



Genesee County

Retiree Prescription Drug Benefits & Medical Plan Update



Retiree Prescription Drug Benefits



Background

The County has been with Express Scripts for pharmacy coverage for many years (current pharmacy benefit manager, or PBM)

Pharmacy spend was identified as a **major cost driver** on the health plan several years ago, prompting an RFP and an updated contract with Express Scripts through RxBenefits, with the hope of addressing this issue

Pharmacy costs continue to rise on the County plan and in the US in general, with an average inflationary increase of 14-18% in 2026, and we anticipate that the trend will continue

County members fill a higher-than-average number of prescriptions

The County moved PBMs many years ago, with the carve-out to Express Scripts, and moved to RxBenefits with Express Scripts in 2024, so some retirees will have been through a similar change

The County's health plan continues to run over budget

The board voted to move to SmithRx for the Actives – June, 2026



Recommendation

Recommend that the retiree plans* follow the active employee move away from Express Scripts to a more transparent and cost-effective pharmacy benefit manager (PBM) called SmithRx

It aligns with bipartisan PBM legislation that emphasizes transparency and lowest net drug cost, and ensures the County has a transparent PBM contract with aligned incentives

- SmithRx is paid by administrative fees only, uses 1-year contracts (only) and their business model is based on helping members get the medication they need at the lowest net cost to the member and the health plan
- Consolidate copays and improve them in many cases, and take advantage of monies that exist from manufacturers or sourcing channels not available through current arrangement
- Estimated ~8% savings on retiree pharmacy spend (~\$360k annually) and anticipated positive effect on both retirees and the sustainability of the County's plan

** Retirees whose benefits mirror the active population will be part of the active's move to SmithRx*



Retiree Impact

The copay structure would be improved and consolidated, reducing copays for many members and streamlining administration for the County

# of Retiree Contracts	Generic Drugs		Preferred (Brand & Specialty) Drugs		Non-Preferred (Brand & Specialty) Drugs	
	Current	New	Current	New	Current	New
50	\$2	\$0	\$2	\$2	\$2	\$2
39	\$3	\$0	\$3	\$2	\$3	\$2
41	\$5	\$0	\$5	\$5	\$5	\$5
29	\$5	\$0	\$10	\$5	\$10	\$5
124	\$5	\$0	\$15	\$5	\$25	\$5
71	\$5*	\$5*	\$20*	\$20*	\$40*	\$40*

*no change to this plan design – this is the same as the active employee plan



Retiree Impact

Some drugs may be **classified differently** with SmithRx than with Express Scripts, and **some drugs may not be on the SmithRx formulary**

- A drug may now be 'Preferred' and could be on the 'Non-preferred' list
- Formulary changes like this **happen right now with Express Scripts** (and any PBM), as frequently as quarterly, so this is a change that members on the plan likely have already experienced

Some drugs may **require members to apply for assistance** to access at a **lower cost**

All members will be eligible for assistance through SmithRx's programs

- This can **lower the copay**, depending on the medication, to **\$0**



Retiree Impact

About 107 members (or 14.5% of membership, which includes spouses and dependents) would experience some type of change such as: different medication, different formulary tier, apply for a savings program, etc.

In addition, because the mail order pharmacy would change, new prescriptions would need to be obtained and submitted to a new mail order pharmacy

- Amazon Pharmacy
- Walmart Pharmacy, or
- Mark Cuban Cost Plus pharmacy



Retiree Impact – What Stays The Same

What would stay the same?

- The **copays paid** for generic, brand, and specialty medications will be **the same or lower**
- The **pharmacies used** for generic and brand-name medications (over 65,000 retail pharmacies) including:





Retiree Impact – What Changes

What would be different?

- Some retirees may pay a different amount for your medication
- Some retirees may have to switch brands of medications
- Kroger pharmacy is in-network (not in-network with Express Scripts/ RxBenefits) along many other retail pharmacies being used
- Specialty pharmacy is Costco (no membership needed) or Senderra. Replaces Accredo, which many members have had issues with



- New mail order pharmacies, including:



- Access to several new programs, called Connect360, that could reduce out-of-pocket expenses or allow retirees to get certain medications at NO COST. Requires engagement with SmithRx upon outreach (paperwork, applications, etc., may be required to qualify)



Pros/Cons – Impact to Retirees & Family Members

Pros/Cons	SmithRx	RxBenefits/Express Scripts
Copays may be lower and \$0 in some cases	✓	✗
Covered medications may change (periodic formulary changes)	✓	✓
Switch to a generic or alternative medication with higher clinical value may be required (see FAQ for more info)	✓	✗
Higher chance to have a \$0 cost for certain medications	✓	✗
May need to fill out paperwork/apply to get your medications for no cost to you	✓	✗
Kroger in the retail pharmacy network	✓	✗
Accredo Specialty Pharmacy	✗	✓
Costco Specialty Pharmacy (no membership required)	✓	✗



Retiree Medical Plan - Update



Retiree Medical Plan - Update

Current Retiree Medical Plans:

Administrator/Carrier	Eligibility	Funding Type	Enrollment
Blue Cross Blue Shield MI	<ul style="list-style-type: none">Pre-65 and Medicare-eligible retirees who do not mirror active employees	Self-insured	746
ASR (HAP network in MI, Aetna network nationally)	<ul style="list-style-type: none">Pre-65 and Medicare-eligible retirees who do not mirror active employeesPre-65 retirees who mirror active employees	Self-insured	172
Aetna Medicare Advantage	<ul style="list-style-type: none">Medicare-eligible retirees who mirror active employees	Fully-insured	168
HAP Medicare Advantage	<ul style="list-style-type: none">Medicare-eligible retirees who do not mirror active employees	Fully-insured	33



Retiree Medical Plan - Update

Blue Cross Blue Shield MI (BCBSM) has requested a +3% renewal to the administrative fees **PLUS** a per-contract-per month carve-out fee to **NOT** have the pharmacy plan with BCBSM

- The additional fee is an added ~\$45k in additional annual expense
- BCBSM has waived this fee since the County first carved out the pharmacy to Express Scripts many years ago
- Together with other fees, the BCBSM monthly fixed administrative fee will be 70% more per contract than what the County is charged by ASR for plan administration
- BCBSM's recent \$1.7B underwriting loss creates pressure to make up the shortfall



Member Education November 2025



Impact of New Pharmacy Coverage

Will my medications still be covered?

- The formulary, or the list of covered medications, with SmithRx is very similar to the formulary in place today with Express Scripts. Formularies are constantly updated and can be expected to change regularly, whether you remain with Express Scripts or move to SmithRx. For example, today, the formulary is updated quarterly. **A majority of members will not experience any change with their medications being covered.** However, there are some differences in terms of the covered medications with SmithRx.

What happens if one of my medications is no longer covered?

- The most common reasons for a medication not being covered with SmithRx are that there are generic equivalents to a brand-name medication, there are other medications available that treat the same condition and are more effective, or the medication is deemed to have low clinical value. In any of these cases, **SmithRx will allow you to continue to get your medication for 60-90 days while they work with you and your doctor to transition you to a clinically equivalent or better covered medication.** Just like today, if there is a medical reason why you cannot take a medication listed on the formulary, your doctor can submit a letter of necessity for review.





Impact of New Pharmacy Coverage



How will I know if I qualify for one of the Connect360 programs?

- Some of the programs are applied automatically and require no action from you. When action is required, **SmithRx will reach out to you via phone, email, or paper mail.** It is very important that you respond to all outreach. They will guide you through any applications or paperwork needed to qualify for the program, which could result in you getting your medication **FOR FREE** if approved. **During the application/approval process, your medication will be filled and processed as normal with no delays.**

[Watch: SmithRx Member Success Stories](#)

[Read: More details on member experience here](#)

What if I'm having an issue with my prescription or have questions and need to speak to somebody for help?

- You can call SmithRx for assistance. Their average wait time for member support is only about 6 seconds, and is US-based



Impact of New Pharmacy Coverage

Connect 360 is a portfolio of programs that finds the lowest net cost option for every drug

- 1 **Access Plus** If you qualify, your medication will be provided at no cost to you
 - 2 **Access Specialty** Applies copay cards to reduce the cost of your medication (often \$0 for you)
 - 3 **Access Traditional** Applies copay cards to reduce the cost of your medication (often \$0 for you)
 - 4 **Third-Party Sourcing** Your medication will be shipped from another country at a discounted price (optional)
 - 5 **Autoimmune (Humira biosimilars)** Reduces your cost by switching to a generic
 - 6 **Mark Cuban Cost Plus** Access to discounted medications
 - 7 **Low Cost Insulin** Access to low cost, high quality insulins
 - 8 **Diabetes Non-Insulin** Access to low cost, high quality diabetes meds
 - 9 **Multiple Sclerosis** Access to generic MS meds
 - 10 **GLP-1** Access to certain GLP-1s at a lower cost
 - 11 **Referral Network (340B)** Discounted meds
 - 12 **Medical Pharmacy** Infusion medication discounts
- More to come...**



This describes the member experience for one of the programs offered through SmithRx

If your medication has copay assistance, this program will help pay your copayment for you

You will need to enroll in the program to get this benefit

Connect 360 Access Traditional - Member Experience

SmithRx Connect Access Traditional is a program designed to help you enroll in copay assistance programs sponsored by drug manufacturers. Copay cards help you lower your cost of medications. It is important that members work with SmithRx Connect advocates and provide them with the requested information so that our team can assist them throughout the process.

Below is an example of the member experience for the Mandatory Connect Access Traditional enrollment process:

Note: Members taking qualifying medications will be allowed **three transitional fills** while they enroll in the program. If the member does not enroll prior to the [fourth] fill, the claim will be rejected at the pharmacy. Follow the steps below to start saving!

1. Member Outreach

SmithRx will make multiple outreach attempts to the member via phone, emails, and text messages to inform them about the SmithRx Connect Access program. Please reach out to the SmithRx team at 844-385-7612 to get started.

2. Enrollment Process

SmithRx will explain the enrollment process and help the member to enroll in a copay card. In some cases, SmithRx will direct members to where they can enroll and then collect the information. Enrollment generally takes 5 minutes to complete.

3. Pharmacy Update

After copay card enrollment, SmithRx will help the member get the copay card information to their local preferred in-network retail pharmacy or Walmart Home Delivery, one of our mail-order partner pharmacies. Your monthly fills will be available at a low or \$0 copay at your preferred pharmacy.

4. New Script

In the case a prescription is needed to be supplied to your pharmacy, your access specialist will submit a fax to your provider advising where to send the prescription. You will also be provided information so you can request your provider to send a prescription.

5. Using your Copay Card

Present your SmithRx Member ID card to the pharmacy. Once you provide your SmithRx information please have your pharmacy add your copay card information as the secondary payer. This includes a BIN, PCN, Member ID, Person Code, and Group number. This information will also be provided to the member by our access specialist during enrollment

6. Copay Card Renewal

When the copay card expires, as determined by the manufacturer's terms and conditions, the pharmacy will realize a rejection and can assist the member in a copay card renewal. If members encounter a higher than expected copay, they should reach out to our Connect team for assistance.



Thank You

1924: Elorion Plante founds accounting firm in Detroit, Michigan.



1985: Moved to our second Southfield location at 27700 North Western Highway, affectionately known as "Big Blue."

1950: Frank Moran is named partner; firm becomes known as Plante & Moran.



1993: Plante Moran Financial Advisors registers with the SEC.

1994: Plante Moran CRESA is formed.

1999: Named for the first time to Fortune magazine's list of "100 Best Companies to Work For."

1996: P&M Corporate Finance LLC (PMCF) is founded.

1995: Firm creates domain and later launches website.

2007: Firm forms Diversity Council.



PM cares

2002: Firm is chosen by the U.S. Department of Treasury to help investigate the Enron collapse; Plante Moran Trust is created.