

## **Employer-only Plan Formulary Submission Questions and Answers**

The purpose of these questions and answers is to provide formulary submission guidance for PDPs, MA-PDs, or Cost Plan sponsors offering employer-only plans with prescription drug coverage.

- Q1.** If a plan intends to use the same formulary for their employer-only plan(s) that had previously been submitted for the non-group market, will additional formulary(s) need to be submitted to CMS by June 6, 2005?
- A1.** No. The formulary does not need to be re-submitted. However, please note that in this scenario, it is essential that upon bid submission, the employer-only plan bid must be associated with the existing non-group formulary in HPMS.
- Q2.** If a plan intends to use a different (where any parts of the formulary are scaled back) formulary for the employer-only plan(s) than what had been submitted for the non-group market, will the plan need to submit that new formulary to CMS for review?
- A2.** Yes. The new formulary will need to be submitted to CMS for review by June 6, 2005.
- Q3.** If a plan intends to only enhance an existing non-group formulary for use in employer-only plan(s) by adding new drugs or changing the cost sharing to lower cost sharing, will a new formulary submission be required by June 6, 2005?
- A3.** No. No new submission will be required. However, these formularies may not be modified to remove any drugs from the list, or to add any restrictions or limitations. CMS will require an additional provision in the Part D contract certifying that the employer-only plan formularies used comply with these guidelines. Please note that upon bid submission, the bid would be tied to the base formulary.
- Q4.** If subsequent to employer-only plan formulary submission and approval, the plan would like to implement additional formularies which are only enhanced and not scaled back in any way, do these new formularies need to be submitted to CMS for review?
- A4.** No. No new submission will be required. However, these formularies may not be modified to remove any drugs from the list, or to add any restrictions or limitations. CMS will require an additional provision in the Part D contract certifying that the employer-only plan formularies used comply with these guidelines. Please note that upon bid submission, the bid would be tied to the base formulary.