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NETWORK AND FORMULARY CHECK

HOUSEHOLD	PLAN A	PLAN B	PLAN C

Doctors, hospitals and facilities we use

Provider	Who sees them	Specialty	A	B	C	Notes (tier, new patients)
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	
			❑	❑	❑	

Prescriptions

Medication (generic name)	Who	Monthly qty	Plan A tier / cost	Plan B tier / cost	Plan C tier / cost

CHECKED FOR EACH PLAN

- ❑ Provider directory searched; office called to confirm
- ❑ Formulary checked for each drug (prior authorization, step therapy)
- ❑ Preferred pharmacy in network, mail order available
- ❑ Nearest in-network hospital and urgent care identified
- ❑ Out-of-network coverage and balance billing rules understood
- ❑ Telehealth provider and cost noted