



STATE OF CONNECTICUT

INSURANCE DEPARTMENT

Bulletin No. HC-113
June 22, 2016

TO: All Health Insurance Companies and Health Care Centers Authorized to Conduct Business in Connecticut

RE: Annual Filing of Formularies

Pursuant to the authority under Sections §38a-591(e) of the 2016 Supplement to the Connecticut General Statutes and Sections 38a-481 and 38a-513 of the Connecticut General Statutes, the Insurance Department will require carriers to file their prescription drug formularies for all plans, whether or not such plans are subject to the ACA, to ensure consistency and transparency in the marketplace. The purpose of this bulletin is to set requirements and minimum standards for prescription drug formularies filed with the Department, and to solicit information relating to the policies and procedures for Pharmacy and Therapeutics Committees in developing these formularies.

Formulary Requirements

- The formulary shall be easily electronically searchable.
- The medications within the formulary shall be grouped in alphabetical order by therapeutic class.
- Definition and/or explanation of each formulary tier, including Specialty tier, shall be clearly stated.
- Definitions for utilization controls, including but not limited to quantity/dosage controls, prior authorization, and step therapy shall be clearly stated.
- Tier coverage and utilization controls for each medication (by dosage, if applicable), shall be clearly stated.
- The formulary shall include information on how to obtain drugs that are off formulary.
- The formulary shall specify if and how drugs could be obtained through mail order pharmacy.
- The formulary shall clearly state when it was created, when it was last updated, and when the next anticipated update will be.
- The formulary shall provide customer service contact information.

Policies and Procedures for Pharmaceutical and Therapeutic Committees

The Department is seeking to determine whether P&T Committees generally comply with the federal requirements articulated at 45 C.F.R. 122(a)(3). In furtherance of the Department's regulatory role under Section 38a-591(e) of the 2016 Supplement to the Connecticut General

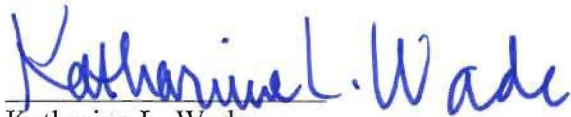
Statutes, the Commissioner requests that each insurer that files a drug formulary under the prior paragraph also provide a copy of the policies and procedures that govern its P&T Committee in its management of the formulary, with particular emphasis on the Committee's membership requirements, conflict of interest prohibitions and drug distribution and anti-discrimination processes.

Annual Filing

The Connecticut Insurance Department will conduct an annual survey of the carriers to gather information to complete the annual evaluation. The formulary survey form will be on the Insurance Department's website (www.ct.gov/cid) under the tab "Forms and Applications." The survey form may also be requested from the Life and Health Division at the address listed below. For plans effective for plan years beginning in 2017, such survey is due to the Department on September 1, 2016. For plans effective on and after January 1, 2018, such survey should be filed as part of the annual form filing process.

Questions

Please contact the Insurance Department Life and Health Division at cid.lh@ct.gov with any questions.



Katharine L. Wade
Insurance Commissioner