

Optimized Rx Formulary

Our formulary is changing for 2024 to the Optimized Rx Formulary. A formulary is a list of drugs. Each insurance carrier creates and administers their unique approved drug list.

Priority Health's approved drug list is carefully reviewed by their Pharmacy and Therapeutics Committee. The committee is comprised of doctors, pharmacists and other health care professionals from the Priority Health network. They meet six times a year to review currently covered drugs and new drugs based on cost, safety and efficacy. Because of this attention to detail, members can be confident that our list is up-to-date with the highest quality, most effective choices to meet their needs.

To view the formulary and see if your drugs are covered:

- Visit [//priorityhealth.com/formulary/employer](https://priorityhealth.com/formulary/employer).
- Select **"Employer Sponsored: Optimized"** when asked what type of drug list you have. (the formulary type will be listed on the back of your new ID card for 1/1/24).

You will see two new tiers of drugs available in 2024. "Tiers" are simply a way of grouping prescription drugs by cost and value. Different insurance carriers categorize drugs into tiers according to their specific approved drug list, so it is important for members to check Priority Health's approved drug list to see which tier their drug is classified.

As you review the formulary, you may notice that some drugs have additional requirements before members can obtain them. Certain medications may have monthly quantity limits (QL) or require prior authorization (PA) to ensure safe and appropriate use. Doctors are responsible for submitting on behalf of the member and may submit a request by calling or faxing it to Priority Health. Requests must be approved in advance for a drug to be covered.

Some medications require step therapy because there are other similar drugs that are proven to be just as safe and effective but cost less. This provides a safe alternative and saves the member money. If the lower cost drug isn't effective or if it's deemed medically necessary, a member's doctor can work with Priority Health and request an exception. If a member has already completed the step therapy requirements in the past, they can ask their provider to send the information to Priority Health for review.

If you have additional questions, call the Priority Health customer service number located on the back of your member ID card. Our customer service specialists can answer questions on drug costs, drug alternatives, claims questions and drug requirements.

