

Special Bulletin

For professional and facility providers

December 11, 2023

Medicare Part D: Most Generics Available for 100-Day Supply in 2024

Effective January 1, 2024, Highmark is making some changes to the medications on our Medicare Part D formularies. These changes will ensure the safe and effective use of prescription medications while ensuring they are affordable for our members.

Most members with Medicare Part D coverage will be able to receive up to a **100-day supply for generic medications** on Tier 1 and Tier 2 of Highmark's formularies. When appropriate, providers are encouraged to write prescriptions for this higher day supply. Some examples of Tier 1 or Tier 2 drugs eligible for a 100-day supply include Lisinopril, Metformin, and Atorvastatin.

If you are unsure whether the member has this benefit, or what tier the medication is, see our [Tip Sheet](#), which is accessible from the left menu on the Provider Resource Center (PRC) under **PHARMACY PROGRAM/FORMULARIES** and then click **Medicare Formularies**.

2024 Medicare Advantage Formulary Changes

Some medications may be removed from the formulary or have new restrictions in 2024. More information on the types of changes can be found in the Definition of Status and Definition of Restrictions sections of the online formularies, which are available on the PRC. Select **PHARMACY PROGRAM/FORMULARIES** from the left menu and then click **Medicare Formularies**.

In November, Highmark began sending letters to prescribing providers and members with more information about these changes. Once you receive your letter, you can either submit a coverage determination or request a different drug that Medicare Part D would cover.

Submitting Coverage Determination Requests

If your patients are still taking these affected medications, please consider changing them to a covered formulary alternative or request a coverage determination, so that they can continue receiving the same medication.

Coverage determination requests for the 2024 plan year can be submitted through CoverMyMeds, which is available through Highmark's provider portal — either [Availity](#)[®] or [NaviNet](#)[®].

Requests can also be made via [phone](#) and fax. To access the request form, visit the Provider Resource Center. From the left menu, select **FORMS > Pharmacy Prior Authorization Forms > Prescription**

Drug Medication Request Form. Once a coverage determination is submitted, Highmark will review the request and notify you and the member of the decision.

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