

Prescription Coverage Reviews



Sometimes a prescription isn't enough to determine if the State Health Plan will provide benefits. Express Scripts, the Plan's pharmacy benefits manager, might need more information to determine coverage. Coverage reviews rely on medical experts and research, and aim to provide drug safety. Reviews also encourage the use of lower-cost alternatives when possible. If the determination is made to cover the medication, you will pay the appropriate copayment.

Prior authorization

Some medications will be covered by the State Health Plan only if they are prescribed for certain uses and must be authorized in advance. Other medications may not be covered by the Plan if there are safe and effective lower-cost alternatives available.

Drug quantity management

The FDA has guidelines for safety and effectiveness that include quantity limits for certain medications. If you are prescribed a quantity of medication that does not fall within these guidelines, the Plan may cover a lesser quantity of the medication.

Step therapy

The step therapy process is designed to encourage the use of generics and over-the-counter drugs that are alternatives to some high volume, high-priced, brand-name drugs. If your doctor decides the higher-cost drug is needed, your doctor can request a coverage review.

Starting a coverage review

You can find out if a medication needs a coverage review by logging into your Express Scripts account at www.Express-Scripts.com or via the Express Scripts mobile app. Your pharmacist may also tell you that you need a review. Your doctor, pharmacist or you must contact Express Scripts at 855.612.3128 to begin the review process.