

Table: Analysis of Part D formularies in Q3, 2023 for [ten drugs selected for Medicare Drug Price Negotiation in 2026](#) (HHS announcement August 29, 2023)

Drug	Most Common Tier/ Cost Sharing (PDP) ¹	% of PDP plans with this access	% with PA/ SE	Most Common Tier/ Cost Sharing (MA-PDP)	% of MA- PD plans with this access	% with PA/SE	Percent of formularies with this drug
Co-pay formulary most common (not specialty drugs)							
Eliquis	Tier 3/\$45	62% ²	0%	Tier 3/\$45	93%	0%	100%
Entresto	Tier 3/\$45	66%	0%	Tier 3/\$45	97%	0%	100%
Farxiga	Tier 3/\$46	47%	0%	Tier 3/\$45	80%	<1%	90%
Fiasp	Tier 3/\$46	60%	0%	Tier 3/\$45	95%	<1%	52%
Januvia	Tier 3/\$45	60%	0%	Tier 3/\$45	96%	<1%	87%
Jardiance	Tier 3/\$45	58%	0%	Tier 3/\$45	96%	<1%	99%
Novolog	Tier 3/\$46	52%	0%	Tier 3/\$46	88%	<1%	60%
Xarelto	Tier 3/\$45	66%	<1%	Tier 3/\$45	95%	<1%	100%
Co-insurance most common (specialty drugs)							
Enbrel	Tier 5/27%	100%	100%	Tier 5/31%	98%	99%	100%
Imbruvica	Tier 5/27%	100%	100%	Tier 5/31%	98%	99%	100%
Stelara	Tier 5/26%	100%	100%	Tier 5/31%	98%	100%	100%

Total Plan and Formulary counts are based on the population of non- Medicare Advantage Special Needs Plans (SNPs), non-regional, and coverage level 1 plans drawing the data from the [CMS quarterly formulary files](#). We evaluated 324 formularies from 4,721 Medicare Part D Plans (MD-PD and PDP) in Q3 2023. The Q4 data was available but had 25 fewer formularies and 118 fewer plans relative to the prior three quarters, so we elected to analyze the Q3 data on the assumption that the Q4 file had missing information. All National Drug Codes for the ten drugs were selected.

This population excludes records from SNPs, regional contracts (where the contract ID began with R) were filtered out, and non-30-day supply costs. The distribution of each type of access was based on the number of unique plans with that type of formulary (eg, third-tier co-pay). A unique plan had a distinct contract type, brand, cost type, and tier level.

¹ Mean, unweighted co-pay average across all formularies listing this drug, rounded to nearest dollar

² Meaning when this drug is on formulary in a PDP 62% of the time it was on co-pay 3rd tier, otherwise it had coinsurance or was on a different co-pay tier