**Rationale for Prioritizing CVS I90 REST Services Over the Block Strategy**

**Executive Summary:**

As we enhance our member portal's pharmacy capabilities, we face a critical choice between two CVS integration models: the rapid-deployment UX/Data Blocks or a direct integration with the underlying I90 REST services. While the Block strategy offers an appealingly fast path to market for standard features, it introduces significant long-term risks that compromise our brand identity, user experience, and strategic agility. Adopting these pre-packaged components means ceding control over the most critical aspects of our members' pharmacy journey.

A direct integration with the I90 REST services, conversely, is the superior strategic decision. It ensures we retain full ownership of our user experience, allows for the creation of unique, value-added features by combining CVS data with our own, and future-proofs our platform. This approach is the only way to deliver a truly seamless, differentiated, and member-centric pharmacy experience.

**1. Non-Aligned UX and Dilution of Brand Identity**

Adopting CVS’s pre-built UX Blocks for pharmacy management will create a disjointed experience that clashes with our established digital platform, erodes member trust, and prevents us from delivering the innovative, supportive journeys our members expect.

* **Loss of UX Control & Inconsistent Design:** A generic block will not match our design system. For a member managing complex prescriptions, this inconsistency creates confusion and anxiety.
  + **Example: The "My Prescriptions" Block:**
    - **Status Indicators:** Our platform uses specific, color-coded icons to communicate prescription status (e.g., a green pill for "Ready for Refill," a yellow clock for "Processing"). The CVS Block uses simple text labels ("Refill Available," "In Progress"), which lack the at-a-glance clarity of our system and feel alien to the user.
    - **Refill Workflow:** Our standard is a one-click "Refill and Ship" button that adds items to a universal cart. The Block may use a multi-step modal window with different button styles and terminology, confusing a member who is used to our seamless process.
    - **Information Hierarchy:** We prioritize displaying [Drug Name], [Member Cost], and [Days Supply] prominently. The Block might emphasize the [Retail Price] and hide the member's actual copay behind an extra click, causing unnecessary alarm about costs.
* **Inflexible User Journeys & Stifled Innovation:** The Blocks are designed for generic workflows and cannot accommodate the integrated, value-added features that differentiate our health plan.
  + **Example: Switching to Mail Order:**
    - **The Block Experience:** A member viewing their monthly Lipitor prescription filled at a retail pharmacy sees an option to "Manage Delivery." Clicking this likely takes them to a separate, CVS-branded page to start a new mail-order request, forcing them to re-enter information and breaking the context of their journey.
    - **The Ideal REST-Powered Experience:** Using the I90 REST services, we can place a button directly next to the retail prescription that says: **"Switch to a 90-day supply via Mail Order & Save $15."** One click could use the API to initiate the switch, confirming the address on file and providing immediate confirmation, all within our branded UI.
  + **User Story Illustrating the Failure:**
    - **As a** busy parent managing my child's asthma medication,
    - **I want to** quickly see if I can get a 90-day supply of their inhaler delivered to my home instead of having to go to the pharmacy every month,
    - **So that** I can save time and ensure we never run out.
    - **How the Block Strategy Fails:** The parent is forced into a confusing, multi-step process that feels disconnected from the main website, making a simple task feel like a major chore. They may abandon the process and stick with the less convenient, more expensive retail option.

**2. Critical Capabilities Unlocked Only by I90 REST Services**

The most significant limitation of the Block strategy is its inability to support the sophisticated, integrated, and proactive features that are essential for a modern health plan. These experiences are only possible by leveraging the raw data and transactional power of the I90 REST services directly.

* **The "Black Box" Problem & Actionable Interventions:** A Block can only display basic status information. The I90 REST API provides the detailed data needed to create actionable, helpful user experiences.
  + **Scenario:** A member's mail-order refill for a specialty drug is marked "On Hold" in the Block UI. This is a dead end for the user.
  + **The REST-Powered Solution:** The I90 RxStatus API doesn't just return "On Hold"; it provides a specific reason code like PA\_REQUIRED (Prior Authorization) or ADDRESS\_INVALID. We can consume this code and build a custom, helpful workflow in our UI:
    - If PA\_REQUIRED, we display: "Your doctor needs to provide more information for this refill. We have automatically contacted their office and will notify you within 24 hours. No action is needed from you."
    - If ADDRESS\_INVALID, we display: "We couldn't confirm your shipping address. Please click here to review and update your address for immediate processing."
* **Orchestrating Complex, Multi-Service Workflows:** Our value as a health plan comes from integrating pharmacy data with our other services—something a Block cannot do.
  + **Scenario:** A member is newly diagnosed with diabetes and their doctor prescribes Metformin.
  + **The REST-Powered Journey:**
    1. The doctor's e-prescription hits CVS's system. We are notified via an I90 NewRx API call.
    2. Our system calls our *internal* Care Management API and identifies the member as eligible for our "Diabetes Support Program."
    3. We call the I90 DrugCost API to determine the exact copay for a 30-day retail supply versus a 90-day mail-order supply.
    4. We present a single, unified screen in *our* portal: "Welcome to your Diabetes Care Plan. We've received your new prescription for Metformin. You can get a 90-day supply delivered for just $10. Click here to set up your first shipment. A care nurse will also be in touch to discuss our free support services."
  + **Why the Block Fails:** The Block can show the new prescription, but it cannot connect it to our internal care programs or present comparative cost options in a single, cohesive welcome experience. It remains an isolated silo of pharmacy data.
* **User Story Illustrating the Power of REST:**
  + **As a** member starting a complex specialty drug for my rheumatoid arthritis,
  + **I want** a single, guided onboarding experience within my health plan's portal that handles the prescription, confirms my copay assistance eligibility, and lets me schedule my first delivery and nurse training call,
  + **So that** I feel supported and in control during a stressful time.
  + **Why Only REST Achieves This:** This journey requires calling multiple I90 APIs (RxStatus, PatientCost, SpecialtyOnboarding) and combining that data with our internal APIs for copay assistance programs and nurse scheduling. A Block cannot orchestrate this level of integration.

**Conclusion and Recommendation**

The CVS Block strategy offers a tempting shortcut but ultimately leads to a fragmented user experience, technical limitations, and a surrender of strategic control. It prevents us from building the truly integrated and supportive pharmacy experiences that our members need and that differentiate us in the market.

By committing to a direct integration with the **CVS I90 REST services**, we invest in a flexible, powerful, and future-proof architecture. This is the only path that allows us to fully own our member's digital journey and deliver a best-in-class, seamlessly integrated pharmacy experience.