

DST Health Solutions Pharmacy Outsourcing Service

Centralize your pharmacy and medical operations

After years of carving out your Rx benefit to a traditional PBM, and all the difficulty of integrating your Rx and medical claims data, wouldn't it be refreshing to have a PBM solution that is fully integrated with your core claims engine?

DST Health Solutions (DSTHS) is proud to offer PBM services to current client partners - DSTRx. An integrated solution, DSTRx offers your health plan everything it takes to support your pharmacy benefit while truly aligning with the health plan medical benefit. Additionally, by adding rich ancillary services your organization is able to gain unprecedented transparency into your member view, leading to quality outcomes.

Better Care Management through DSTRx

Each of the DSTRx services above is designed to look at fully integrated patient data in real time – unlike a standalone PBM, and deliver the following:

- a robust set of pharmacy benefit management services with industry leading performance and support.
- data to readily identify at risk patients through combined pharmacy and medical history
- fully integrated medical and pharmacy data to support enhanced care management
- automated adherence of your care management business rules for HEDIS compliance measurement and reporting outcomes

Together, this rich suite of services will deliver lower administrative costs, improved outcomes based on fully integrated data, and a variety of robust analytics tools to give you real time reconciled information to run your business.

The DSTRx Difference

Only DSTRx offers the following:

- Robust core PBM functionality that is integrated with your core claims administrative platform for eligibility and reporting purposes.
- Ancillary services that enhance core PBM functionality:
 - » CareAnalyzer® – contains pharmacy specific data to identify members who will benefit most from case management and monitor gaps in care.
 - » Medical Drug Management Service (MDMS) – a platform that automates the pricing and editing of high cost medical drug claims.
 - » 3i – a virtual data virtualization layer that monitors real-time reconciled health care data across your business, alerts you when action is needed, and automates clinical interventions with providers, members and the plan.

Robust core PBM capabilities, ancillary services that enhance our basic PBM services, and proven government programs experience—DSTRx stands alone.

What this means to you....

DSTHS and Argus have been catalysts for change in the PBM industry. Our unique business model is based on the values of integrity and honesty that frame our relationships with our customers. What we have offered our customers from the start—*full disclosure, program control and aligned objectives.*

Full Disclosure. Our business model provides full disclosure and is transparent, with no competing business relationships.

Program Control. DSTRx customers have commonly achieved single-digit trend rates for several years in a row—more than half the PBM industry average. In addition to these trend results, our customers often integrate

the pharmacy benefit programs with their equally sophisticated medical programs and initiatives, essentially “carving the Rx benefit back in.” This approach is truly unique compared to the traditional PBM “carve-out” strategy.

A True Partnership – No Conflict of Interest. We do not participate in switching programs and do not have hidden sources of revenue that require us to encourage pharmacies, patients, or physicians to act in a way that is contrary to health plan policies. We do not own and operate our own mail-service pharmacy, so we have no reason to give advice regarding plan design that is biased toward a mail-service benefit.

Customized Services Powered by Argus

DSTHS understands the need for medical and pharmacy integration; unlike current PBM models, we provide a robust suite of traditional PBM services provided by our sister company Argus Health Systems, Inc. (ARGUS) and incorporate the following leading edge services to allow YOU to have a holistic view of your membership. This novel concept includes the following:

- **Claims Processing:** Robust pharmacy claims processing system and architecture that offers infinite scalability, security, speed, and flexibility.
- **Decision Support:** Standard reports in addition to a suite of web-enabled tools, which includes:
 - » Report Cubes: multidimensional database providing extremely fast query response, reporting, and graphics
 - » Report Templates: on demand report system featuring high quality reporting and graphics
 - » Ad hoc query tool: extemporaneous data mining support
- **Pharmacy Networks:** Fully-disclosed Argus Networks include: retail; 90-day-at-retail; mail order; specialty and vaccine administration. Argus will also provide pharmacy audits and MAC pricing as part of the network fee structure.
- **Call Center:** The Argus Call Center serves as a toll-free point of contact for pharmacy providers and members and is open 24 hours a day, 365 days per year.
- **Rebates:** Argus offers health plans the choice of using their own formularies and rebate contracts or they can use our national formularies. Both choices offer industry leading transparency.

- **Clinical Tools:** Argus provides the DUR, therapy protocols, analytical services, and cost containment programs that match the customer’s business goals.
- **Medicare Part D:** Argus has an end-to-end solution to support the complexities of our customers’ Part D business goals and provide items identified as requirements for Medicare Part D operations.
- **Medicaid Experience:** Argus has been processing Medicaid claims since 1988. Our commitment has been to give our Medicaid customers the same extensive capabilities as our other books of business.
- **Member Access:** A tool that facilitates member access to information through their own health plan’s website; making information available including Pharmacy Locator, Claim Search, Basic Pharmacy Coverage, Deductible Accumulations, Formulary, Drug Information, and Drug Pricing/Pre-adjudication.
- **Electronic Prescribing:** Capability to provide necessary data to an electronic prescribing system.
- **Consumer Directed Health Care:** Argus is committed to supporting our customers’ consumer driven health plan initiatives and is providing advanced solutions that will meet their business needs. We have a robust system with a rules engine capable of supporting our customers’ benefit strategies and a strong, online Member Access tool that is a part of our suite of products.
- **Automated Prior Authorization:** As a key component to a health plan’s benefit structure, Prior Authorization programs are necessary to ensure appropriate therapies, avoid negative outcomes, and control costs.
- **Targeted Intervention Strategies™:** The Targeted Intervention Strategies is a module based comprehensive consultative service designed to identify cost savings opportunities for both health plans and their members. Once these opportunities are identified, intervention strategies are employed to encourage members to take advantage of these potential savings.

Why do this now?

- You will have a truly integrated pharmacy and medical claim platform for managing better member outcomes.
- True transparency through a single delivery model.
- Centralized account management and customer service for your pharmacy and medical claims management.

Contact Us

For more information on our DSTRx Service, call DST Health Solutions at 800.272.4799 or visit us at www.dsthealthsolutions.com.

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