



# STATE OF CONNECTICUT

## INSURANCE DEPARTMENT

BULLETIN NO. HC-113-24

May 31, 2024

**TO: ALL HEALTH INSURANCE COMPANIES AND HEALTH CARE CENTERS  
AUTHORIZED TO CONDUCT BUSINESS IN CONNECTICUT**

**RE: ANNUAL FILING OF FORMULARIES**

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This Bulletin repeals and replaces Bulletin HC-113-19, dated February 6, 2019, in order to revise the due date for the annual filing.

In order to ensure consistency and transparency in the marketplace the Connecticut Insurance Department (“CID”) requires all health insurance companies and health care centers authorized to conduct business in Connecticut (collectively “carriers”) to file their prescription drug formularies for all plans pursuant to Sections 38a-591(e), 38a-481 and 38a-513 of the Connecticut General Statutes, regardless of whether or not such plans are subject to the Patient Protection and Affordable Care Act, P.L. 111-148, as amended from time to time, and regulations adopted thereunder. The purpose of this bulletin is to set forth requirements and minimum standards for prescription drug formularies filed with the CID, and to solicit information relating to the policies and procedures for carriers’ Pharmacy and Therapeutics Committees’ (“P&T Committees”) development of such formularies. Each drug formulary submitted to the CID must comply with the minimum standards for drug formularies for individual or group health insurance policies as set forth Sections 38a-481-11 or 38a-513-6 of the Regulations of Connecticut State Agencies, respectively.

### **Policies and Procedures for P&T Committees**

The CID shall determine whether P&T Committees generally comply with the federal requirements set forth in 45 C.F.R. 156.122(a)(3) as well as Sections 38a-481-12 or 38a-513-7 of the Regulations of Connecticut State Agencies for individual or group health insurance policies, respectively. In furtherance of the CID’s regulatory role outlined in Section 38a-591(e) of the Connecticut General Statutes, each carrier that files a drug formulary in accordance with this Bulletin shall also provide the policies and procedures that govern its P&T Committee with respect to the management of the formulary with particular emphasis on the P&T Committee's membership requirements, conflict of interest prohibitions, drug distribution process, and anti-discrimination policy.

### **Annual Filing**

The CID shall conduct an annual survey of carriers to gather information to complete an annual evaluation of prescription drug formularies as required by Sections 38a-481-10 and 38a-513-5 of the Regulations of Connecticut State Agencies for individual and group health insurance policies, respectively. The formulary survey form is on the Insurance Department's website ([www.ct.gov/cid](http://www.ct.gov/cid))

[www.ct.gov/cid](http://www.ct.gov/cid)

P.O. Box 816 Hartford, CT 06142-0816

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under “Companies” and then “Forms and Applications.” The survey form may also be requested from the Life and Health Division at the e-mail address listed below. The completed survey shall be submitted by each carrier to the CID no later than October 1, 2024 and no later than October 1 annually thereafter.

**Questions**

Please contact the Insurance Department Life and Health Division at [cid.lhcompliance@ct.gov](mailto:cid.lhcompliance@ct.gov) with any questions.



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Andrew N. Mais  
Insurance Commissioner