

Turning pharmacy insight into a growth opportunity

Strong results matter. Showing employers what's behind them can be what sets your health plan apart.



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Health plans are under growing pressure to retain employer groups, compete in a crowded market and show the value of their pharmacy strategies in ways that are clear, credible and easy to act on.

At the same time, pharmacy is playing a bigger role in benefits decisions than ever before. Employers are feeling the impact of rising drug costs and fast-changing treatment categories like biosimilars and GLP-1s. They also face growing pressure to improve outcomes, support members and manage long-term affordability.

Most employers already have access to reports, dashboards and performance metrics. Increasingly, what they need is clarity. They want to know how market changes affect their business, which strategies are driving results and how to make confident decisions about what comes next.

For health plans, this creates a growth opportunity.

You already have strong clinical programs, thoughtful pharmacy strategies and robust data. The next step is helping your employer groups see the value behind those efforts.

When your employer groups understand what drives performance, they can make more confident decisions about what comes next.

By providing that clarity, you can strengthen trust, reinforce your role as a strategic partner and stand out in competitive conversations.

A more impactful way to communicate pharmacy value

→ Performance is only part of the story.

To help employers see the full value of a pharmacy strategy, health plans need a clear and consistent way to connect results to the bigger picture. That means moving beyond reporting what happened and showing why it happened, why it matters and how it can inform what comes next.

Three elements can help create a stronger approach:



Market context

Help your employer groups understand the external forces shaping pharmacy performance.



Business impact

Connect pharmacy strategies to the outcomes employers care about most.



Client relevance

Tailor insights to the priorities, concerns and decisions the employer group is facing

Together, these elements can help health plans bring more structure and consistency to value conversations. They also make it easier for sales, account and clinical teams to explain performance in ways that support trust, decision-making and growth.



Start with market context

Before pharmacy performance can be fully evaluated, both health plans and employers need to understand the environment shaping it.

Drug pricing, emerging therapies, policy activity, competitive pressure and member expectations all influence how decision-makers interpret pharmacy strategy. So it's critical to see the bigger picture. Without that context, even strong performance can be difficult to compare, explain or connect to broader business goals.



Regulatory and policy changes

Policy activity around pharmacy benefits continues to evolve quickly. All 50 states have passed legislation regulating PBMs, and new state and federal reforms continue to emerge. These changes can influence cost structure, visibility expectations, benefit strategy and how employers evaluate pharmacy partners.*

Changing drug mix and cost pressures

Thousands of new therapies and expanding indications for existing therapies are in the drug pipeline, including high-cost specialty drugs and biosimilars. Acquisition costs and dispensing economics are changing rapidly.

From 2026 through 2028 alone, the pipeline could produce:



367

novel drug approvals



41

new biosimilars*



Plan sponsors want confidence that they'll be able to effectively manage cost, utilization and benefit planning.

Competitive dynamics and market expectations

Health plans are under pressure to save money while still delivering exceptional member experiences. Employers are evaluating new approaches to pharmacy benefit management. And market disruptors make unproven savings promises that can be appealing.



61%

employers with 500+ employees actively evaluating pharmacy benefits



40%

evaluating different pharmacy benefit contracting models*

Consultant and broker influence

Consultants and brokers often shape how employers evaluate health plan and pharmacy strategies. Their perspective can influence how performance is compared, how savings are interpreted and what questions employers ask during renewals, finalist meetings and other high-impact conversations.



Connect performance to business impact

When you connect pharmacy strategy performance to business impact, you help your employer groups understand what results mean and what actions to consider next.

A simple way to do this is to look at impact through three lenses:

Lens	Question it helps answer	What to show
 Financial Impact	What did it cost?	How pharmacy strategies influence trend, affordability, predictability, ROI and total cost of care
 Clinical Impact	Did it work?	How strategies support outcomes, access, adherence, member experience and workforce well-being
 Strategic Impact	What should we do next?	How pharmacy performance helps employers evaluate options, understand tradeoffs and plan for the future



Align insights to employer priorities

Health plans serve employer groups with different goals, pressures and expectations.

One employer group may focus primarily on cost predictability. Another may be trying to improve employee well-being, manage GLP-1 demand or strengthen the member experience. At the same time, they may be preparing for a renewal, responding to consultant questions or comparing competing models in the market.

That means you may need to frame the same pharmacy insight differently for each employer group.

A few questions can keep the discussion focused:

- ✓ What matters most to this employer group right now?
- ✓ What concerns or objections might they have?
- ✓ What decision are they trying to make?
- ✓ What information would give them confidence in their next move?



The most effective conversations don't start with the numbers. They start with what matters most to the client.



When market context, business impact and client priorities work together, pharmacy performance becomes easier to explain and easier for employer groups to use.

That consistency can build confidence, support decision-making and deepen employer group relationships.

Turning insight into a competitive advantage

The difference shows up in how health plans shift from reporting performance to having more strategic employer group conversations.

Many health plans focus on	Why that can limit the conversation	How you can stand out	What that could look like
Sharing savings and trend metrics without context <i>"We delivered \$X in savings."</i> <i>"Trend improved by X%."</i>	Employers may not be able to tell if the result aligns to their priorities. That can make it harder for them to evaluate value and make informed decisions.	Explain what drove the result, why it matters and how it supports employer goals.	"Our biosimilar strategy reduced specialty trend by encouraging adoption of lower-cost alternatives and helping improve affordability, while maintaining clinical quality and a reliable supply."
Treating pharmacy as a standalone benefit	Employers often evaluate pharmacy in the context of total cost of care, workforce health and overall benefits value. Looking at pharmacy in isolation can limit relevance and reduce perceived impact.	Link pharmacy performance to broader business goals.	"A thoughtful GLP-1 strategy can support workforce health, productivity, employee retention and long-term affordability, helping employers understand its role within the broader benefits strategy."

→ It's not just a matter of having the data. It's helping employer groups make sense of it.



Health plans that consistently connect performance to context, impact and employer group priorities are better positioned to build trust, support retention and differentiate in competitive conversations.



Putting insight into practice

Understanding market dynamics, connecting performance to business impact and aligning insights to employer priorities is the first step. The next step is putting that approach into practice across client interactions.

These actions can help health plans apply the framework consistently and create more strategic conversations that support employer decision-making:



Bring pharmacy value into existing discussions

- Quarterly business reviews, renewal discussions and strategic planning conversations all create opportunities to connect pharmacy performance to broader business priorities.
- Use these moments to explain not only what happened, but why it matters and what it may mean for future decisions.



Equip teams with market-based narratives

- Sales, account and clinical teams need shared talking points for the topics employer groups care about most. High-interest categories such as GLP-1s, biosimilars and specialty therapies often raise questions that go beyond cost and utilization.
- Teams should be ready to explain the market dynamics, employer expectations and competitive pressures shaping these conversations.



Translate pharmacy insights into business language

- Technical explanations have their place. But employer group conversations are often more effective when they focus on business implications.
- Instead of discussing program mechanics alone, explain how a strategy supports affordability, access, predictability, employee well-being or long-term planning.



Use visuals to reinforce key messages

Clear, focused visuals can make insights easier to absorb, share and act on.

A few simple principles can help:

- | | |
|--|---|
| ✓ Lead with the takeaway, not the chart | ✓ Show trends over time whenever possible |
| ✓ Focus each visual on one message | ✓ Emphasize outcomes and implications, not just metrics |
| ✓ Highlight key insights directly on the graphic | |



Create consistency across teams

- A shared framework helps align messaging, materials and proof points across client touchpoints so teams can communicate value more consistently.
- This reinforces the same core message during renewals, RFPs, finalist presentations and other high-impact moments.



Measure impact

Health plans can also look at how these conversations influence client engagement and business outcomes. Consider tracking:

- ✓ Employer feedback
- ✓ Interest in pharmacy-related discussions
- ✓ Client presentations that include actionable recommendations
- ✓ Renewal and retention outcomes
- ✓ Opportunities generated through more consultative conversations

Resources you can put to work

You already know how important it is to show clients the value behind your pharmacy strategies. The harder part is finding the time, resources and the right perspectives to tell that story consistently.

That's where CVS Caremark's Commercial Growth Solutions can help. Our experts are available to health plans to strengthen employer engagement, support retention and position pharmacy as a strategic asset.



Commercial Growth Solutions by the numbers



52%+
win ratio*



50K
members retained
in a high-risk RFP*



5 out of 5
health plan
satisfaction rating*

Preparing for what's next

With 61% of employers evaluating new approaches to pharmacy benefits, health plans have an opportunity to show not only what they deliver, but why it matters.

The plans best positioned for success will be those that clearly explain what drives performance, how pharmacy strategy supports broader business goals and which decisions will move employers forward.

CVS Caremark's Commercial Growth Solutions can help health plans bring that story to life with strategic insights, market expertise and employer-focused resources that make value easier to communicate.

The next opportunity may be closer than you think. The time to prepare is now.



Ready to get started?

Talk to your CVS Caremark account team to learn how Commercial Growth Solutions can help your health plan strengthen employer group relationships and stand out in the market.



*FOR ALL 50 STATES PASSING PBM LEGISLATION CLAIM:

<https://nashp.org/state-tracker/state-pharmacy-benefit-manager-legislation>

*FOR 2026–2028 PIPELINE PROJECTIONS:

<https://business.caremark.com/what-we-do/cost-management/pipeline-surveillance.html>

*FOR 61% EMPLOYERS EVALUATING PHARMACY BENEFITS AND 40% EVALUATING CONTRACTS CLAIM:

<https://www.mercer.com/en-us/insights/us-health-news/employers-are-evaluating-alternatives-to-traditional-pbm-contracts>

*FOR 52%+ WIN RATIO CLAIM: Based on data from CVS Health Analytics comparing CY2024 where commercial growth support was not engaged compared to CY2025 where commercial growth support was fully engaged.

*FOR RETAINING 50K MEMBERS CLAIM: Represents renewal of a single key employer account for a large health plan client.

*FOR HEALTH PLAN SATISFACTION CLAIM: CRMS Client Experience Survey (2024), regional health plan client's satisfaction score with account team performance.

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