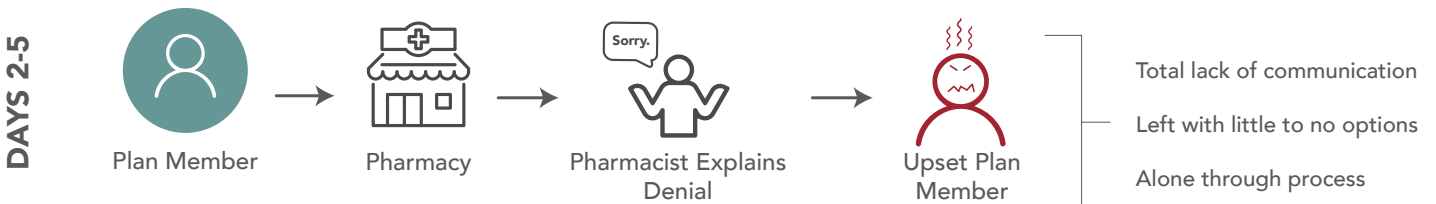
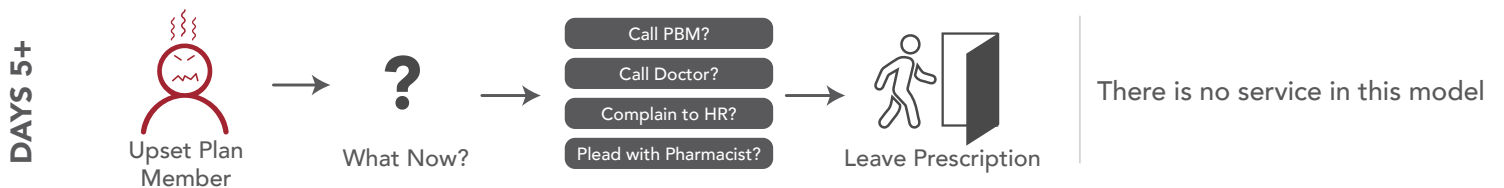




In today's PBM service model, there is no service. A plan member goes to the doctor and has a prescription sent to the pharmacy. When the pharmacy sends the claim to the PBM and the prescription is denied, it just sits and no one handles it for the plan member.



After a frustrating time period where the plan member has to handle their own claim denial and cannot get help, they are left with little to no options and remain upset.

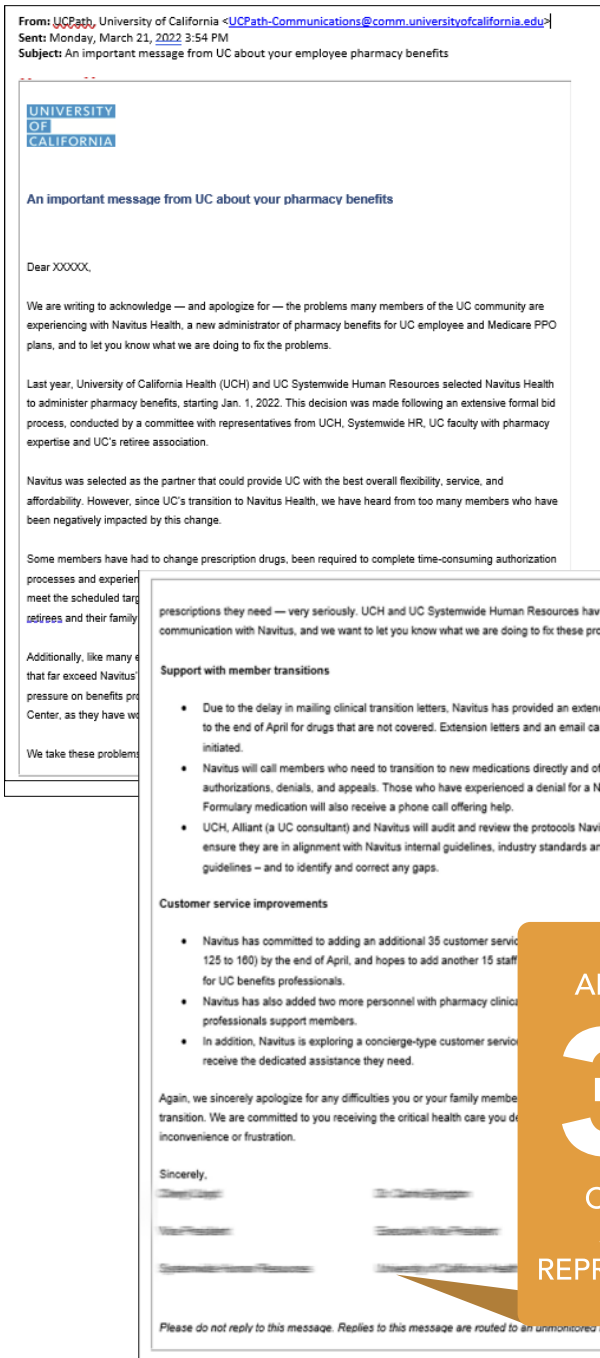


The plan member is forced to make a decision. Many times this ends up with the member calling to complain to HR and having to make multiple calls to resolve their problem with getting medication. All too many times, the member ends up leaving their prescription. There is no service in the current model and it wastes time for the member, the doctor/office, the pharmacy – everyone involved.

Contact us and see how
AffirmedRx can help your business

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ADDITIONAL
35
 CUSTOMER SERVICES REPRESENTATIVES

With us, you'll never send a letter like this.

AffirmedRx is completely restructuring how a PBM does business in order to solve issues before they become a larger problem.

The industry is broken, how do we fix this?

AffirmedRx is **proactive versus reactive**

AffirmedRx is focused on **clarity, integrity and trust**

AffirmedRx hires the **right people to do the job**

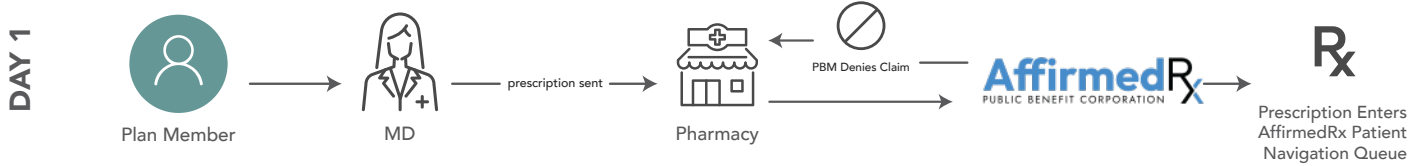
Let us show you the PBM service model, reimagined.



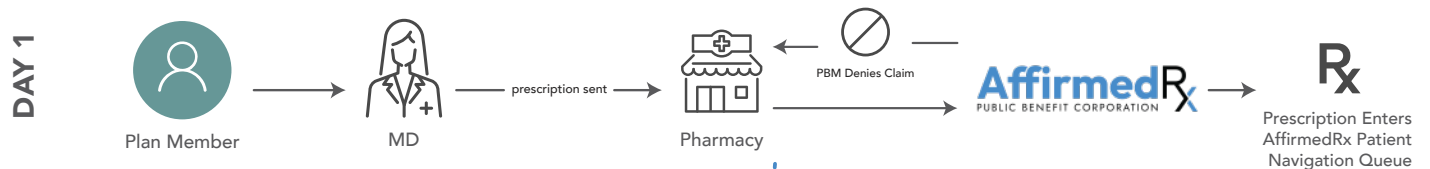
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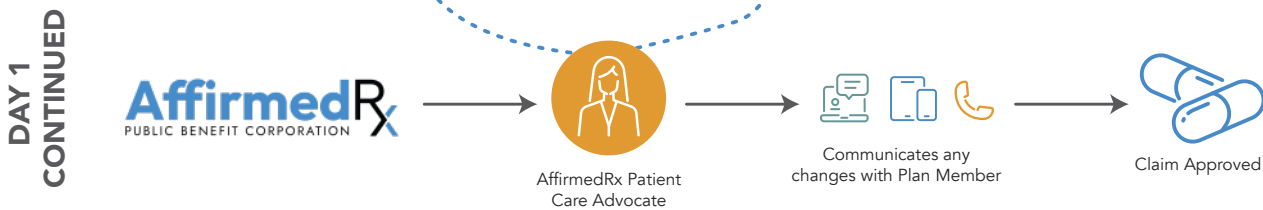




In the AffirmedRx Patient Navigation model, we reimagine the way the service model/process should work. Day 1, our Patient Navigation team gets real-time notifications of claim denials and begins working with the member to resolve their issue.



AffirmedRx Patient Navigation team communicates with MD and Pharmacy as needed to resolve prescription denial issues or change to a covered drug



Our Patient Care Advocates meet the plan member where they are and communicate (through their chosen form of communication) to resolve their pharmacy benefit issues and make sure they get the clinically appropriate medications they need – at the time they need them.



Our model makes sure that the plan members are happy, there are no complaint calls to HR, and we save everyone in the service model process time.

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