

ALTERNATIVE RX
SAVINGS STRATEGIES

Rx savings, in practice.

ScriptSourcing case studies

Better access.
Measurable financial impact.

2025

01 / THE OPPORTUNITY

The case for a different approach.

Reduce the cost of maintenance, name-brand, and specialty medications while supporting member engagement.

70%

Average savings per medication

As reported in the source brochure.

30%

of Americans report not taking medication as prescribed because of high prices.*

33%

of hospitalizations attributed to medication non-adherence in the source.*

Rising Rx costs

Name-brand and specialty medication prices have risen faster than other medical goods and services, creating financial challenges for employers and employees.

Multiple savings pathways

ScriptSourcing combines alternative pharmacy solutions with proactive member advocacy.

International pharmacy program (IPP)

Manufacturers assistance program (MAP)

Pharmacy tourism

WeCare

340B reporting

Technology + human advocacy

Proprietary technology identifies eligible plan members. The advocacy team then provides education, engagement, and enrollment support.

01

Identify

02

Educate

03

Enroll

*Source attribution: Kaiser Family Foundation, kff.org, as cited in the original brochure. Historical source claims retained; underlying studies were not supplied.

02 / THE MODEL

Aligned around results.

Performance-based compensation for employers.

\$0 copays for participating plan members.

\$0

Plan member copays

Lower out-of-pocket costs better position members to adhere to their medications.

No upfront program fees

ScriptSourcing works collaboratively with clients and broker partners. If savings are not delivered, ScriptSourcing does not charge.

\$0

Administration fees

\$0

Setup fees

\$0

Data fees

\$0

Technology fees

75%

of savings retained by employers under the performance-based compensation model described in the source.

SHARED INCENTIVES

The source brochure describes performance-based compensation as a way to align interests and drive results.

MEMBER EXPERIENCE

A culture of happier, healthier, and more productive employees begins with access to needed medications.

CASE STUDY 01 / PENNSYLVANIA

Manufacturing company

30 EE group / First script sourced: November 29, 2021

\$196,998

TOTAL NET SAVINGS

75%

Source-reported
net savings rate*

30

Employees

66

Plan members

4

Unique members

14

Prescriptions sourced

PRESCRIPTION COST COMPARISON / PROPORTIONAL SCALE

PBM

\$263,517

ScriptSourcing

\$66,519

Top medications by savings

Cosentyx	Psoriasis
Kesimpta	MS
Dexilant	GERD

MAP identified in the source medication panel.

Cosentyx

The source describes Cosentyx as a high-cost biologic, with weekly injections for five weeks followed by monthly injections. It cites approximately \$110,000 for 16 injections in the first year.

\$160K Net savings on Cosentyx / **\$49.3K** average savings per member

*Percentages reproduced from the original brochure do not consistently reconcile to the displayed cost totals. See Data Review Notes.

CASE STUDY 02 / NORTH CAROLINA

Construction company

2,304 EE group / First script sourced: August 1, 2020

\$1,152,040

TOTAL NET SAVINGS

71%

Source-reported net savings rate*

2,304

Employees

725

Plan members

14

Unique members

164

Prescriptions sourced

PRESCRIPTION COST COMPARISON / PROPORTIONAL SCALE

PBM

\$1,741,418

ScriptSourcing

\$589,378

By prescription count

01 Ozempic

02 Trulicity

03 Levemir

04 Jardiance

05 Tecfidera

By savings

01 Tremfya

02 Creon

03 Otezla

04 Zytiga

05 Stelara

Enbrel cost context

\$50K-\$100K+

Annual per-patient cost range cited by the source, depending on dosage, insurance coverage, and the condition treated.

Cost range varies with dosage, insurance coverage, and the condition treated.

\$1,010,419

 Net savings on Enbrel /

\$82.3K

 average savings per member

*Percentages reproduced from the original brochure do not consistently reconcile to the displayed cost totals. See Data Review Notes.

CASE STUDY 03 / MISSOURI

Hospital

566 EE group / First script sourced: January 1, 2020

\$3,374,936

TOTAL NET SAVINGS

66%

Source-reported
net savings rate*

566

Employees

2,587

Plan members

138

Unique members

1,360

Prescriptions sourced

PRESCRIPTION COST COMPARISON / PROPORTIONAL SCALE

PBM

\$5,432,678

ScriptSourcing

\$2,057,743

Top Rx savings in 2024

Promacta	\$1186,551*
Kesimpta	\$92,382
Ingrezza	\$69,819
Tecfidera	\$52,335
Dupixent	\$50,788

*Amount reproduced as written in source; verify formatting.

Revlimid

The source describes Revlimid as a treatment for multiple myeloma and other cancers. It cites a cost range of \$3,000-\$25,000 per month and total treatment costs that can exceed \$300,000 over several years.

\$511K Net savings on Revlimid / **\$24.5K** average savings per member

*Percentages reproduced from the original brochure do not consistently reconcile to the displayed cost totals. See Data Review Notes.

CASE STUDY 04 / IDAHO

Medical equipment supplier

1,016 EE group / First script sourced: January 13, 2021

\$5,348,595

TOTAL NET SAVINGS

61%

Source-reported
net savings rate*

1,016

Employees

4,366

Plan members

21

Unique members

1,918

Prescriptions sourced

PRESCRIPTION COST COMPARISON / PROPORTIONAL SCALE

PBM

\$9,394,898

ScriptSourcing

\$4,046,303

By prescription count

01 Jardiance

02 Trulicity

03 Basaglar

04 Tecfidera

05 Ozempic

By savings

01 Tecfidera

02 Stelara

03 Ofev

04 Dupixent

05 Tremfya

Focused member advocacy

47

MAP approvals

The source reports that **3% of plan members** drove the majority of pharmacy spend, and describes a \$5.3M reduction in Rx spend over four years.

\$1.1M

 Net savings on Humira /

\$36.4K

 average savings per member

*Percentages reproduced from the original brochure do not consistently reconcile to the displayed cost totals. See Data Review Notes.

CASE STUDY 05 / GEORGIA

Municipality

1,232 EE group / First script sourced: January 24, 2017

\$5,558,060

TOTAL NET SAVINGS

61%

Source-reported
net savings rate*

1,200

Employees

5,923

Plan members

172

Unique members

2,511

Prescriptions sourced

PRESCRIPTION COST COMPARISON / PROPORTIONAL SCALE

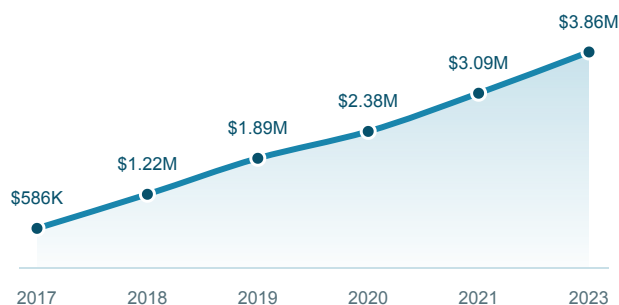
PBM

\$9,459,265

ScriptSourcing

\$3,901,205

Cumulative net Rx savings



Cumulative net Rx savings through 2023; labels rounded.

A targeted opportunity

The source reports that 4% of plan members drove the majority of pharmacy spend, and describes \$3.8M in savings over six years.

The historical chart ends at \$3,856,992 in 2023; the headline total is \$5,558,060. Both figures are retained with their source context.

2,259 / 275 IPP / MAP scripts sourced / \$32.3K average savings per member

*Percentages reproduced from the original brochure do not consistently reconcile to the displayed cost totals. See Data Review Notes.

CASE STUDY 06 / OKLAHOMA

Financial institution

2,666 EE group / First script sourced: December 1, 2021

\$6,702,103

TOTAL NET SAVINGS

69%

Source-reported net savings rate*

2,666

Employees

9,042

Plan members

240

Unique members

1,854

Prescriptions sourced

PRESCRIPTION COST COMPARISON / PROPORTIONAL SCALE

PBM

\$10,970,824

ScriptSourcing

\$4,268,721

Top medications by savings

Stelara	Psoriasis
Ozempic	Diabetes
Skyrizi	Psoriasis
Cimzia	Arthritis
Otezla	Psoriasis

Diabetes cost context

The original brochure cites the American Diabetes Association estimate of \$327B in U.S. diabetes costs in 2017, up 26% from 2012.

It also cites 76M Americans with pre-diabetes and a projection that 1 in 3 U.S. adults could have diabetes by 2050 if trends continue.

Historical figures and projection from the source brochure.

\$1.2M Net savings on Stelara / **\$27.9K** average savings per member

*Percentages reproduced from the original brochure do not consistently reconcile to the displayed cost totals. See Data Review Notes.

CASE STUDY 07 / FLORIDA

Sanitation company

2,304 EE group / First script sourced: September 17, 2019

\$4,789,089

TOTAL NET SAVINGS

64%

Source-reported
net savings rate*

2,304

Employees

13,462

Plan members

142

Unique members

1,504

Prescriptions sourced

PRESCRIPTION COST COMPARISON / PROPORTIONAL SCALE

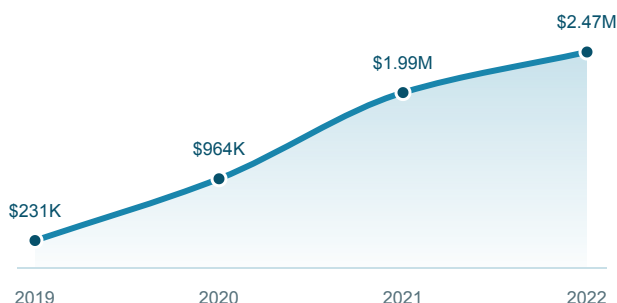
PBM

\$8,469,376

ScriptSourcing

\$3,680,287

Cumulative net savings



Since inception, by plan year. Source chart ends in 2022.

Lynparza

The source describes Lynparza as a PARP inhibitor used for ovarian, breast, and prostate cancers, with annual treatment costs ranging from approximately \$135K to more than \$200K.

1,319 total IPP scripts sourced.

\$568K Net savings on Lynparza / **\$33.7K** average savings per member

*Percentages reproduced from the original brochure do not consistently reconcile to the displayed cost totals. See Data Review Notes.

03 / VALUE-BASED SERVICE

Incentives aligned. Results measured.

Performance-based compensation connects the employer's financial goals with the performing party's results.

Performance-based compensation

By Molly Merson
Account Executive

65%

better outcomes attributed to incentive-based arrangements in the original article.

Source-reported claim; the supporting study is not identified in the supplied brochure.

In a pay-for-performance model, an agreement is established between an employer and a performing party. The arrangement incentivizes the performing party to execute and optimize results that reduce the employer's financial risk.

The source article describes aligned interests as a way to achieve significant savings, noting that incentives drive behavior.

Under the ScriptSourcing model, there are no technology, setup, or administrative fees. Compensation is based solely on results, and savings are quantified and measured on each invoice.

Employers that achieve the best results develop a collaborative relationship with the ScriptSourcing team and their benefits consulting firm.

The article concludes that performance-based arrangements can support both short-term and long-term results.

Results first.

Transparent measurement on each invoice.
Collaboration across employer, broker, and advocacy team.

04 / BEST PRACTICES

Engagement makes the difference.

Seven practices that support member awareness, participation, and program results.

01 Preferred PBM partner

Use a fiduciary pharmacy benefit manager with aligned interests.

02 Promote at open enrollment

Include customizable inserts and flyers in open enrollment packets, materials, or newsletters.

03 Lunch & Learn webinars

Encourage employees to register for and attend enrollment webinars.

04 Periodic promotion

Distribute marketing collateral and share the Med-Finder tool.

05 Benefits app

Encourage employees to download and use the benefits app.

06 Member contact information

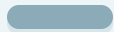
Keep phone numbers, email addresses, and member contact information current.

07 Copay adjustment

The source recommends changing copays and not permitting dispensing through the PBM.

LOW ENGAGEMENT

\$250



Per employee per year (PEPY)

HIGH ENGAGEMENT

\$1,500



Per employee per year (PEPY)

Engagement comparison reproduced from the source brochure; bars share a common scale.

05 / OUR MISSION

We help make people's lives better.



Help members better adhere to their maintenance medications while driving substantial savings to the plan sponsor.

A culture of happier, healthier, and more productive employees.

3301 Bonita Beach Road, Suite 108
Bonita Springs, FL 34134 / www.scriptsourcing.com

06 / CONNECT

Better access starts with a conversation.

Member advocacy and savings for the plan sponsor, supported by a collaborative team.

ScriptSourcing

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Suite 106
Bonita Springs, FL 34134

6080 Falls Road
Suite 201
Baltimore, MD 21209

202-555-0186
www.scriptsourcing.com

YOUR SALES CONTACT

[Contact Name]

National Sales Executive

202-555-0147

contact@example.com

Our mission

Help members better adhere to maintenance medications while driving savings to the plan sponsor, and help provide a culture of happier, healthier, and more productive employees.

Contact name, phone numbers and email are demonstration placeholders. The source lists Suite 108 on its cover and first mission page, and Suite 106 on its contact and closing pages.

APPENDIX / HISTORICAL SOURCE CONTEXT

International importation

Personal importation of prescription drugs.

Historical positions and milestones reproduced from the original brochure.

~80%

of Americans favored buying prescription drugs imported from Canada, according to the source's description of a 2019 KFF survey.

"Too many Americans cannot afford their prescription drugs... the Biden Plan will allow consumers to import prescription drugs from other countries, as long as the U.S. Department of Health and Human Services has certified that those drugs are safe."

Joe Biden (2020)

Excerpt reproduced from the source.

Source categories describe a progression from government opposition, to discouraged but permitted importation, to greater acceptance.

This appendix preserves historical source assertions. It is not an update on current importation rules. Dates and legal characterizations require source verification before external use.

1980s

FDA sets forth an original personal importation policy (PIP), described in the source as limited to drugs not approved or marketed in the U.S. for serious or terminal conditions.

2000

FDA adds the original PIP to its Regulations and Procedures Manual (RPM), including that lower price alone could not be the reason for importation.

2003

Congress passes the Medicare Modernization Act, adding Section 804 to the FDCA with commercial and personal importation provisions and certification requirements.

Mid-2000s

The source describes pharmaceutical lobbying against activating Section 804.

2006-2016

Grassroots efforts seek cheaper Canadian medications, including cross-border trips and advocacy for assistance.

2016-2020

Bills are introduced seeking lower drug prices, including Canadian importation.

October 1, 2020

The source records HHS and FDA certifications activating commercial importation provisions of Section 804.

November 30, 2020

The source records final rules and draft guidance for Section 804 Importation Programs (SIPs) directed at states and sovereign tribes.

February-March 2021

Three bills seek to bypass certification requirements for personal importation under specified conditions.

June 2021

The source describes an RPM amendment implementing a "no enforcement" policy for certain personal importation.

May 2022

The source records final guidance describing how small entities could establish SIPs.

June 2022

Senator Bernie Sanders proposes adding pending personal-importation bills to the FDA user-fee reauthorization package.



THANK YOU FOR YOUR TIME

Better access. Greater possibility.

Let's make a meaningful difference
for your people and your plan.

START THE CONVERSATION

Connect with ScriptSourcing.

www.scriptsourcing.com



[Contact Name]

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Let's talk

contact@example.com
202-555-0186

We help make people's lives better.