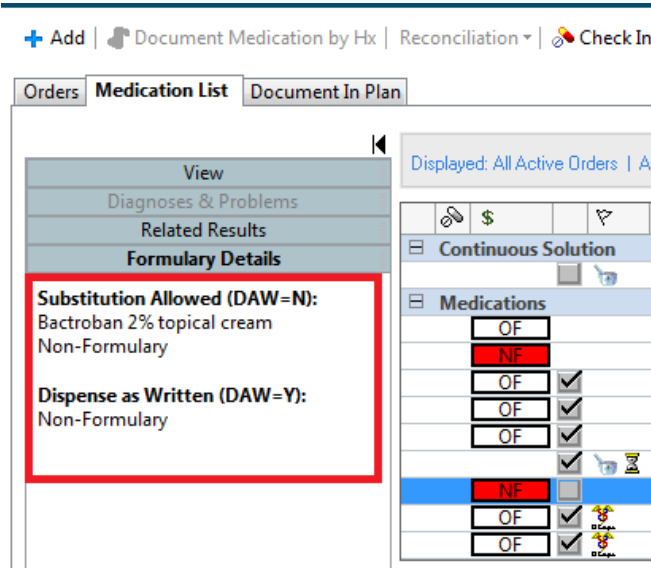


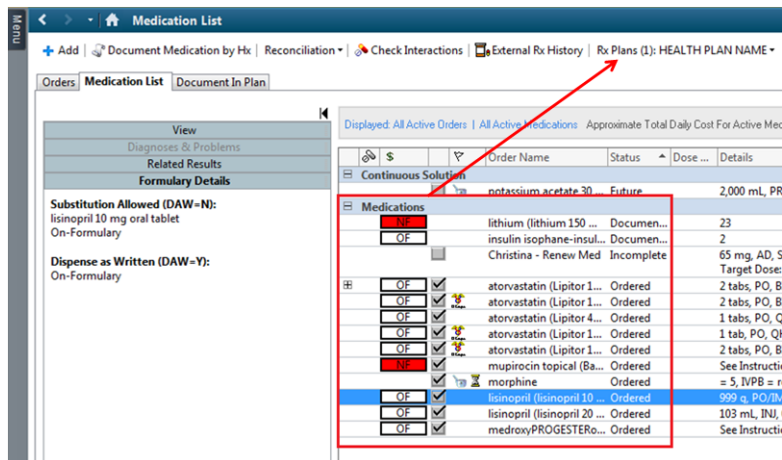
Viewing Medication Formulary Details

After selecting an appropriate prescription, the formulary details section opens on the left, displaying summary information regarding the formulary details for the selected medication. This view automatically opens when entering prescription details before signing the prescription.



If formulary coverage is not provided, text is displayed in the formulary details section stating that no formulary information is available.

When eligibility returns a positive response for an Prescription plan from Surescripts, formulary information for that Prescription plan is viewable to assist in determining medication coverage (such as co-pay information, prior authorization information, age/gender restrictions, quantity or step therapy information, and so on).



Formulary annotations are represented by the following based upon the formulary status returned by each PBM's coverage data.

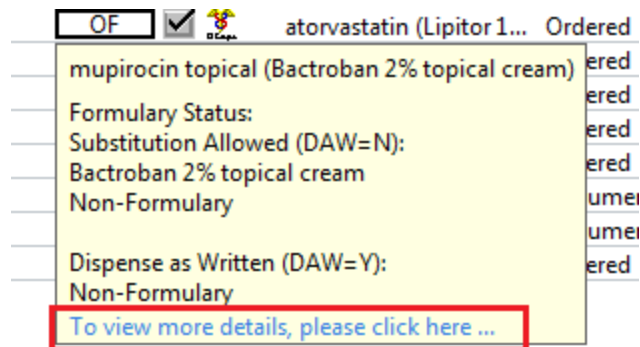
Statuses:

- **OTC** - Over the counter, not reimbursed.
- **X** - Not reimbursed.
- **NF** - Non-formulary.
- **OF** - On formulary.
- **Pref** (also displayed as **P**) - Preferred.
- **Pref+#** (also displayed as **P+#**) - The higher the number, the more preferred (1-99). For example, **Pref+3**, **Pref+15**, **Pref+4**.

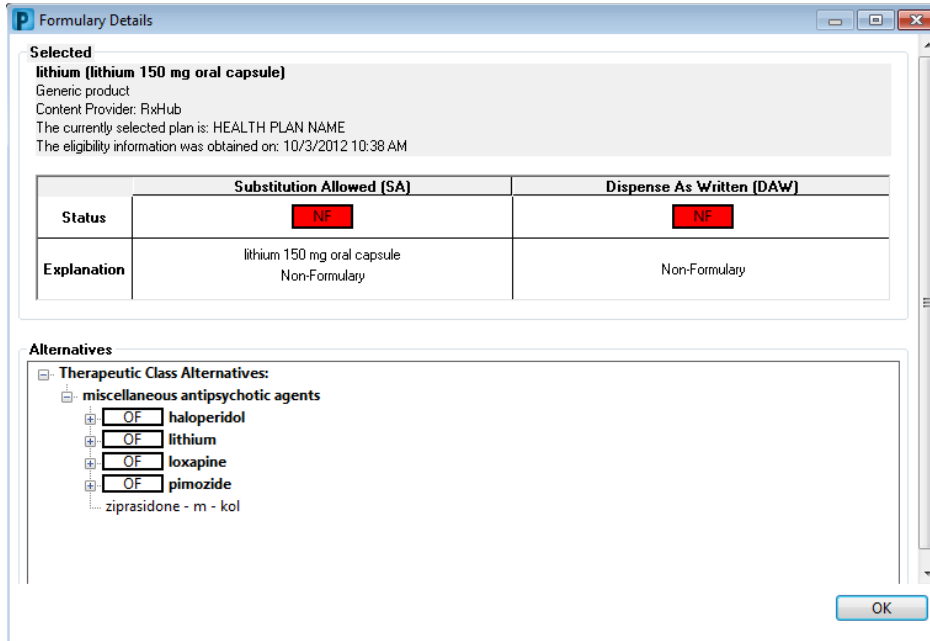
Co-pays:

- **T1, T2, T3** - Tiered Co-pay. Tier 1 of 3, Tier 2 of 3, or Tier 3 of 3. Tiered based co-pay (if provided by PBM) prefaces the statuses on the left. For example, **T2 OF**, **T1 P**, **T3 P+3**, **T2 P+10**.
- **###** - Monetary based co-pay. Co-pay values (if provided by PBM) preface the statuses on the left. For example, **\$10 OF**, **\$20 P**, **\$20 P+10**.
- **##%** - Percent based co-pay. Co-pay values (if provided by PBM) preface the statuses on the left. For example, **10% OF**, **20% P**, **20% P+10**.

To view the formulary details, position your pointer over the formulary icon and click **To View More Details, Please Click Here**.



The formulary detail window displays detail information regarding coverage for DAW/Sub Permitted outcomes as well as information such as co-pay information, costs, step therapy, age/gender limitations, and so on.



Formulary Details

Selected
lithium (lithium 150 mg oral capsule)
 Generic product
 Content Provider: RxHub
 The currently selected plan is: HEALTH PLAN NAME
 The eligibility information was obtained on: 10/3/2012 10:38 AM

	Substitution Allowed (SA)	Dispense As Written (DAW)
Status	NF	NF
Explanation	lithium 150 mg oral capsule Non-Formulary	Non-Formulary

Alternatives

Therapeutic Class Alternatives:

- miscellaneous antipsychotic agents
 - OF haloperidol
 - OF lithium
 - OF loxapine
 - OF pimozide
 - ziprasidone - m - kol

OK

Each Pharmacy Benefit Manager (PBM) or payer determines what data they provide within the standard. For example, CareMark is the only PBM providing tier level, and other PBMs might just indicate Covered or On Formulary versus Non Formulary.

The following are the potential details available within formulary details (if information is provided by PBM within their formulary file).

- Co-pay information (tier, dollar, percent, or combination)
- Payor links and information
- Age or gender restrictions
- Quantity limit restrictions
- Prior authorization restrictions
- Step therapy restrictions
- Medical necessity restriction
- Retail versus Mail order benefit
- Coverage text or notes