CY 2007 PBP Upload Indicating Excluded Drug Coverage

- Excluded Part D drugs may only be covered as a supplemental benefit within an Enhanced Alternative plan design

- A detailed list of all Part D excluded drugs covered on the plan should be included in the Notes section of the PBP

- List should include: Name of medication (if covering both brand name and generic, list each separately), Strength, Dosage form, tier #

  <u>Example</u>
  Diazepam 10mg tablets, Tier 1
  Valium 10mg tablets, Tier 3

- Throughout the PBP, please indicate, through selection of appropriate radio buttons, coverage of excluded drugs in each associated tier where applicable

- If the plan would like to indicate coverage of excluded Part D drugs in Section 3 of their Summary of Benefits, they may refer the member to locate these drugs in the plan's formulary (printed or on their website). The plan should not list these medications in the Summary of Benefits itself.

- If the plan intends to designate a unique tier for the Part D excluded drugs, that particular tier must be higher than the existing Part D tiers on the formulary (e.g. If there are five tiers on the Part D formulary flat file then the unique excluded drug tier would be tier 6 in the PBP.) This would ensure consistency between the indicated tier/tier name submitted on the Part D formulary flat file and the tier/tier name submitted in the PBP.

CY 2007 PBP Upload Indicating Free First Fill Medications

- Applicable to Basic Alternative and Enhanced Alternative plan designs. Plan provides the benefit of the initial fill of a medication via Plan assumed administrative fees. Vouchers and coupons are excluded in this benefit.

- A detailed list of all Free First Fill medications allowed under the plan should be included in the Notes section of the PBP

- List should include: Name of medication (if covering both brand name and generic, list each separately), Strength, Dosage form, tier #

    Example
    Diazepam 10mg tablets, Tier 1
    Valium 10mg tablets, Tier 3

- If the plan would like to indicate coverage of free first fill medications in Section 3 of their Summary of Benefits, they may refer the member to locate these drugs in the plan's formulary (printed or on their website). The plan should not list these medications in the Summary of Benefits itself.

CY 2007 PBP Upload Indicating Coverage of OTC Medications

- A detailed list of all OTC medications covered on the plan should be included in the Notes section of the PBP

- List should include: Name of medication (if covering both brand name and generic, list each separately), Strength, Dosage form, tier # (if applicable)

  <u>Example</u>
  Loratadine 10mg tablets, Tier 1
  Claritin 10mg tablets, Tier 1

  Recall that since there is no beneficiary cost sharing for OTC medications, the tier indicated will be for informative purposes only.

- If the plan would like to indicate coverage of OTC medications in Section 3 of their Summary of Benefits, they may refer the member to locate these drugs in the plan's formulary (printed or on their website). The plan should not list these medications in the Summary of Benefits itself.

- OTC medications may reside in one of your formulary's current tiers or be assigned a unique tier. If your plan chooses a unique tier as indication of coverage of OTC medications, that tier level must be higher than the top tier listed on your formulary submission. (e.g. HPMS Part D formulary flat file has five tiers, an OTC unique tier could be tier 6). This would ensure consistency between the indicated tier/tier name submitted on the Part D formulary flat file and the tier/tier name submitted in the PBP.