Health Alliance Plan®
by Henry Ford Health

2027 Medicare Part D Formulary and Benefit Design

The annual out of pocket maximum is **$2,400** (in 2026 it was $2,100).

Copay Structure

The Medicare Part D Structure consists of three stages:

Stage 1: If a member's plan has a deductible, it must be met before entering stage 2.
Stage 2: The member will have a copay or coinsurance until the $2,400 out-of-pocket maximum is reached.
Stage 3: Once the $2,400 out-of-pocket maximum is reached, members pay nothing for prescriptions for the rest of the year.

Preferred Pharmacies

Recommend Pharmacy Advantage Specialty Pharmacy with free in-home delivery where patients can get 100-day supplies of tier 1 and 90-day supplies of **tier 2** drugs for **no cost**. If retail pharmacy is necessary, always use a preferred pharmacy like Henry Ford outpatient pharmacies, Costco, Walgreens, or Kroger to name a few. At a standard pharmacy the copay/coinsurance may be higher. **Note: CVS is still out of network.**

Medications Being Removed from the Medicare Formulary

Below are some commonly used drugs that will be removed from the Medicare Formulary. This is not an all-inclusive list of changes. Please consider prescribing another drug from our Formulary to treat your patient's medical condition. For a complete list of drugs, you can review the 2027 Health Alliance Plan Medicare formulary. Visit **hap.org/providers**, and select *Formulary drug list* under *Contracted Provider resources*.

If one of your Health Alliance Plan Medicare Advantage patients needs one of the medications listed and can't take any alternative option, you can request an exception. Requests can be submitted by one of the methods below.

- Online: **covermymeds.com**
- Call: **(313) 664-8940**, option 1
- Fax: **(313) 664-8045**

Drug Name	Alternatives
Liraglutide	Mounjaro, Trulicity, Ozempic
Xigduo	Dapagliflozin & metformin
Synjardy & Synjardy XR	Dapagliflozin and metformin or metformin ER
Stelara	Yesintek, Hadlima
Prolia	Enoby
Xgeva	Xtrenbo
Carisoprodol	tizanidine or baclofen
Dantrolene	tizanidine or baclofen
Methocarbamol	tizanidine or baclofen
Entresto	Sacubitril/valsartan (generic)
Xarelto	Eliquis (note rivaroxaban 2.5 mg covered with quantity limit)
Vyndamax/Vyndaqel	Attruby
Gammaked/Privigen	Gammagard/Gamunex-C

Medications with Tier Changes

Below are some drugs that will have changes in their Formulary cost-sharing tier. This is not an all-inclusive list of changes.

Drug Name		Tier Change
• Auvelity • Biktarvy • Caplyta • Dovato Tivicay • Fanapt • Genvoya	• Juluca • Odefsy • Opsumit • Raldesy • Rexulti • Symtuza	Changed to tier 5 Note: these drugs went from Tier 4 to Tier 5 which is a lower cost share. However, tier 5 is limited to a 30-day supply.
• Vraylar	• Xifaxan	Changed to tier 3 (lowered)
• Darifenacin	• Trospium	Changed to tier 2 (lowered)
• Donepezil ODT	• Donepezil 23 mg	Changed to tier 1 (lowered)

GLP-1 Changes

Reminder! GLP-1 drugs are not covered for weight loss or prediabetes (A1c never exceeding 6.5). **All GLP-1 drugs require a prior authorization.** Ozempic is now on Formulary at the lowest cost share to members and is available as a tablet.

- Mounjaro, Trulicity and Ozempic are tier 3 with prior authorization. Members with type 2 diabetes must meet the following criteria:
  - Recent A1c (within the past 6 months)
- Wegovy also requires prior authorization. Members with liver disease or MACE require the following:
  - Evidence of noncirrhotic metabolic dysfunction-associated steatohepatitis (MASH)
  - Evidence of established cardiovascular disease and current weight.

Medicare Prescription Payment Plan (M3P)

Medicare Advantage members can enroll in The Medicare Prescription Payment Plan. The plan works with the members' current drug coverage to help manage out-of-pocket Medicare Part D drug costs. While it doesn't lower drug costs, it does spread costs across the calendar year (January-December). Member participation is voluntary.

Members with a single prescription costing more than $600 per month or drug costs exceeding $2000 in the last year might benefit from this payment plan. Members who are not likely to benefit from this plan:

- Have low drug costs
- Have a low-income subsidy
- Are using patient pharmaceutical assistance programs

To find out more about this new payment plan or to enroll, your Medicare Advantage patients can:

- Visit: **https://express-scripts.calculator.m3p.health/**
- Call: **(866) 845-1803**, 24 hours a day 7 days a week

Members can also view a video explaining M3P:
https://www.medicare.gov/prescription-payment-plan