







Definition of Status

Icon	Status	Definition
	Tier 1	Tier 1 drugs have the lowest member cost share. These are typically generic drugs that offer the greatest value compared to others that treat the same conditions.
	Tier 2	Tier 2 drugs have a medium cost share. They may be preferred brand drugs, based on their effectiveness and value. Some are newer, more expensive generic drugs.
	Tier 3	Tier 3 drugs have a higher cost share. They generally include non-preferred brand and generic drugs. They may cost more than drugs placed on lower tiers that are used to treat the same condition. Tier 3 may also include drugs that were recently approved by the FDA.
	Tier 4	Tier 4 specialty drugs have the highest cost share and typically consist of specialty (brand and generic) drugs. They may cost more than drugs placed on lower tiers that are used to treat the same condition. Tier 4 may also include drugs that were recently approved by the FDA or specialty drugs used to treat complex, chronic conditions and may need special handling.
	Not Covered	Not Covered drugs include drugs specifically excluded from coverage by the terms of the plan. We will not provide any reimbursement for Not Covered drugs and you will have to pay out-of-pocket for these drugs. You may appeal our denial of coverage of a Not Covered drug.
	Non-Formulary	A non-formulary drug is not included on a plan's Drug List. You should discuss formulary alternatives with your physician. An exception process is available to request coverage for a non-formulary drug. Please refer to Notes & Restrictions above. If ST or PA symbol is listed, you can access the drug specific criteria that applies to a coverage request. Otherwise the general criteria and fax form found here will apply.