essential, working remotely or returning to the workplace, there are critical steps that employers can take to support the mental health and wellbeing of employees.

## Supporting the Mental Health and Well-being of Employees

Employers are uniquely positioned to support employees in managing stress, building resiliency and connecting them with needed services and supports.

Three groups are most at risk when it comes to mental health and substance use disorders.

- 1. People who may develop a mental health or substance use condition for the first time.
- Those living with conditions that are likely worsening and those who have lived well in recovery and are now at great risk of or experiencing relapse.
- 3. Young adults are showing the highest incidence of distress associated with depression and anxiety during this pandemic<sup>4</sup>.



Employers can make a positive difference for all employees and their organizations by focusing in four key areas represented by **LEAD**.

### Leadership

Whether employees have remained on the job, continue to work remotely or are transitioning back to work, leadership at the highest levels of organizations are well positioned to address key issues on the minds of employees. People are experiencing unprecedented fear, stress, uncertainty, grief and loss, so increased support and finding new ways to lead are essential. Here are recommendations to consider in supporting employees:

### REASSURE

People need reassurance to feel calmer and more in control. Leaders can build key alliances with employees by sharing that management and employees have many of the same concerns and questions.

Even if leaders do not have all the answers, calm reassurance and normalizing how these difficult times are impacting everyone, including leaders, is helpful.

Also, for employees who have remained at work and those transitioning back to work, each of the issues identified in the PwC survey and cited above should be addressed.

Leaders should consider convening employees to reassure in multiple ways including individually – to the extent feasible, in small groups, online town hall meetings and at organization-wide forums.

### MODEL GOOD BEHAVIOR 8 SHOW EMPATHY

Acknowledge the disruption people and communities are experiencing from the pandemic, and with community protests around the country. Emphasize this is difficult for everyone, including leaders in the organization.

Leaders set the tone and culture of organizations. They should remind people to take care of themselves and share what they are doing to stay healthy and well. This may mean leaders must get outside their comfort zone.

Employees are likely to be reassured by the willingness of leaders to show vulnerability and share how they are coping. This conveys to employees that they are not alone in what they are feeling and experiencing. Ideally, it communicates we are in this together and you are supported. Also, it demonstrates the organization's commitment to transparency and continuous communication.

### MAKE MENTAL HEALTH VISIBLE

Multiple reports show depression, anxiety, substance misuse and other mental health conditions on the rise. Now is the time for leaders to talk openly about mental health, a topic that has often stayed in the shadows and not been confronted head on.

Speak to employees about rising rates of mental health and substance use conditions, remind them of the need to get help early for these conditions and discuss how to connect with services and supports. When this is communicated from the highest level of organizations, it opens the door to employees feeling safe to seek care when it is needed.

## Effective Communication

### MAKE IT ROUTINE

Leaders, HR and supervisors should check in often with employees about life and work.

Use these regular, weekly if possible, check-ins to remind employees where they can find resources on key topics like self-care, stress management, building resiliency, connecting to mental health care and more. Ask what support is needed.

### LISTEN

Be available to employees through these challenging times. Create reliable feedback loops for employees to share questions, concerns and to seek information on key issues.

This might include online and digital options, Q&A during online meetings, 1:1 virtual meetings and via other modes of communication. If questions and issues come up that all employees should know about, create an online space for frequently asked questions (FAQs) and related information.

Create safe spaces for discussions with supervisors and peers and ask employees how they would like those spaces to be structured.



### **BE A TRUSTED SOURCE**

Conflicting information is emerging about staying safe during the pandemic and what the future holds. This fuels fears, anxiety and stress for many.

Although no one currently has all the answers on the pandemic, employers should acknowledge the uncertainty while gathering and sharing reliable updated information from trusted sources.

Make this information easily accessible online and routinely remind employees where they can find it and when it is updated.

Being transparent and communicating timely updates builds trust with the workforce and shows the organization's commitment to a culture of caring.

### Adapt to Change

## REALIGN ORGANIZATIONAL POLICIES AND PRACTICES

People are distracted, stressed and taking on additional personal responsibilities. Yes, jobs must get done, but in these uncertain times setting reasonable expectations sends a message of support for employees.

This includes, to the extent possible, addressing flexibility with deadlines, options for working remotely, flexible work schedules and leave policies, among others.

Organizations should review their policies and practices to address those needed to keep people healthy and safe.

## BE WILLING TO MODIFY

Depending on the size of the organization, there are likely managers and supervisors with multiple leadership styles. Now is the time to work with supervisors on the importance of empathy, support and open communication with their teams.

Ideally this message comes from the top and reinforces the need to lead with compassion and empathy, supporting employees, while working together to achieve the goals of the organization.

Working collaboratively across the organization during these tumultuous times is likely to result in creative solutions and positive outcomes.

## CREATE EMPLOYEE CONNECTIONS

For employees working remotely, transitioning back to work, and continuing essential on-site work, employers should consider forming peer groups and employee resource groups (ERGs) to connect employees around key issues.

This may include ERGs focused on mental health or ERGs focused on addressing COVID-19 and related issues. These peer support networks are important vehicles for feedback loops and to support employees through challenging times.

## Double Down on Access to Care

With the surge in mental health and substance use conditions associated with the pandemic and with protests taking place in many communities, addressing employee mental health and well-being has never been more important. Before the pandemic, navigating mental health and substance use care was extremely challenging. It is likely to get even harder with more seeking care.

Employers have a key role to play in ensuring employees can access effective, timely and affordable care. This includes helping to dismantle long standing barriers to mental health and substance use care - like stigma, fear of judgment, discrimination and concern for negative job consequences.

Here are ways employers can make a positive difference in breaking down barriers, supporting employees in accessing care and supporting employees' mental health and well-being during and beyond the COVID-19 pandemic:

- O1 Share mental health and well-being resources with employees. This can be done through emails, on intranets, in newsletters and through other modes of communication.
- Share signs of common mental health conditions like anxiety, depression, substance misuse and more.
- Encourage employees to NOTICE changes in themselves and/or others, TALK by checking in and letting a person know that you care and ACT by offering to connect the person with services and supports.

 You may observe changes in appearance, behavior, mood or thinking. Although everyone is likely experiencing some degree of change during this time, it is still important to check in with one another.

# 02 Focus on strengthening prevention efforts that support mental health and well-being by considering the following:

- Offering resources on managing stress during the pandemic. The CDC released and linked to resources on this topic<sup>7</sup>. Employers may also consider offering digital, interactive stress management training.
- Promoting resiliency<sup>8</sup>.
- Creating a mental health Affinity Group or Employee Resource Group (ERGs)<sup>9</sup>.
- Promoting meditation, mindfulness, and coaching by offering employees apps to download or free online resources. Apps promise to address issues like anxiety, sleep, focus, well-being and more. Employers may also consider scheduling a virtual meeting with an expert offering guided meditation and mindfulness sessions so employees can learn how to use these tools on their own.
- O3 Increase employee engagement with your Employee Assistance Program (EAP) and learn what innovative approaches the EAP is using to connect with employees. Consider these approaches:
- Promote information about the EAP and the resources provided to employees and families through multiple communication channels like emails, newsletters and weekly checkins. With so much information coming out, it is good to rise above the noise by pushing out information often and repeatedly on how to connect with the EAP.
- · Review the mental health services

- offered through the EAP and consider adding additional options, like well-being coaching sessions, additional counseling sessions, online assessments, and information, 24-hour support and on-demand crisis intervention. Consider expanding your EAP and health plan benefits to include free counseling sessions for employees.
- Ask the EAP to expand the availability of online self-care tools focused on stress management, mindfulness, meditation and resilience training. Ask whether the EAP intends to offer subscriptions to apps designed to address mental health and well-being issues.
- Request the EAP vendor provide weekly aggregated data summarizing the number of employees accessing support, and the concerns, questions and conditions being raised. This allows you to know what employees are experiencing and to proactively support managers in working with their teams.
- Collaborate with the EAP to create solutions that work if there is a spike in requests for support or if there is not, to find new and innovative ways to reach employees with support.
- Request the EAP's plan for handling increased requests for support. Ask how the EAP is making referrals to mental health professionals and triaging needs as the demand for mental health care rises.
- Set regular meetings with the EAP to strategize on new online trainings, apps and other tools to meet the needs of your employees.



04 Improve Access to Timely, Affordable and Effective Mental Health & Substance Use Care. Employers are well positioned to work with their health plans and third-party administrators (TPAs) to improve access to care in three ways<sup>10</sup>.

Sustaining momentum and ensuring quality in the delivery of tele-mental health. Our health care system quickly pivoted to virtual care delivery helping to ensure people have access to mental health and substance use care during the pandemic. This included the federal government making rapid regulatory changes, health plans reimbursing telephonic and video-based care and psychiatrists and therapists setting up virtual practices. It is essential that employers work with their health plans and TPAs on the following:

- Continue offering employees a choice in the modality of care delivery. People may wish to continue receiving care virtually now and into the future.
- Reimburse treating health care providers at comparable rates whether care is delivered virtually or in an office setting.
- Ensure that care is reimbursed whether delivered by phone or video to not exclude those without video available and at a rate on par with comparable telehealth care delivered by other medical professionals.
- Ensure the quality of the services provided and request that providers report on outcomes achieved.

Supporting expansion of the evidencebased Collaborative Care Model in primary care. With the surge of people experiencing mental health and substance use conditions, and the national shortage of mental health providers, primary care providers will be on the front lines in delivering care. The Collaborative Care Model<sup>11</sup> (CoCM) is effective in producing positive outcomes and cost savings, based on more than 80 randomized control studies<sup>12</sup>, and commercial insurers are covering it, yet availability is still the exception rather than the rule. Here are recommendations for employers to support the expansion of the CoCM:

- Ensure health plans and TPAs are promoting the CoCM and providing primary care providers with technical assistance to implement this effective integrated care mode<sup>13</sup>.
- Request data from health plans and TPAs showing whether providers are billing the CPT codes for the CoCM and if not, asking them to be proactive in working with providers to expand the model.

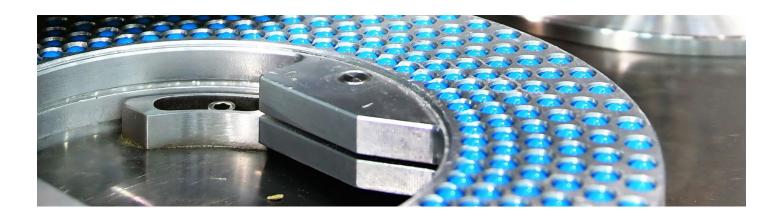
Expanding screening for Mental Health and Substance Use Conditions. Standardized tools exist to screen for common conditions and should be used to both detect conditions early and to track treatment progress to improve outcomes.

Employers should request that their health plans and TPAs request that all treating providers use existing behavioral health screening tools, like the PHQ-9 and GAD-7, to identify common mental health and substance use conditions and to track progress throughout treatment. This helps build greater accountability and improves treatment outcomes.

In closing, we may still be in the early days of this pandemic, which means the plan for recovery will be long-term and require sustained efforts. Supporting the mental health and well-being of employees during the pandemic and these tumultuous times is not just the right thing to do but is good for business.

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- U.S. Census Household Pulse Survey: May 14-19, 2020. Accessed at https://www.census.gov/data/ tables/2020/demo/hhp/hhp3.html.
- Multiple resources are available for creating a safety in the workplace plan, including from the National Safety Council https://www.nsc.org/work-safety/safety-topics/ safe-actions-for-employee-returns-safer and the U.S. Department of Labor, Occupational Safety and Health https://www.osha.gov/Publications/OSHA3990.pdf.
- http://workplacementalhealth.org/Mental-Health-Topics/Knowing-the-Warning-Signs; https://www. psychiatry.org/patients-families/warning-signs-ofmental-illness; https://www.rightdirectionforme.com/
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# PrEParing for HIV Coverage Management

by Kevin Wenceslao, PharmD | Clinical Advisor

In November 2020, the U.S. Department of Health and Human Services (HHS) posted a draft detailing its human immunodeficiency virus (HIV) National Strategic Plan for 2021 through 2025. Their vision? That the U.S. would be a place where new infections are prevented, every person knows their status and where high-quality care and treatment is available for those who need it free from stigma and discrimination. With the huge breakthroughs that have been made since the HIV epidemic was first identified in 1981, this vision seems more achievable than ever. Through advocacy and research, HIV and the subsequent disease that follows if left untreated — acquired immunodeficiency syndrome (AIDS) — have changed from a hopeless diagnosis to a manageable and preventable disease.

Recently we have seen substantial growth in the HIV prevention medication space. These medications, also known as pre-prophylaxis (PrEP), allow people to take a pill daily to reduce their risk of getting HIV. With more than 1.2 million Americans currently living with HIV<sup>2</sup>, these types of medications are crucial in helping stop the spread. Truvada® (Gilead), originally used in the treatment of HIV, was approved for use in PrEP by the Food and Drug Administration (FDA) in 2012. Taken daily, it was able to reduce the risk of transmission of HIV through sex by greater than 90% and from intravenous drug use by greater

than 70%<sup>3</sup>. Last year, Gilead also received the PrEP indication approval for their other drug, Descovy®, and Teva Pharmaceuticals was able to release a generic for Truvada® providing even more robust options within this space. Looking at the pipeline, pharmaceutical companies are now looking to design longer term options for PrEP, such as implants, intravaginal rings and injections/infusions. Early data for the injectable cabotegravir has shown promising results and would only be administered every eight weeks compared to the daily requirements of existing therapies<sup>4</sup>.



With the increasing popularity of PrEP medication, the U.S. Preventive Services Task Force (USPSTF), made of independent experts that review services and medications, reviewed PrEP medications in 2019 and assigned them its highest grade A recommendation. This means the task force strongly recommends the offering of these services due to their substantial net benefit<sup>5</sup>. In combination with the Affordable Care Act (ACA), this requires clients to cover some form of PrEP medication at \$0 cost share to the member<sup>6</sup>. Naturally, clients were required to reevaluate their benefit design, and many were concerned of the potential increases in costs with this change. Working with our pharmacy benefit managers (PBMs), we reviewed how each organization was handling the change to provide clients insight. Specifically, we looked at how each PBM was identifying which patients were using HIV medications for treatment versus prevention (which would have to be covered) and if they were including step therapies to guide members toward impending generics. Furthermore, we addressed the current reevaluation of HIV medications as specialty products. Traditionally, they were placed in the specialty bucket due to the sensitive disease state, importance of strict

adherence and the complexity of multi-pill regimens. Over time, new medications were more effective, and combination pills reduced the pill burden. Still, the importance of adherence remains especially if using it for PrEP. From a contracting standpoint, this class is still highly brand-dominated, and many clients would continue to benefit from keeping HIV under the specialty bucket.

Moving into 2021, it will be interesting to review how spend within this class has changed. As with all preventive medications, the train of thought is that by covering more up front on the pharmacy side, it helps reduce the costs on the medical side by eliminating hospital and treatment costs for HIV-positive patients. As more PrEP options become available, we anticipate that HIV will continue to be an important topic to monitor this coming year.

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PrEParing for HIV Coverage Management is an excerpt from Benefits Insights, the Employers Health blog. Be sure to subscribe to eNotes, the monthly Employers Health e-newsletter and follow us on LinkedIn for the latest updates on the pharmacy benefits industry, directly from the EH team.

### TO LEARN MORE CONTACT:

Kevin Wenceslao kwenceslao@employershealthco.com



# Biosimilars Update

by Matthew Harman, PharmD, MPH | Vice President, Clinical Solutions

It has now been over a decade since the passage of the Biologics Price Competition and Innovation Act (BPCIA) as part of the Affordable Care Act. The intent of the BPCIA is to generate biologic competition by reducing barriers for biosimilars to reach the market. The past 18 months have seen quite a bit of movement in the biosimilar space, so we want to provide an update to plan sponsors eager for ways to save on specialty drug spend.

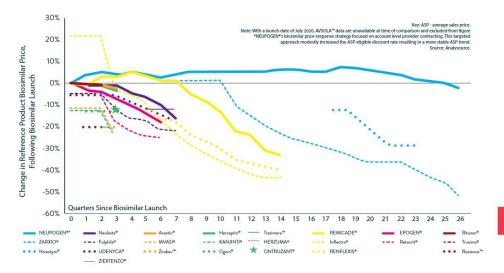
As of this writing, 28 biosimilars have been approved for nine originator products. Only two of these originators have not seen a launch yet, but they just happen to be the most recognizable from a pharmacy benefit standpoint: Humira (adalimumab) and Enbrel (etanercept). Adalimumab biosimilars are expected in 2023, and unfortunately for payers, etanercept is now not expected until 2029 due to the court's ruling in favor of the originator. The launch prices will be

interesting to monitor for these products. The range of Wholesale Acquisition Price (WAC) price difference for recent biosimilar launches is 15% to 37% lower than the originator WAC.<sup>2</sup>

From a good news perspective, the advent of multisource biosimilars has been a welcome sight in the employee benefits community. When only one biosimilar is available to compete with the reference product, the slight financial differences between the two have generally allowed the originator to control formulary preference in favor of "lower" net cost after rebates. That argument gets much tougher to make when multiple biosimilars are launched and price erosion ensues, which is what we are witnessing with Remicade (infliximab), Neulasta (pegfilgrastim) and Herceptin (trastuzumab) to name a few. This price erosion can be seen in FIGURE 1

## Trends in Average Sales Price of Originators and Biosimilars<sup>2</sup>

FIGURE 1



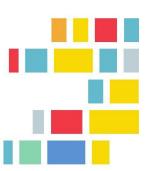
The utilization management tools we use to promote multisource generics on the traditional drug side, such as step therapy and originator exclusions, will be effective strategies to push market share further to biosimilars.

Right now, those tools are being used for the medical benefit products with biosimilar competition as well as recent changes by the Centers for Medicare and Medicaid Services (CMS), which established separate billing codes and biosimilar payment rates. Three of the top 10 drugs of 2019 saw launches of biosimilars, and the uptick in utilization has been much more rapid than their predecessors, as seen in FIGURE 2

Biosimilars Update is an excerpt from Benefits Insights, the Employers Health blog. Be sure to subscribe to eNotes, the monthly Employers Health e-newsletter and follow us on LinkedIn for the latest updates on the pharmacy benefits industry, directly from the EH team.

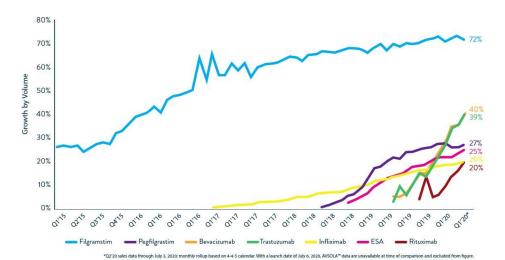
### TO LEARN MORE CONTACT:

Matt Harman mharman@employershealthco.com



### Market Share Of Biosimilars Since Launch<sup>2</sup>

FIGURE 2



This rapid growth in uptake combined with the biosimilars pipeline gives great hope for potential savings to the system, which is modeled to exceed \$100 billion in total savings over the next five years.<sup>3</sup> To reach those savings, it will take all stakeholders to promote biosimilar adoption when possible. We at Employers Health are preparing for ways to hold our pharmacy benefit vendors accountable if originators are still preferred.

### **REFERENCES**

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The Employers Health Dublin, Ohio office gathered to make blankets for the Westerville-based non-profit, My Very Own Blanket, to provide to foster children throughout Ohio.

Employers Health CFO, Steve Burger was recently elected as a board member for the Stark State College Foundation and to the Stark Community Foundation Audit Committee.

Congratulations to Madison Evans!
She graduated from the University
of Akron School of Law in May of
2020 and passed the Ohio bar exam
in October of 2020 making her
Employers Health's newest attorney.

Client solutions team members Brett Pinson and Taylor Nervo recently obtained their Certified Employee Benefit Specialist (CEBS) designation through the International Foundation of Employee Benefit Plans.

Mike Buddenberg graduated from Leadership Stark County's Spotlight program. Mike is one of many Employers Health team members to complete the program to help immerse and grow young professionals in both their career and their community.

Bryce Horomanski and Brett Pinson were appointed to the Board of Directors of Compassion Delivered, a not-for-profit providing nutritional meals to people who are coping with chronic, life-threatening illnesses and disease.

The Health Policy Institute of Ohio re-elected Vice President of Clinical Solutions, Matt Harman, to a second three-year term on its board of directors.

The Employers Health clinical team vaccinated over 1,500 individuals at client organizations through its flu vaccine program.





# Minimize spend, maximize benefits with CVS Health Point Solutions Management

Supplemental health and well-being point solutions play a growing role in treating a wide range of health conditions. You want to offer your plan members the latest tools to keep them on their path to better health, but as these offerings increase, so does the burden of managing them.

Point Solutions Management from CVS Health offers a simple, efficient way to add carefully evaluated third-party health and well-being point solutions to the traditional benefits you offer your members. This full-service includes:

- Rigorous vendor evaluation
- Vendor guaranteed competitive pricing, simplified billing integrated with PBM invoice
- Real-time billing verification—you pay only for utilization that aligns with your criteria

### So far, six vendors have passed the evaluation process:

### **Hello Heart**

Helps members understand and improve their heart health.



### **Hinge Health**

A coach-led digital program for members with musculoskeletal conditions.



### Livongo

Diabetes, hypertension, weight management and diabetes prevention solutions.



### Sleepio

A fully automated app that uses cognitive behavioral therapy to help patients dealing with poor sleep.



### **Torchlight**

A caregiver support solution.



### Whil

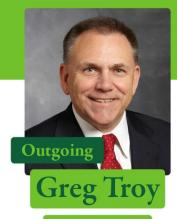
A digital training platform for mindfulness, mental well-being and performance.



To learn how Point Solutions Management can help you, contact your CVS Health Account team. You can also visit https://payorsolutions.cvshealth.com/point-solutions-management to learn more.

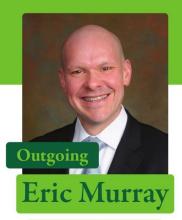
# Employers Health Board

Two new directors were recently elected to serve on Employers Health's 10-member Board of Directors beginning in 2021. Below we recognize the two outgoing board members as well as the two new representatives.



Kaman Corporation

Greg Troy officially retired from the Employers Health Board of Directors on December 31, 2020 after 15 years of service. He most recently served as the organization's board chairman, a position he held for five years. Greg also recently retired from his position as senior vice president of human resources and chief human resources officer at Kaman Corporation.



TimkenSteel Corporation

Outgoing director, Eric Murray served on Employers Health's board for six years. He recently left his position as vice president of total rewards at TimkenSteel for a new role as vice president of total rewards at Arconic.



Incoming board member, Ralph Lee, is chief human resources officer at Kenan Advantage Group, North America's largest tank truck transporter and logistics provider. He brings more than 25 years of human resources experience.

Ralph joined Kenan Advantage Group (KAG) as chief human resources officer in September 2017. Prior to joining KAG, he was vice president of human resources for Total Quality Logistics (TQL). From 2006 to 2012, Ralph served as senior director of human resources at Cintas Corporation. Previously, he spent 10 years with Comair Airlines, serving as the vice president of human resources and the vice president of in-flight services.

Ralph has been affiliated with numerous charitable organizations over the years and currently serves on the boards of the American Red Cross, the Cincinnati Youth Collaborative, the Canton Regional Chamber of Commerce and the Greater Stark County Urban League. He is the founder of Fore Kids Charity Golf Fund and president of the National Red Cross Diversity Council.

He received his Bachelor of Business Management degree from Xavier University in Cincinnati, Ohio, where he also was inducted into the Xavier Athletic Hall of Fame in 1999 for his successful college basketball career.



As director of total rewards at TimkenSteel, Tara Sidel brings 25 years of employee benefits experience to the Employers Health Board of Directors. She currently serves as director of total rewards at TimkenSteel, a long-time Employers Health client and manufacturer of high-quality steel.

Tara has served TimkenSteel and its predecessor company for more than 20 years in progressively responsible roles. Outside of her role in benefits she is an active member of the Friends Stark Parks, serving as the organization's administrative

committee chair and as vice president. Additionally, she served as TimkenSteel's United Way Day of Caring Site Coordinator for five years and as the organization's campaign co-chair and chair.

She is a graduate of Leadership Stark County's 19th class and graduated from Ohio University with a Bachelor of Arts and Ashland University with a Master of Business Administration specializing in human resources.

# Excellence in Benefits AWARD WINNER



THERESA O'CALLAGHAN

Executive Director, Benefit Programs & Corporate Human Resources

KAMAN

Theresa O'Callaghan serves as executive director of benefit programs and corporate human resources at Kaman Corporation, a manufacturer in the aerospace and defense, industrial and medical markets with headquarters in Bloomfield, CT. Under her leadership the organization has flawlessly integrated benefits for a number of acquired organizations.

She is described by her co-workers as determined, forthright and driven. Always keeping her "employee-first" philosophy at heart, she has worked with her team and vendor partners to provide free diabetic prescriptions and supplies to employees through the organization's Diabetes Chronic Condition Management Program and through the Kaman Cancer Support Program ensured that members facing a cancer diagnosis have resources available through the "mykamanhealth" website, advocacy services through health insurance vendors and receive Kaman-specific support packages. These are just a few of the many reasons she was recognized with the 2020 Excellence in Benefits Award.





We sat down with Theresa to hear how she approaches employee benefits and to what she credits her success.

How long have you been in HR and where did you get your start?

Theresa I've been in the human resources field more years than I'm willing to disclose! Initially, I began working as a specialist in the areas of recruitment and then compensation before transitioning into a management position with generalist responsibilities which included benefits. After having my third child my husband and I decided that it was the right time to search for a parttime position that would allow me to work remotely and be home with our children when they were young. After a year-long search, I was fortunate to identify a part-time benefits manager position. I remained in that parttime role for 10 years, solely focused on health and retirement benefit programs, before transitioning back to a full-time position with broader responsibilities outside of benefits. These experiences helped prepare me for my current role at Kaman, where I've been for the past nine years.

When it comes to human resources and benefits, how do you define success?

Theresa The executive leadership team at Kaman truly cares about the employees. Decisions are made thoughtfully with consideration given to the impact of those that work at Kaman and their families. This aligns with my professional and personal core values. I don't ever want to lose sight of the importance of providing competitive, yet affordable, benefit plans to our employees. We remain focused on the primary objective of keeping the healthy, healthy; and for those with a medical diagnosis, to provide quality programs and services when most needed in the most compassionate way possible. The fact that I work in an organization that supports and is aligned with this approach, is very rewarding and gratifying.



## How has Kaman been innovative in delivering health care benefits?

Theresa The purpose of Kaman's benefit program is to attract, retain and motivate our talent which is critical for the success of our business. That being said, we've communicated repeatedly that benefits are a shared responsibility of the company and our employees. Personal decisions that employees make may unfortunately impact their health but may also impact our ability to continue to offer affordable health insurance benefits.

We strive, through education and communication, to reiterate the importance of being an educated health care consumer. We also strive to be transparent with the benefit plan costs so that if we need to make difficult plan design decisions or modify employee contribution rates, employees understand the basis for the changes and trust that we are doing our best to manage the increasing costs of benefits without losing sight of the impact to the employee.

You've been instrumental in a number of successful acquisitions and divestitures at Kaman. To what do you contribute that success?

Theresa If I were to point to one primary reason for the success that we've had with supporting our organization's success with acquisitions and the most recent divestiture of the Kaman Distribution group, I would state "relationships". We have an amazing, talented internal team that I have the good fortune to work with. Couple that with the relationships that we have with our insurance broker, Employers Health Coalition and our insurance vendors. This provides a strong foundation for supporting the organization's goals.

While working toward the achievement of a goal, I always try to put myself in the employee's shoes and not only work to build their loyalty to the organization but show them that we are, and always will be, loyal as well.

Can you share what you feel is your proudest accomplishment thus far in your career?

Theresa Kaman is continuously growing and in my time there, we've successfully managed benefit integrations of a number of acquisitions all while working with our new employees to welcome them to the Kaman family. One of my proudest moments was actually in 2019 when I supported the divestiture of the Kaman Distribution business to its new owner. In addition to leading the independent stand up of HRIS and payroll systems for the divested company, this sale required over 30 benefit and employee-focused programs to be replicated in less than 50 days. With the help of my team and our "employee-first" approach, I'm proud to say we accomplished our goal of a smooth, efficient and timely transition within the short timeline.

You stress the importance of measurable metrics to track success when it comes to benefits. Can you share why you find that so important?

Theresa I've found leadership buy-in to be essential when it comes to employee benefits and data has been crucial in getting that support. With the proper data and backing from leadership we were able to provide free diabetic prescriptions and supplies to those who participated in a coaching program. To date, over 460 plan participants have participated in a defined coaching program, accounting for 33% of our diabetic population. The program participant costs are 29% lower than non-

participant costs. The ability to share data that show we are not only improving employee health but also saving the company money has been vital in getting leadership's endorsement.

## What do you see as the greatest challenge for benefit professionals?

Theresa Rising health care costs continue to be one of the biggest challenges we face as benefits professionals. Although very effective in the treatment of serious health conditions, the incredibly high costs associated with specialty medications, new medical technology and long-term courses of treatment are alarming and challenging to manage.

## What advice would you give others in your role?

As a benefit professional, you wear two hats. You have an important role of being a financial steward for your organization with the responsibility of managing programs that have a significant operational impact. As important, you have the role of an employee advocate. It is critical to listen to your employees, understand the challenges that they are facing and to be responsive. Although we cannot always provide the answers or solutions that our employees wish for, we can take the time to really listen, respond to them honestly, with compassion and with empathy. On those days when you receive a call from an appreciative employee and you realize that you, with the support of the company, made a difference to someone's life, makes all the other daily challenges worthwhile.

> Have a story to share? Contact us at info@employershealthco.com

# HOW CAN BETTER HEALTH OUTCOMES BEGIN AT THE POINT OF PRESCRIPTION?



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