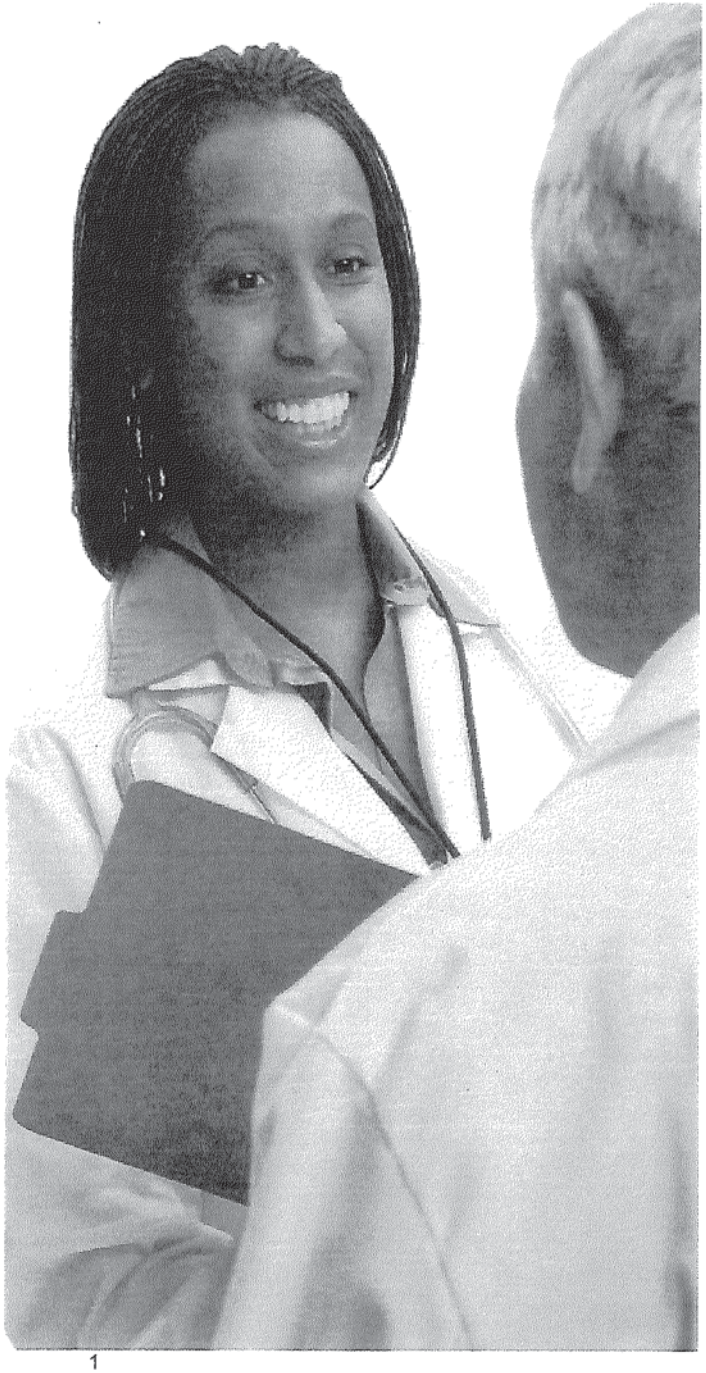

RxInsights®

CITY OF MEMPHIS

Prescription Benefit Review

Jan 2010 - Dec 2010

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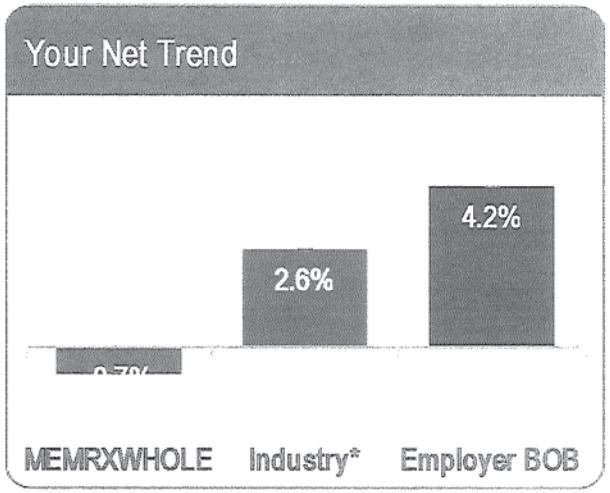
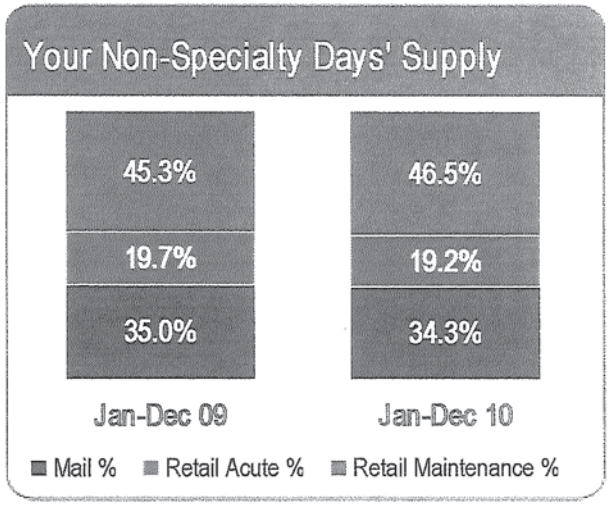
Executive Summary—Snapshot

Eligibility	Jan-Dec 09	% Change	Jan-Dec 10	Employer BOB	Industry*
Average Eligible Members per Month	23,044	1.1%	23,302		
Avg. Monthly Utilizers as % of Members	41.9%	2.3%	42.9%	36.3%	46.3%
Cost					
Total Gross Cost	$27,742,078	-0.1%	$27,707,429		
Total Net Cost	$21,756,061	0.4%	$21,850,187		
Gross Cost PMPY	$1,204	-1.2%	$1,189	$1,100	$1,575
Net Cost PMPY	$944	-0.7%	$938	$896	$1,281
Member Cost Share	21.6%	-2.0%	21.1%	18.5%	18.7%
Drug Mix					
% Single Source Brands	35.5%	-12.8%	30.9%	29.4%	30.5%
% Multi Source Brands	1.3%	16.6%	1.5%	1.9%	1.8%
Generic Dispensing Rate	63.3%	6.8%	67.6%	68.7%	67.7%
Generic Substitution Rate	98.0%	-0.2%	97.8%	97.3%	97.4%
Utilization					
Total Prescriptions	352,016	3.6%	364,622		
% Retail Prescriptions	86.8%	0.2%	87.0%	79.1%	80.2%
% Mail Prescriptions	13.2%	-1.5%	13.0%	20.9%**	19.8%**
Days' Supply PMPY	503	2.0%	513	447	660
Specialty					
Specialty Total Net Cost	$2,772,826	-3.3%	$2,681,916		
Specialty Utilizers as % of Members	1.1%	-3.8%	1.1%		
Specialty Net Cost PMPY	$120	-4.3%	$115	$153	$192
Specialty % of Total Net Cost	12.7%	-3.7%	12.3%	17.1%	15.0%
Specialty % of Total Prescriptions	0.4%	24.0%	0.5%	0.6%	0.5%

* Industry: Government

** Includes Maintenance Choice Claims





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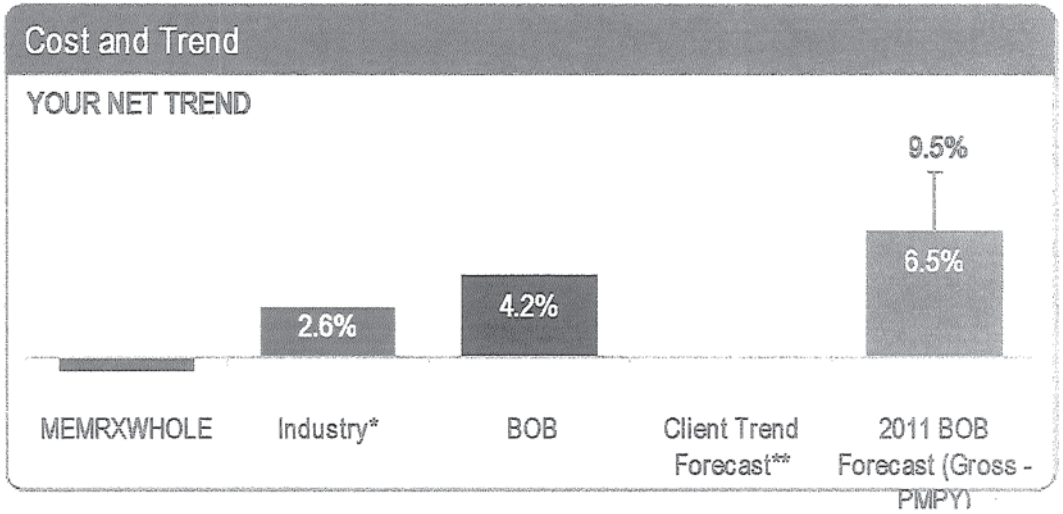
Your Executive Summary

Trend

Your Jan-Dec 10 Net Trend was -0.7%, compared to the Industry trend of 2.6% and the Employer BOB trend of 4.2%. Drug Mix is the primary driver for your trend.

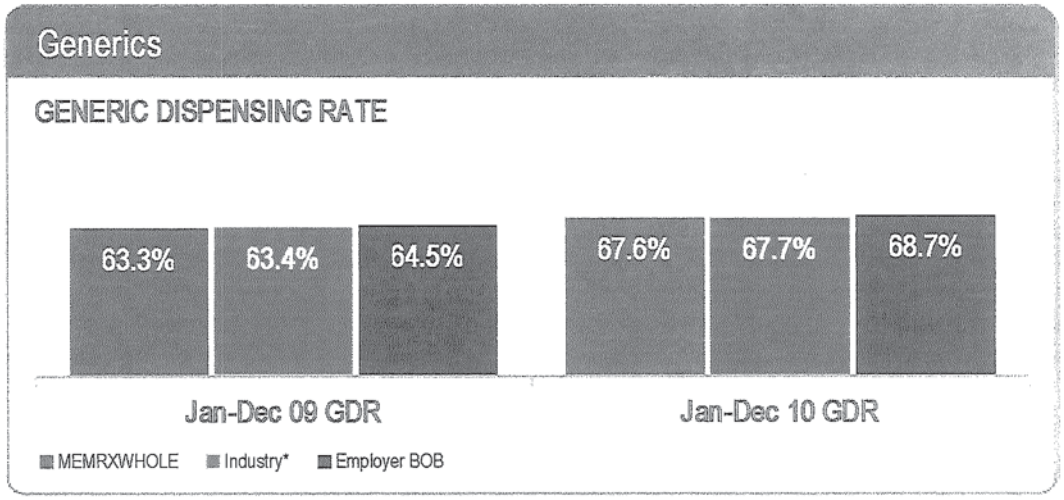


Generics

Your Jan 2010-Dec 2010 GDR was 67.6%.

Your Jan 2010-Dec 2010 GSR was 97.8%.

For each 1% increase in GDR, your gross pharmacy spend is estimated to decrease by 2.5%** or $692,686.



* Industry: Government

** CVS Caremark Enterprise Analytics. Analysis of Generic Dispensing Rate and Pharmacy Spend (R321), February 2010.

Industry and Book of Business trends are based on the last full year of data from January to December 2010. This is based on marketplace events not plan design changes.

The estimated client-specific trend forecast is not an actuarial work product thus clients should seek appropriate independent professional advice in connection with its use.

Due to the variability of factors including market conditions, which are not under the control of CVS Caremark, this forecast is subject to change at any time and cannot be guaranteed.

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MEMRXWHOLE, Jan 2010 to Dec 2010

Top Therapeutic Categories

Your Top Five Therapeutic Categories represent 28.6% of your Total Net Cost.
The class representing the highest number of utilizing members was Antihypertensives.

Therapeutic Class	Total Net Cost	Net Cost PMPY	Net Trend	Generic Dispensing Rate	Utilizers
Antihyperlipidemics	$2,388,223	$102.49	9.1%	36.6%	4,266
Antidiabetics	$1,968,707	$84.49	14.0%	51.4%	2,025
Ulcer Drugs	$1,855,747	$79.64	-23.8%	61.2%	3,758
Antiasthmatic And Bronchodilator Agents	$1,276,240	$54.77	11.0%	9.6%	2,634
Antihypertensives	$1,144,856	$49.13	8.6%	63.0%	4,954

Pharmacy Choice

Your retail utilization as a percent of days' supply was 65.6%, versus 64.9% for the previous time period. Your mail utilization as a percent of days' supply was 34.4%, versus 35.1% for the previous time period.

	Jan-Dec 09	% Change	Jan-Dec 10	Employer BOB Jan-Dec 10	Industry* Jan-Dec 10
Total Prescriptions	352,016	3.6%	364,622		
% Retail Prescriptions	86.8%	0.2%	87.0%	79.1%	80.2%
% Mail Prescriptions	13.2%	-1.5%	13.0%	20.9%**	19.8%**

* Industry: Government

** Includes Maintenance Choice Claims

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CVS CAREMARK

Your Executive Summary

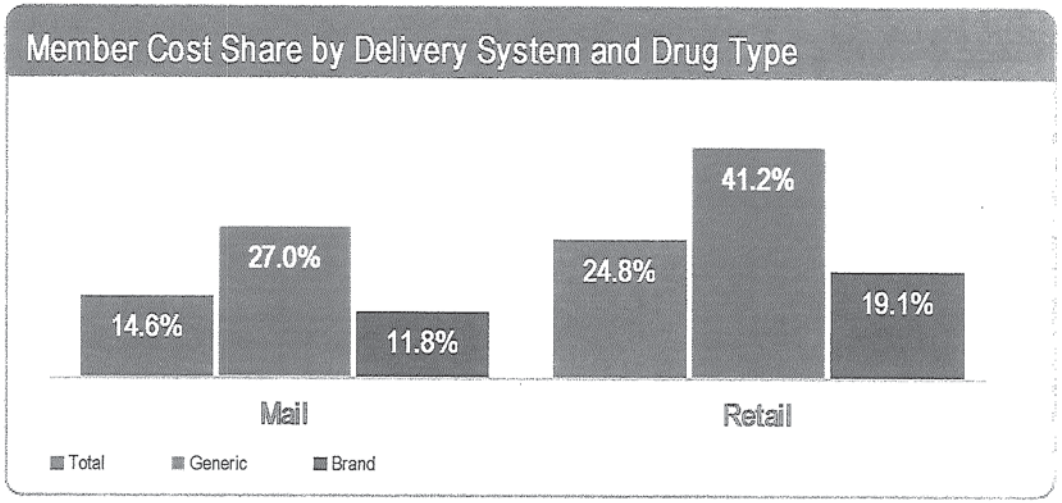
Pharmacy Utilization

3.2% of your retail claims were processed at a CVS/pharmacy.

Prescription Activity	Prescriptions	% of Total Net Cost	% of Total Days' Supply
Retail Claims	317,141	61.4%	65.6%
CVS Retail Claims (Excluding 90-Day Pricing)	10,147	3.8%	2.2%
CVS Caremark Mail Claims	47,481	38.6%	34.4%

Cost Share

Your Member Cost Share for Retail decreased 1.3% from Jan 2009-Dec 2009 to Jan 2010-Dec 2010. Your Member Cost Share for Mail decreased 3.7% for the same period.



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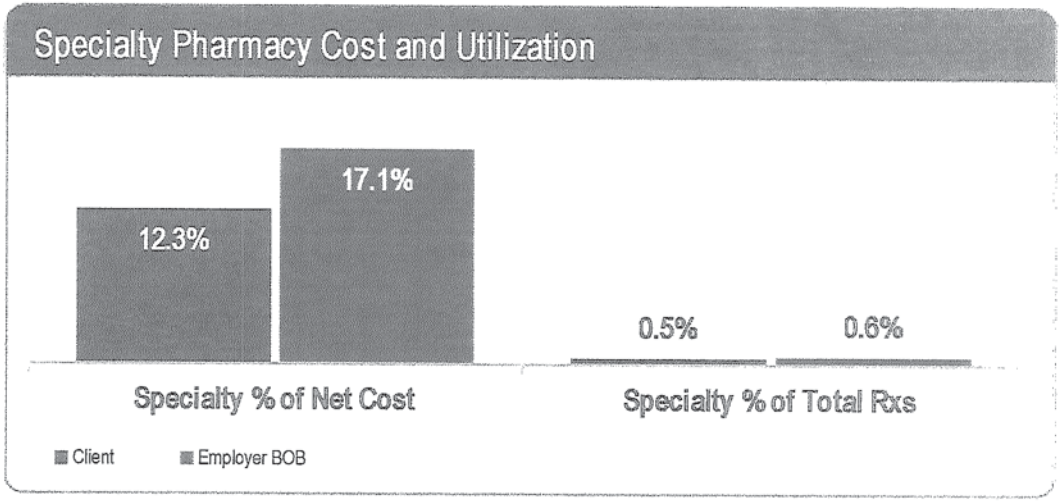
MEMRXWHOLE, Jan 2010 to Dec 2010

Specialty Pharmacy

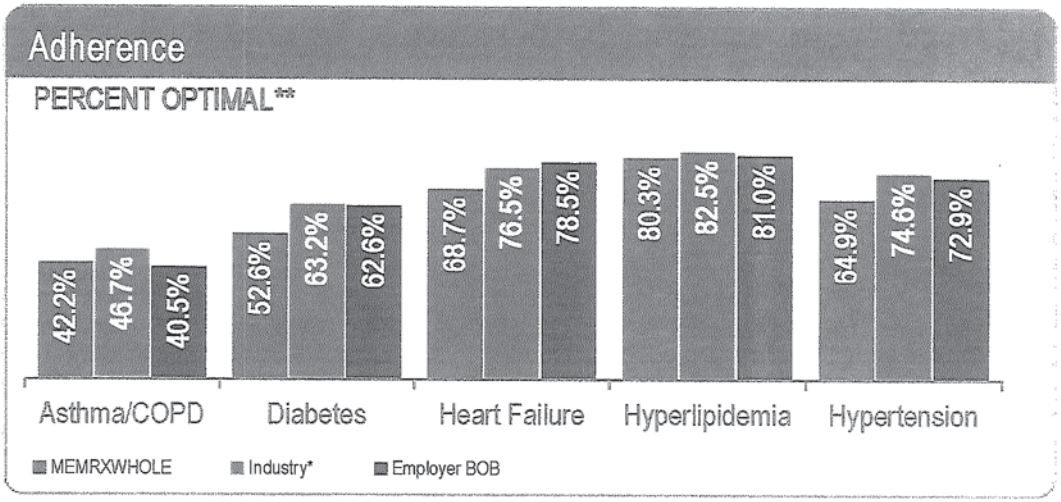
Your Specialty Net Cost decreased 3.3% to $2,681,916 representing 12.3% of your Total Net Cost. Your Specialty utilizers decreased 2.8% to 247, representing 1.1% of your total members.



Adherence

You currently have 2,271 members that are suboptimal for Hypertension. Each member moved from suboptimal to optimal, within this class, results in an estimated savings of $3,908.

Adherence has a significant impact on health care costs. Adherent members are half as likely to use the hospital as those who are non-adherent. Yet one in three patients who start a maintenance drug stop taking the medication before the first refill—often due to forgetfulness or lack of understanding of their prescribed therapy.



* Industry: Government

** Optimal: (> 80% Medication Possession Ratio)

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MEMRXWHOLE, Jan 2010 to Dec 2010

Specialty Guideline Management Program Summary

CITY OF MEMPHIS

Program Start to Quarter End

CVS CAREMARK | Specialty Pharmacy

Summary of Quarterly Cases Reviewed

Assessment and Outcome	2009 1st Quarter	2009 2nd Quarter	2009 3rd Quarter	2009 4th Quarter	2010 1st Quarter	2010 2nd Quarter	2010 3rd Quarter	2010 4th Quarter
Met / Approved	41	26	6	9	64	61	25	25
Not Approved		1		2	7	4	2	7

Summary of Quarterly Estimated Annual Cost and Estimated Annual Cost Savings

Assessment and Outcome	2009 1st Quarter	2009 2nd Quarter	2009 3rd Quarter	2009 4th Quarter	2010 1st Quarter	2010 2nd Quarter	2010 3rd Quarter	2010 4th Quarter	
Met / Approved	$ 750,668.93	$ 487,787.63	$ 87,932.00	$ 161,057.82	$ 1,124,686.81	$ 867,440.45	$ 232,412.47	$ 317,275.66	
Not Approved		$ 16,397.00		$ 48,042.00	$ 62,351.00	$ 118,911.31	$ 40,571.00	$ 21,653.00	$307,925.31

Summary of Quarterly Cases Reviewed by Drug Name and Clinical Assessment/Final Outcome

Met / Approved

Drug Name	Total Number Completed	Estimated Annual Cost
Acthar HP		
Actimmune	1	$ 10,745.00
Avonex	1	$ 28,473.66
Avonex Prefilled	12	$ 345,001.20
Betaseron	4	$ 108,401.32
Cimzia	6	$ 75,217.00
Copaxone	7	$ 194,257.94
Drug Not Identified	1	$ 1,033.00
Enbrel	48	$ 786,578.00
Euflexxa	3	$ 2,480.00
Exjade	1	$ 32,816.00
Forteo	7	$ 54,996.00
Genotropin MiniQuick	10	$ 126,153.00
Gleevec	4	$ 166,546.00
Humatrope	7	$ 203,313.00
Humira	41	$ 655,622.00
Hyalgan	1	$ 914.00
Increlex	2	$ 44,628.00

Not Met / Approved

Drug Name	Total Number Completed	Estimated Annual Cost
Acthar HP		
Actimmune		
Avonex		
Avonex Prefilled		
Betaseron		
Cimzia		
Copaxone		
Drug Not Identified		
Enbrel		
Euflexxa		
Exjade		
Forteo		
Genotropin MiniQuick		
Gleevec		
Humatrope		
Humira		
Hyalgan		
Increlex		

Not Approved

Drug Name	Total Number Completed	Estimated Annual Cost Savings
Acthar HP	1	$ 82,392.49
Actimmune		
Avonex		
Avonex Prefilled		
Betaseron		
Cimzia	1	$ 16,537.00
Copaxone		
Drug Not Identified		
Enbrel	3	$ 56,943.00
Euflexxa		
Exjade		
Forteo		
Genotropin MiniQuick		
Gleevec		
Humatrope	1	$ 31,045.00
Humira	1	$ 16,997.00
Hyalgan		
Increlex		

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Summary of Quarterly Cases Reviewed by Drug Name and Clinical Assessment/Final Outcome

Met / Approved

Drug Name	Total Number Completed	Estimated Annual Cost
Lupron	4	$ 7,872.00
Neulasta	1	$ 14,766.00
Neupogen	3	$ 20,754.00
NexAVAR	2	$ 57,600.00
Nutropin	2	$ 41,728.00
Nutropin AQ	1	$ 35,894.00
OrthoVisc	8	$ 8,950.00
Pegasys	11	$ 145,579.00
Procrit	8	$ 19,314.00
Rebif	4	$ 101,047.28
Reclast	2	$ 2,619.00
Revatio	3	$ 39,803.00
Revlimid	2	$ 59,414.00
Ribasphere	4	$ 55,400.00
Ribavirin	5	$ 31,165.00
Saizen	1	$ 18,959.00
Sensipar	8	$ 53,922.00
Simponi	1	$ 12,067.00
Stimate	1	$ 888.00
Supartz	3	$ 2,811.00
Sutent	1	$ 20,373.00
Synagis	3	$ 6,084.71
Synvisc One	2	$ 2,530.00
Tarceva	6	$ 100,128.00
Tasigna	1	$ 40,541.00
Temodar	2	$ 28,084.00
Thalomid	1	$ 29,766.00
Tobi	1	$ 13,836.00
Tracleer	2	$ 108,532.00
Tysabri	1	$ 26,363.66
Xeloda	5	$ 51,386.00
Xolair	2	$ 33,910.00

Not Met / Approved

Drug Name	Total Number Completed	Estimated Annual Cost
Lupron		
Neulasta		
Neupogen		
NexAVAR		
Nutropin		
Nutropin AQ		
OrthoVisc		
Pegasys		
Procrit		
Rebif		
Reclast		
Revatio		
Revlimid		
Ribasphere		
Ribavirin		
Saizen		
Sensipar		
Simponi		
Stimate		
Supartz		
Sutent		
Synagis		
Synvisc One		
Tarceva		
Tasigna		
Temodar		
Thalomid		
Tobi		
Tracleer		
Tysabri		
Xeloda		
Xolair		

Not Approved

Drug Name	Total Number Completed	Estimated Annual Cost Savings
Lupron		
Neulasta		
Neupogen		
NexAVAR		
Nutropin		
Nutropin AQ		
OrthoVisc		
Pegasys		
Procrit		
Rebif	1	$ 25,261.82
Reclast		
Revatio		
Revlimid		
Ribasphere		
Ribavirin		
Saizen		
Sensipar	4	$ 29,521.00
Simponi		
Stimate		
Supartz		
Sutent		
Synagis	9	$ 18,286.00
Synvisc One		
Tarceva	1	$ 21,272.00
Tasigna		
Temodar		
Thalomid		
Tobi		
Tracleer		
Tysabri		
Xeloda	1	$ 9,670.00
Xolair		

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Pharmacy Advisor™

PURPOSE

- Reduce health care costs through pharmacy-focused management of chronic conditions

KEY FOCUS

- Close gaps in care and improve adherence
- Deliver messages at teachable moments to influence positive behavior change
- Help members save money through mail benefit and generics education

PROACTIVE OUTREACH

- Brief targeted consultations across the continuum of care
- We engage members according to how they choose to engage us
  - Face-to-face, live outbound phone calls, live inbound calls, IVR and mailings
- Member first approach to closing gaps in care

Personalized pharmacy care for members with chronic conditions at no additional cost to you.

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