

Preferred Drug Lists

Version 12/12/2017

Definitions

AL = Age Limits Apply

PA = Prior Approval: The doctor will need to get approval from the insurance company before the drug can be filled at the pharmacy with the patient's insurance benefit. The prescription can be filled without PA, but the patient will cover the full cost.

QLL = Quantity Level Limits: There is a limit on the amount of drug the plan will cover. For example, the plan provides 60 pills in 30 days for some drugs.

Also known as Quantity Per Dispensing (QPD) or Quantity Limits (QL).

ST = Step Therapy: Patients have to try other drugs first before this drug will be approved by the insurance company.

Formulary vs Non-Formulary

Non-formulary means the insurance company will pay little to nothing to offset the cost of the drug and the patient will likely pay the full out-of-pocket cost.

Tiers

A formulary almost always has tiers. Tier 1 is the best in terms of the cost being covered by the insurance company. The larger the tier number, the more costly to the patient.

Alphabetical List of Insurance Companies

Aetna commercial

<https://www.aetna.com/health-care-professionals/clinical-policy-bulletins/pharmacy-clinical-policy-bulletins.html>

Have to pick a plan to search on but a fallback is to search the Standard Plan.

Not the most informative list; designates drugs minimally as either preferred or non-preferred.

Aetna Better Health (Aetna's Medicaid plan)

https://www.aetnabetterhealth.com/louisiana/assets/pdf/pharmacy/ABHLA2_8725_Single%20Tier%20with%20Ref%20Drug_2528.pdf

Amerihealth

<https://www.amerihealthcaritasla.com/pdf/pharmacy/printable-formulary.pdf>

Searchable version:

<http://amerihealthcaritasla.com/apps/formulary/index.aspx>

BCBS

<https://www.bcbsla.com/find-a-doctor/rx-drug-resources/search-rx-drugs>

Confusing options of lists for 2-Tier (generic vs brand), 3-Tier, and 4-Tier.

If plan type is not known, the Covered Drug List lists PA, ST, and QPD specifiers, but not the Tiers.

Cigna

Not located.

Healthy Blue

https://providers.healthybluela.com/Documents/LALA_CAID_4Q15Formulary.pdf

Searchable:

<https://client.formularynavigator.com/Search.aspx?siteCode=3696901820>

Humana

<https://www.humana.com/pharmacy/individual-and-family/tools/druglist/print>

Louisiana Healthcare Connections

https://pharmacy.envolvehealth.com/content/dam/centene/envolve-pharmacy-solutions/pdfs/PDL/FORMULARY-LOUISIANA_HEALTHCARE_CONNECTIONS.pdf

Medicaid

Healthy Louisiana contracts with five Medicaid carriers (Aetna Better Health, Amerihealth, Healthy Blue, Louisiana Healthcare Connections, and United) who work from a common formulary, but each company also has their unique differences. The formulary common to all five is here:

<https://www.aetnabetterhealth.com/louisiana/assets/pdf/pharmacy/MCO%20Common%20PDL%20for%20PDF%209.1.17.pdf>

TriCare

Only a searchable version has been located:

<https://tricare.mil/CoveredServices/Pharmacy/Drugs.aspx>

United Healthcare (managed by OptumRx)

Confusing options to pick from for multiple plans:

<https://www.uhc.com/employer/pharmacy/total-cost-management/prescription-drug-list>

United Healthcare Community Plan (United's Medicaid plan)

<http://www.uhcommunityplan.com/content/dam/communityplan/plandocuments/findadrug/LA-PDL/LA-PDL-Provider.pdf>

Searchable;

<https://chp.optumrx.com/RxSolWeb/mvc/rxExternalFormularySearch/displaySearch.do?type=ClientFormulary&&var=UCSLAQ1&inoid=UCSLAQ1&page=insert&par=>