

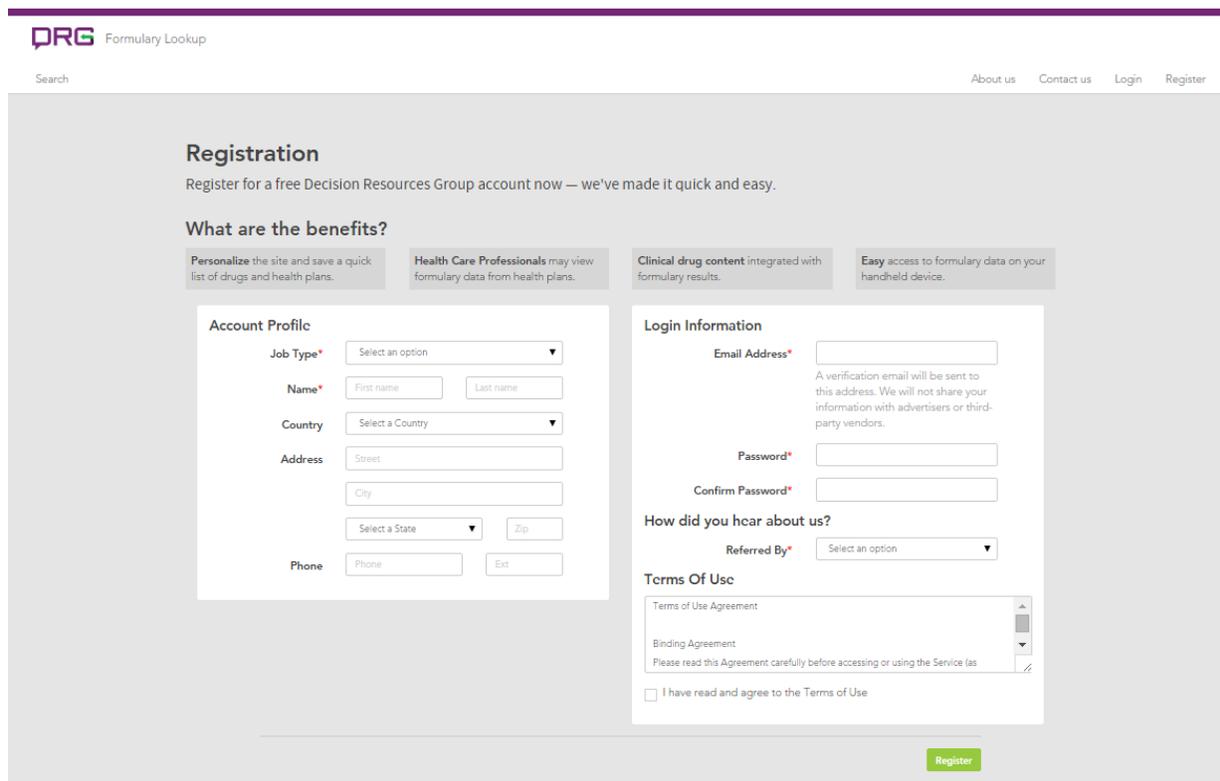
DRG Formulary Lookup Navigation Guide

Logging In

DRG has provided a new web-based Formulary Lookup tool that is responsive to all viewing devices (PC, iPhone, Tablet, etc.). You can access this site at <https://lookup.decisionresourcesgroup.com>. Users can also download an iPad App version from the Apple store (<https://itunes.apple.com/us/app/drg-lookup/id1018974045?ls=1&mt=8>).

Registering for an account is a quick process that requires you to provide some basic information. You will then receive an email for the address that was registered to help validate your account. Once you click the link to activate your account, you will enable additional functionality found on the site. The login and password information can be used each time you access the site.

To retrieve your username and/or password, you can access the Customer Support section of the Login screen. If you continue to have problems logging into the site, contact our support team at questions@teamdrg.com and a representative will contact you with your login credentials.



The screenshot shows the 'Registration' page of the DRG Formulary Lookup tool. The page has a purple header with the DRG logo and 'Formulary Lookup' text. A search bar is located on the left, and navigation links for 'About us', 'Contact us', 'Login', and 'Register' are on the right. The main content area is titled 'Registration' and includes a sub-header 'What are the benefits?' with four boxes: 'Personalize the site and save a quick list of drugs and health plans.', 'Health Care Professionals may view formulary data from health plans.', 'Clinical drug content integrated with formulary results.', and 'Easy access to formulary data on your handheld device.' Below this are two main form sections: 'Account Profile' and 'Login Information'. The 'Account Profile' section includes fields for Job Type (dropdown), Name (First and Last name), Country (dropdown), Address (Street, City, State dropdown, Zip), and Phone (Phone, Ext). The 'Login Information' section includes Email Address (with a note about verification), Password, Confirm Password, How did you hear about us? (dropdown), and Referred By (dropdown). At the bottom of the forms is a 'Terms Of Use' section with a checkbox for 'I have read and agree to the Terms of Use' and a green 'Register' button.

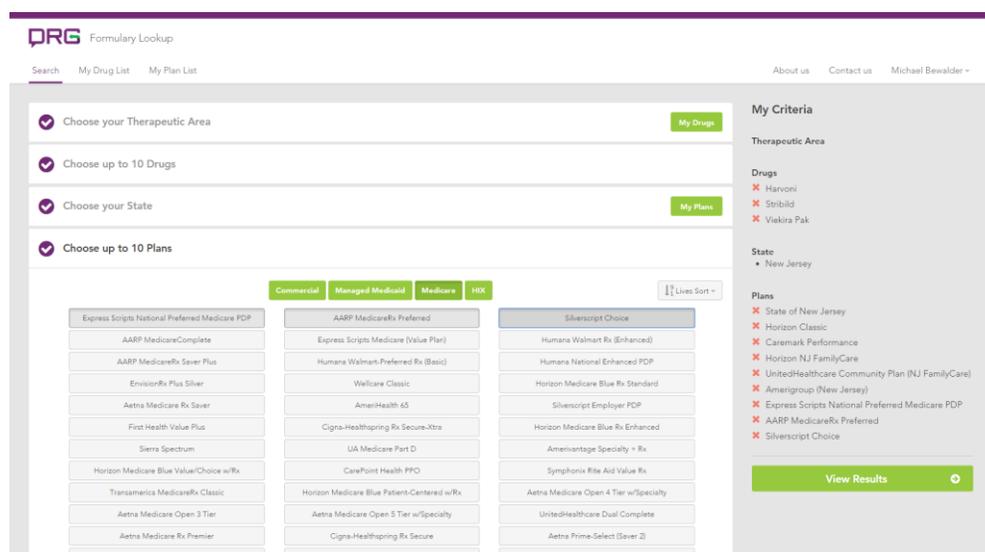
If you chose not to register, you can continue to search for drug information, however, you will be limited to viewing 1 drug and formulary detail for up to 5 plans for each search.

Navigating the Site

Once you are able to access the site, the process to finding formulary information is a few steps away. Users will:

- Identify the therapeutic area
- Identify the drug(s)
- Select the appropriate geography
- Select the health plan(s)
- View the results

You navigate through each selection by clicking on your desired option and then clicking the bar indicating the next step. Each step will expand to provide different options. Drugs can be sorted by clicking on a letter across the menu bar to view all drugs starting with that letter within the appropriate therapeutic class. The state selection will provide a dropdown of all available options. And the plan selection will provide a breakout (sorted by either alphabetically or by pharmacy lives in the geography you selected) by grouped plan types: Commercial, Medicaid, Medicare, and Health Insurance Programs (HIX). Once you have completed each step, you can click the “View Results” button from the right menu. [“View Results” may display at the bottom of the page depending on the device being used.]



As a registered user, you can take advantage of a few additional options. First, once registered, the number of drugs you can select will go from 1 to 10 and the number of health plans you can view on the results screen will go from 5 to 10.

Furthermore, registered users also have the ability to create and save custom drug and plan lists. From the “My Drugs List” and “My Plan List” buttons in the top menu screen, users can access and create personalized lists of drugs and plans they wish to see for quick access for future needs, while expanding the list of drugs across therapeutic areas and plans across different geographies. To add new drugs/plans, users would click the appropriate selections to save new entries. Users would delete a drug/plan by unselecting that plan.

Once the My Drugs and My Plans have been saved, you will also see them as options when creating a new Search request. There will be a “My Drugs” and “My Plans” button within the basic steps as options to choose the custom grouped list.

Displaying the Results

Formulary Lookup

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Search Results

[Terms and Definitions](#)

Health Plan Name	Provider	Plan Type	Coverage
Harvoni ⓘ			
UnitedHealthcare Community Plan (NJ FamilyCare)	UnitedHealthcare Community Plan (NJ)	Commercial (Medicaid)	Tier 2 Preferred PA
Horizon Classic	Horizon Blue Cross Blue Shield	Commercial (BCBS)	Tier 2 Preferred PA QL
Caremark Performance	CVS/Caremark	PBM	Tier 2 Specialty
Horizon NJ FamilyCare	Horizon Blue Cross Blue Shield	Commercial (Medicaid)	Tier 2 Preferred PA QL
Amerigroup (New Jersey)	Amerigroup	Commercial (Medicaid)	Tier 2 Preferred PA QL
State of New Jersey ⓘ			
Coverage for New Jersey ✕			
Commercial Covered: 82.38% Preferred: 47.88%	Medicare Covered: 100.00% Preferred: 20.00%	Medicaid Covered: 100.00% Preferred: 100.00%	HIX Covered: 95.01% Preferred: 87.56%
			ripts
		Medicare PDP	Tier 3 Non-Preferred PA
		Medicare PDP	Tier 4 Specialty PA
		Medicare PDP	Tier 5 Non-Preferred PA QL
		Medicare PDP	NC Not Covered
Stribild ⓘ			
UnitedHealthcare Community Plan (NJ FamilyCare)	UnitedHealthcare Community Plan (NJ)	Commercial (Medicaid)	Tier 2 Preferred PA
Horizon Classic	Horizon Blue Cross Blue Shield	Commercial (BCBS)	Tier 2 Preferred QL
Caremark Performance	CVS/Caremark	PBM	Tier 2 Specialty
Horizon NJ FamilyCare	Horizon Blue Cross Blue Shield	Commercial (Medicaid)	Tier 2 Preferred PA QL
Amerigroup (New Jersey)	Amerigroup	Commercial (Medicaid)	Tier 2 Preferred QL ST
Express Scripts National Preferred Medicare PDP	Express Scripts	Medicare PDP	Tier 2 Preferred

My Criteria

Therapeutic Area

Drugs

- Harvoni
- Stribild
- Viekira Pak

State

- New Jersey

Plans

- State of New Jersey
- Horizon Classic
- Caremark Performance
- Horizon NJ FamilyCare
- UnitedHealthcare Community Plan (NJ FamilyCare)
- Amerigroup (New Jersey)
- Express Scripts National Preferred Medicare PDP
- AARP MedicareRx Preferred
- Silverscript Choice

⏪ [Back To Search Filters](#)

The results screen will show the list of drugs you selected in a purple shaded row. All of the plans selected will display directly below each drug. The formulary coverage for all plans selected will display under the “Coverage” column. In addition, if you click on the information button (“i” icon), you can also display the coverage information for the product within the geography selected. (Note: because “My Plans” allows users to select plans from different geographies, the coverage calculations would not be available on the results screen when using that feature.)

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Glossary

Restriction Definitions:

PA - Prior Authorization. Drugs that require prior authorization. This restriction requires that specific clinical criteria be met prior to the approval of the prescription.

QL - Quantity Limits. Drugs that have quantity limits associated with each prescription. This restriction typically limits the quantity of drug that will be covered.

ST - Step Therapy. Drugs that have step therapy associated with each prescription. This restriction typically requires that certain criteria be met prior to approval for the prescription.

Formulary Status Definitions:

Preferred – The status assigned to a drug based on the benefit design of the chosen formulary. This status is usually associated with the lowest tier for a brand or generic drug; or is a designation given to a drug following review by a Pharmacy Committee.

Covered – The status assigned to a drug that is not reviewed for inclusion on the Preferred Drug List but is covered by the state.

Non-Preferred – The status assigned to a drug based on the benefit design of the chosen formulary. This status is usually associated with the highest tier for a brand or generic drug; or is a designation given to a drug following review by a Pharmacy Committee.

Specialty – The status given to a specialty product when it is covered with a copay/co-insurance dedicated to specialty drugs. Specialty drugs are usually injectable, require special handling, or are expensive.

Medical – The status given to a drug covered under the medical benefit.

Not Covered – Drugs that are not covered by the plan.

Not Available – Formulary data for this drug/health plan are not available.

Plan Types:

Commercial – Commercial Insurers, Employers, Municipal Plans, PBMs, and Unions

Medicare – Prescription Drug Plans, Medicare Advantage Plans, and Special Needs

Medicaid – Managed Medicaid and State Medicaid

HIX – State Health Exchanges