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 Common Commercial 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.

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

https://www.cigna.com/static/docs/medicare-2019/formulary-ea-az.pdf

Humana

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

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

Medicaid Managed Care Organizations

As of May 1, 2019, the Louisiana Department of Health mandated the five MCO's to have a single PDL: http://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf

PDL's for each MCO are still posted but they ought to match the LDH PDL:

Aetna Better Health

https://www.aetnabetterhealth.com/louisiana/assets/pdf/pharmacy/ABHLA2 8725 Single%20Tier%20 with%20Ref%20Drug 2528.pdf

Amerihealth

https://www.amerihealthcaritasla.com/pdf/pharmacy/printable-formulary.pdf Searchable version:

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

Healthy Blue

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

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

Louisiana Healthcare Connections

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

United Healthcare Community Plan

http://www.uhccommunityplan.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&infoid=UCSLAQ1&page=insert&par=