

RxLogic Independent Technology Backbone for Health Plans and Third-Party Administrators to Build Transparent, Integrated Pharmacy Benefit Operations

Key Takeaways:



- Configurable, unbiased SaaS platform supports real-time claims adjudication, clinical programs, financial automation and compliance tracking for health plans and TPAs.



- Transparent rebate data, contract insights and audit-ready compensation records help stakeholders in pharmacy benefit operations meet ERISA and CAA fiduciary and disclosure requirements.

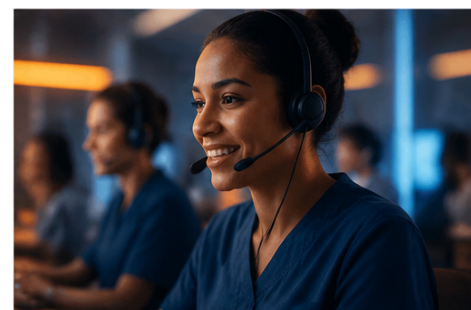


- Proprietary, independently owned adjudication technology processes over 1 million claims per day with 99.996% uptime, giving TPAs and health plans a platform they can rely upon and evaluate on their own terms.

Rising Fiduciary Risk

New fiduciary and disclosure requirements under ERISA and the Consolidated Appropriations Act are placing growing legal and compliance pressure on TPAs, who now share liability for ensuring pharmacy costs are transparent and properly tracked. As spread pricing faces tighter federal and state restrictions, TPAs need partners whose data, compensation structures and technology already hold up to that scrutiny.

RxLogic provides a modern, independent pharmacy benefit management technology platform that gives health plans and TPAs the visibility, control and audit-ready data needed to meet fiduciary obligations and manage benefits with precision.



What Health Plans and TPAs Gain With RxLogic



Real-time claims adjudication with configurable eligibility, accumulator and payer sheet management.



Compensation and fee documentation built into normal claims processing, supporting DOL disclosure requirements under ERISA.



A transparent, no-hidden-fee pricing structure that reduces the fiduciary risk TPAs inherit from less transparent PBM relationships.



Real-time rebate data, contract insights and benchmarking tools to independently validate PBM performance.



Cloud-native infrastructure built to integrate pharmacy and medical claims data for a unified employer reporting picture.



Advanced clinical program support, including copay programs, managed from a centralized platform.



A robust Client API Library that lets TPAs push and pull data directly, without custom development.



Automated financial administration including payments, invoices and receivables via PayRec, an integrated platform with modules for every stage of the process.



Proven scale and reliability, with more than 1 million claims processed daily, 99.996% adjudication uptime, sub-2-second adjudication on 99% of claims and SOC II compliance on Azure cloud-native infrastructure.

How RxLogic Is Different

Some Legacy PBM systems can restrict access to critical data, limit benefit design flexibility and delay updates to clinical and financial processes, creating real challenges for TPAs and plan sponsors managing diverse populations, vendor relationships and pharmacy contracts. Many also depend upon third-party adjudication technology, tying clients to another company's systems, approvals and development roadmap.

RxLogic independently designed and built its pharmacy benefit platform and owns the core intellectual property behind its source code, adjudication engine, application logic and cloud-native infrastructure. That ownership

means **TPAs work with a partner that can configure, integrate and advance the platform around their specific operational requirements**, not one that has to wait on someone else's roadmap.

Importantly, **RxLogic is not a PBM and does not retain rebates or monetize spread pricing**. Health plans and TPAs keep full control over benefit strategy, vendor relationships and data, while gaining the real-time infrastructure needed to verify accuracy, satisfy compliance requirements and adapt as the pharmacy benefit landscape changes.

Contact RxLogic today to discover how our technology platform brings greater visibility, traceability and control to your patient support and affordability programs.

