

Prescription Drug Utilization Management

For certain prescription drugs, we have additional requirements for coverage or limits on our coverage. These requirements and limits ensure that you use these drugs in the most efficient way and also help us control drug plan costs. Please consult a copy of our formulary or the formulary on our Web site for more information about these requirements and limits.

The requirements for coverage or limits on certain drugs are:

Prior Authorization

Certain drugs require prior approval. This means that your provider will need to contact us before you fill your prescription. If we don't get the necessary information to satisfy the prior authorization, we may not cover the drug.

Quantity Limits

For certain drugs, we limit the amount of the drug that we will cover per prescription or for a defined period of time. For example, we will provide up to 18 tablets per 30-day period for Ondansetron.

Step Therapy

In some cases, we require you to try one drug to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may require your doctor to prescribe Drug A first. If Drug A does not work for you, then we will cover Drug B.

Generic Substitution

When there is a generic version of a brand-name drug available, our network pharmacies may recommend and provide you the generic version — unless, your doctor has told us that you must take the brand-name drug, and we have approved this request.