

12849. RESOLUTION 25-44 - AUTHORIZING MODIFICATIONS TO THE DELAWARE RIVER AND BAY AUTHORITY'S PRESCRIPTION DRUG BENEFITS PLAN DESIGN

WHEREAS the Delaware River and Bay Authority (the "Authority") is committed to providing its employees and retirees with a comprehensive core benefit program; and

WHEREAS the Authority is responsible for prudent financial governance with respect to those core benefit programs; and

WHEREAS the Authority is responsible for taking appropriate action to control escalating core benefit costs; and

WHEREAS the Personnel Committee and the Budget & Finance Committee have each reviewed the proposed recommendations to the Authority's changes to its prescription drug benefit program and recommend approval thereof to the Commissioners.

NOW, THEREFORE, BE IT RESOLVED THAT the Delaware River and Bay Authority hereby approves the following modifications to be implemented January 1, 2026 (as described in detail on Exhibit A, which is incorporated herein by reference):

1. Modifications will be applicable to the prescription drug plans under the Preferred Provider Option (PPO), the Exclusive Provider Organization (EPO), and the High Deductible Health Plan (HDHP) health plan options.
2. Under the PPO/EPO Plans implement at a minimum a 10% co-insurance instead of a \$20 co-pay (after deductible for HDHP) for GLP-1 medications used for the sole purpose of weight loss.
3. Under the PPO/EPO Plans maintain the \$20 co-pay (after deductible for HDHP) for GLP-1 medications purchased at a retail pharmacy as a preferred brand medication for the sole purpose of treating diabetes and diabetic related illness.
4. Under the PPO/EPO Plans maintain the \$35 co-pay (after deductible for HDHP) for GLP-1 medications purchased at a retail pharmacy as a non-preferred brand medication for the sole purpose of treating diabetic related illness.
5. All other services, co-pays and co-insurances in the PPO, EPO, and HDHP benefit plan design remain the same.

Resolution 25-44 was moved by Commissioner Collins, seconded by Commissioner Faust, and was approved by a roll call vote of 10-0.

EXHIBIT A

Proposed Benefit Plan Changes Effective 1/1/2026

Prescription Drug Plan Pertaining to GLP-1 Medications

Current Rates

Drug Tier	PPO / EPO	HDHP
Retail Pharmacy- Generic (per 30-day supply)	\$10.00 copay	\$10.00 copay, after deductible
Retail Pharmacy - Preferred Brand (per 30-day supply)	\$20.00 copay	\$20.00 copay, after deductible
Retail Pharmacy- Non-Preferred Brand (per 30-day supply)	\$35.00 copay	\$35.00 copay, after deductible
Mail Order (up to 90-day supply)	Same as 1x retail copay	Same as 1x retail copay, after deductible

Proposed Additional Rates

Drug Tier	PPO/EPO	HDHP
GLP-1 Medication for Weight Loss Only	Coinsurance of 10%	Coinsurance of 10%, after deductible
GLP-1 Medication for Medical Diagnosis Retail – Preferred Brand	\$20.00 Copay	\$20.00 Copay, after deductible
GLP-1 Medication for Medical Diagnosis Retail – Non-Preferred Brand	\$35.00 Copay	\$35.00 Copay, after deductible

Resolution 25-44 - Executive Summary Sheet

Resolution: Authorizing Modifications to the Delaware River and Bay Authority's Prescription Drug Benefits Plan Design

Committee: Personnel

Committee Date: September 16, 2025

Board Date: September 16, 2025

Purpose of Resolution:

To approve the proposed modification to the prescription drug benefits plan design (as described in Exhibit A, which is incorporated herein by reference) as presented by the Executive Director and the Chief Human Resources Officer.

Background for Resolution:

The Delaware River and Bay Authority (Authority) is committed to the health and well-being of our employees and retirees.

During annual renewals, the Authority reviews administration and costs of benefits for determination of any recommended modifications including but not limited to benefit plan design changes, vendor/carrier changes, in comparison to industry trends and employee/retiree population utilization.

For 2026, recommendation is being presented for prescription drug benefit plan design for utilization of the GLP-1 medications as the cost of using these drugs for the sole purpose of weight loss not associated with the treatment of diabetes or diabetic related illnesses is skyrocketing.

To address the increase cost of the GLP-1 medications used solely for weight loss and the costs associated with these drugs, the Authority is recommending changing the plan design structure to implement at least a 10% minimum cost share through the use of a co-insurance concept. Currently, there is a \$20 co-pay for retail pharmacy preferred brand and a \$35 co-pay for retail pharmacy non-preferred brand (after deductible for the High Deductible Health Plan only).

Changing the prescription drug cost sharing using the co-insurance model vs. the co-pay model is estimated to saving the Authority \$16,898.