

Department of Health and Human Services  
**Office of Inspector General**



Office of Evaluation and Inspections

**DATA SNAPSHOT**

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December 2025 | OEI-05-25-00350

# **Trends in Dual-Eligible Enrollees' Access to Drugs Under Part D, 2011-2025**



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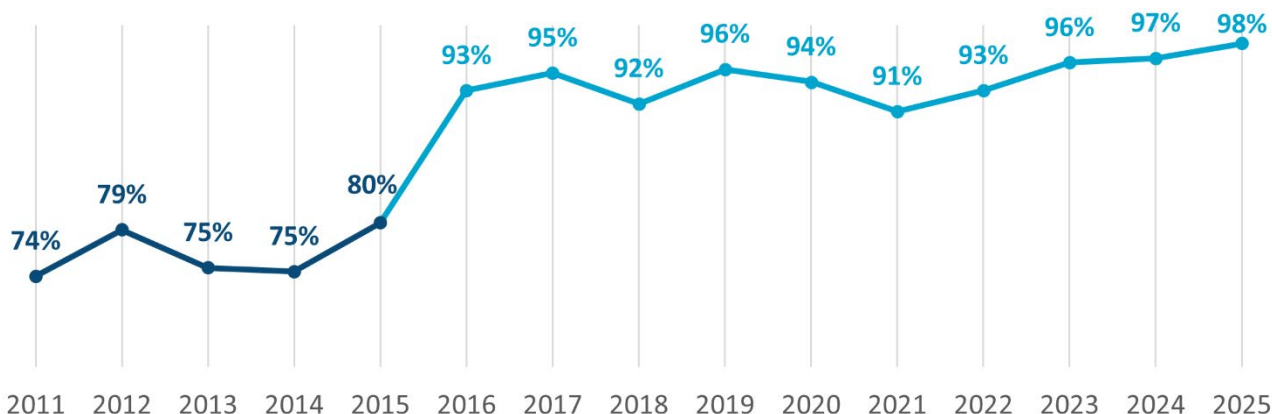
## Trends in Dual-Eligible Enrollees' Access to Drugs Under Part D, 2011-2025

### Why OIG Did This Review

- For dual-eligible enrollees—that is, people enrolled in both Medicare and Medicaid—access to prescription drugs is particularly important. Overall, they have very low incomes and—because they are more likely to be in poorer health than other people enrolled in Medicare—tend to use more Medicare services.<sup>1</sup>
- After prescription drug coverage for dual-eligible enrollees shifted from Medicaid to Medicare Part D, Congress mandated that OIG study whether Part D formularies cover prescription drugs commonly used by dual-eligible enrollees.<sup>2, 3</sup> OIG has produced an annual report pursuant to this mandate for the last 15 years (from 2011 to 2025).
- In this data snapshot, we present trends across our annual analyses of Part D formulary coverage of the top 200 drugs used by dual eligibles to summarize our findings for Congress and the public.

### What OIG Found

- **Most Part D plan formularies have covered almost all of the drugs that dual-eligible enrollees commonly use since 2011, and coverage has been consistently high over the last decade.**



- **The number of commonly used drugs covered by all formularies steadily increased since 2011, and only a small number of commonly used drugs were not covered by most formularies.**

### What OIG Concludes

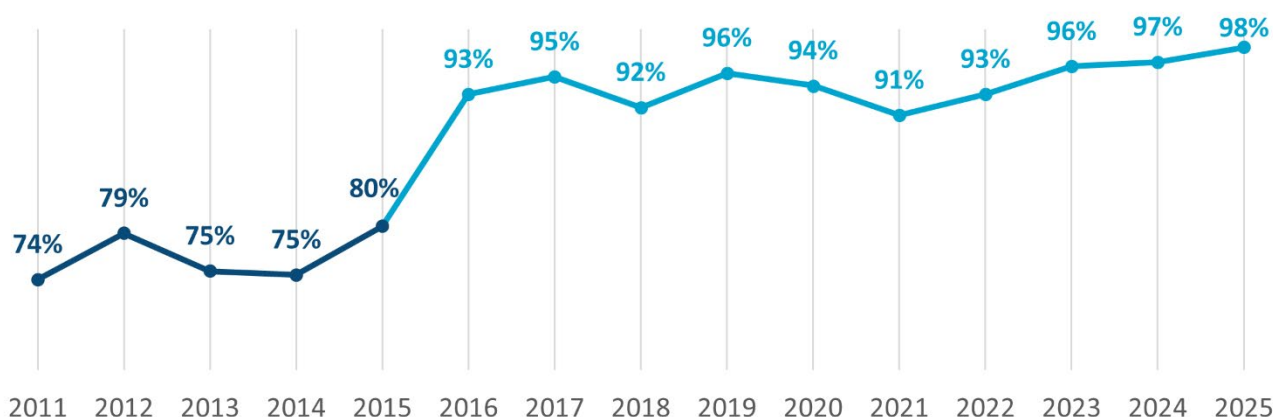
In general, over the last 15 years dual-eligible enrollees had—and continue to have—access to the drugs they most commonly use, regardless of the Part D plan in which they enroll.

## Results

### Most Part D plan formularies have covered almost all of the drugs that dual-eligible enrollees commonly use since 2011, and coverage has been consistently high over the last decade

Each year for our mandated analysis, we first identified the top 200 drugs that dual-eligible enrollees most commonly reported using as part of an annual Medicare survey, and then we assessed how many Part D formularies covered those drugs. One key measure we have presented in our annual reports is the percentage of Part D formularies that cover almost all of the drugs that dual-eligible enrollees most commonly use. This percentage has been high since we began our analysis, and particularly so over the last decade, with over 90 percent of formularies covering almost all of the drugs each year from 2016 to 2025. For the trend analysis in this data snapshot, we have defined formulary coverage of “almost all” commonly used drugs as coverage of at least 94 percent of the top 200 drugs that dual-eligible enrollees report using (excluding those drugs that we removed from our analysis because they were not covered by Part D).<sup>4</sup>

**Exhibit 1: A high percentage of formularies covered almost all of the top 200 drugs that dual-eligible enrollees commonly use from 2011 to 2025, with over 90 percent of formularies covering almost all commonly used drugs since 2016.**



Source: OIG analysis of formulary data, 2011-2025.

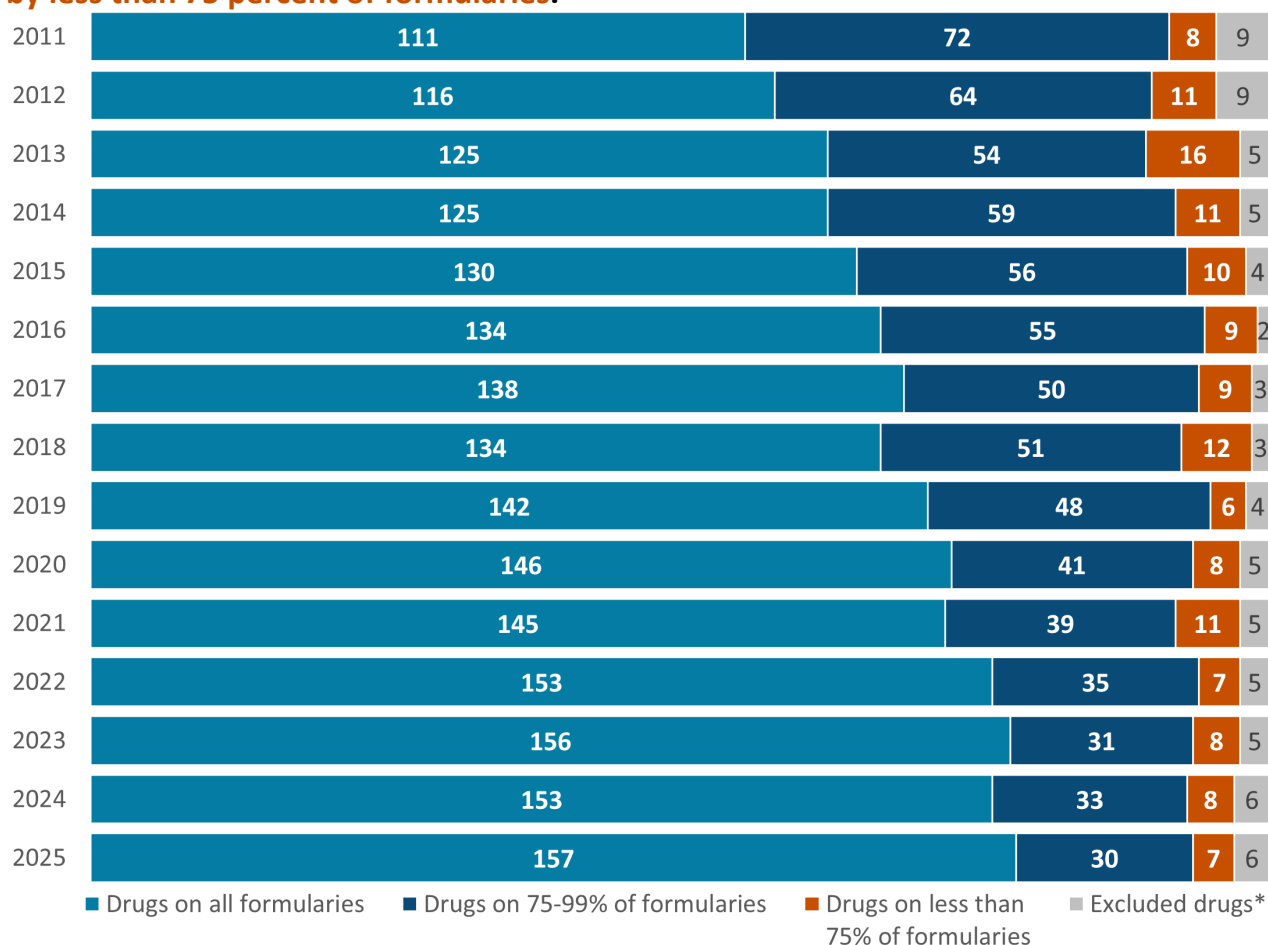
See Appendix A for the full distribution of formulary coverage each year, from 2011 to 2025.

## Results (continued)

### The number of commonly used drugs covered by all formularies has steadily increased since 2011, and only a small number of commonly used drugs were not covered by most formularies

In our annual analyses, we also calculated the percentage of formularies that covered each of the top 200 drugs that dual-eligible enrollees most commonly use. Since we began our analysis, the number of drugs that were covered by all formularies steadily increased. Additionally, the number of drugs that were covered by less than 75 percent of formularies remained consistently low—and all formularies covered alternatives in the same therapeutic classes as those drugs, as the [Centers for Medicare & Medicaid Services \(CMS\)](#) requires.<sup>5</sup>

**Exhibit 2: A growing number of drugs that dual-eligible enrollees commonly use were covered by all formularies from 2011 to 2025, and few commonly used drugs were covered by less than 75 percent of formularies.**



Source: OIG analysis of formulary data, 2011-2025.

\*Each year, we removed a small number of drugs from our analysis because they were not covered by Part D. These were often over-the-counter drugs or vitamins/minerals.

## Results (continued)

Dual-eligible enrollees have **several options** if their formularies do not cover specific drugs.

- Dual-eligible enrollees have one chance per month to **switch to plans** that cover the prescription drugs they require.<sup>6</sup>
- Dual-eligible enrollees can use an **exceptions and appeals** process to request coverage of nonformulary drugs by their plans.<sup>7</sup>
- Dual-eligible enrollees can work with their prescribers to find an **alternative drug** covered by their plans.
- Dual-eligible enrollees can **pay out of pocket** for the noncovered drugs.

## What OIG Concludes

OIG's findings over the last 15 years demonstrate that, in general, dual-eligible enrollees had and continue to have access to the drugs they most commonly use via their Part D plan formularies. Additionally, our trend analysis shows that formulary coverage of these drugs has improved over time, with over 90 percent of formularies covering almost all drugs since 2016, a steadily growing number of drugs covered by all formularies, and a consistently low number of drugs covered by less than 75 percent of formularies.

# Methodology

## Data Sources

Each year, from 2011 to 2025, we used the following data sources:

- The most current available **Medicare Current Beneficiary Survey (MCBS) Cost and Use data**, to identify the drugs that dual-eligible enrollees most commonly report using; and
- The most current available **First DataBank National Drug Data File**, to get drug product information for the drugs identified from the MCBS data.

## Data Analysis

Each year, from 2011 to 2025, we performed the following analyses:

- **We identified the drugs that dual-eligible enrollees most commonly use.** To do this, we first created a list of all drugs reported by dual-eligible enrollees surveyed in the MCBS, excluding territories, and collapsed this to a list of drugs based on their active ingredients. We then ranked the drugs by frequency of utilization, weighting the drug-event information from MCBS by sample weight. Finally, we selected the 200 drugs with the highest utilization, and removed drugs that were not covered under Part D.
- **We determined whether Part D plan formularies covered the commonly used drugs.** To do this, we first collected from CMS the most current available formulary and plan data for Part D plans operating in the year. We then analyzed the unique formularies to determine how many of the commonly used drugs each formulary included, by active ingredient. Finally, we converted the number of covered drugs into a percentage for each formulary.
- **We calculated formulary coverage measures for each of the commonly used drugs.** Specifically, we determined the number of drugs covered by 100 percent, 75-99 percent, and less than 75 percent (where there was often a steep dropoff in the distribution) of formularies.

To analyze trends across our results from 2011 to 2025, we also performed the following analysis:

- **We calculated a standardized percentage of formularies that covered almost all commonly used drugs each year.** Because we used slightly different thresholds to define coverage of “almost all” commonly used drugs across years—and did not report this as a singular metric in earlier reports—we standardized our results by identifying the total number of formularies that covered at least 94 percent of the commonly used drugs each year. We then divided by the total number of formularies in the year to arrive at the percentage of formularies that covered almost all commonly used drugs.

## Standards

We conducted this study in accordance with the *Quality Standards for Inspection and Evaluation* issued in 2020 by the Council of the Inspectors General on Integrity and Efficiency.

## Appendix A

### Distribution of Formularies by Commonly Used Drug Coverage Rate, 2011-2025

Part D plan formularies from 2011 to 2025 included between 82 and 100 percent of the drugs that dual-eligible enrollees commonly use. See details by year below. Formularies that covered “almost all” drugs are the total number of formularies that covered **at least 94 percent** of the commonly used drugs each year.

2011

Total Number of Formularies: 249

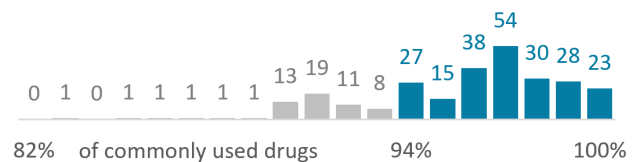
Number (percentage) of formularies that covered almost all drugs: **185 (74%)**



2012

Total Number of Formularies: 272

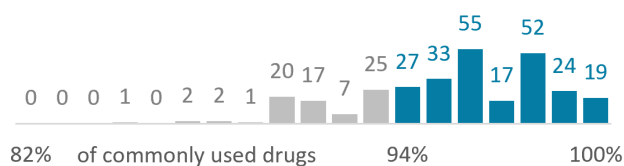
Number (percentage) of formularies that covered almost all drugs: **215 (79%)**



2013

Total Number of Formularies: 302

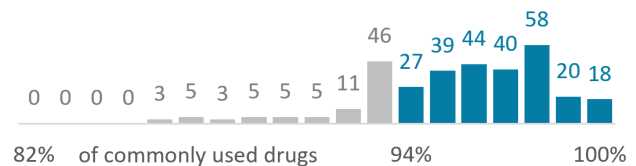
Number (percentage) of formularies that covered almost all drugs: **227 (75%)**



2014

Total Number of Formularies: 329

Number (percentage) of formularies that covered almost all drugs: **246 (75%)**

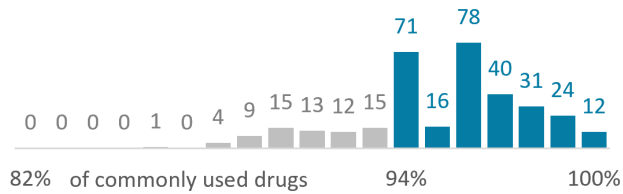


## Appendix A (continued)

2015

Total Number of Formularies: 341

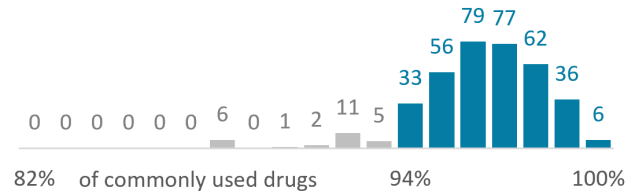
Number (percentage) of formularies that covered almost all drugs: **272 (80%)**



2016

Total Number of Formularies: 374

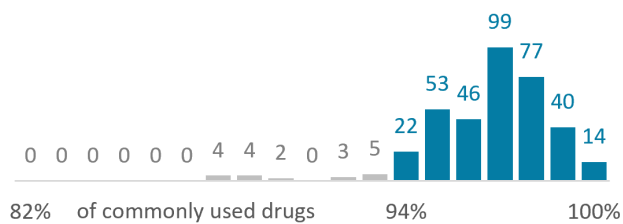
Number (percentage) of formularies that covered almost all drugs: **349 (93%)**



2017

Total Number of Formularies: 369

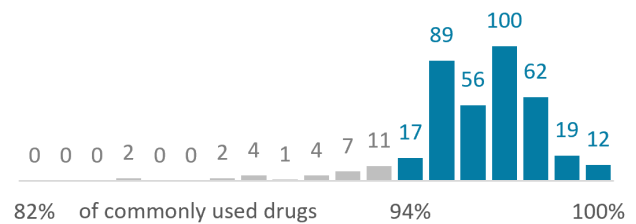
Number (percentage) of formularies that covered almost all drugs: **351 (95%)**



2018

Total Number of Formularies: 386

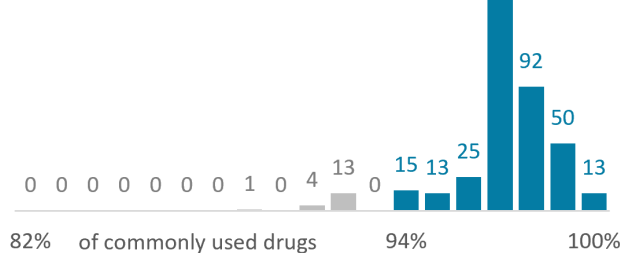
Number (percentage) of formularies that covered almost all drugs: **355 (92%)**



2019

Total Number of Formularies: 401

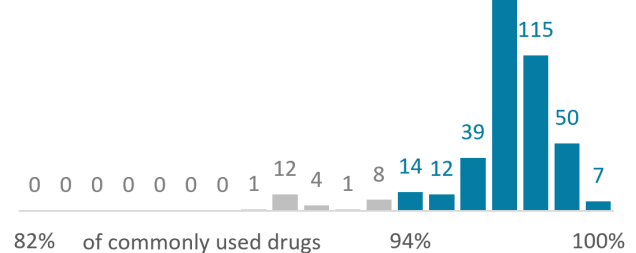
Number (percentage) of formularies that covered almost all drugs: **383 (96%)**



2020

Total Number of Formularies: 448

Number (percentage) of formularies that covered almost all drugs: **422 (94%)**



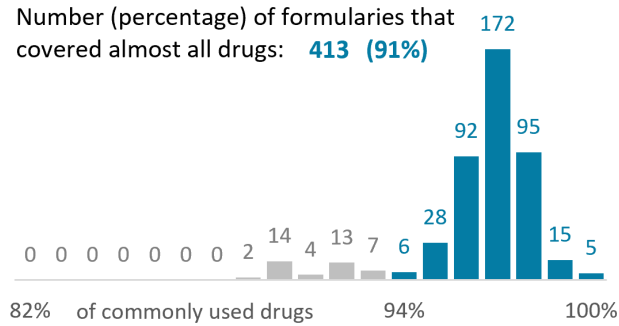


## Appendix A (continued)

2021

Total Number of Formularies: 453

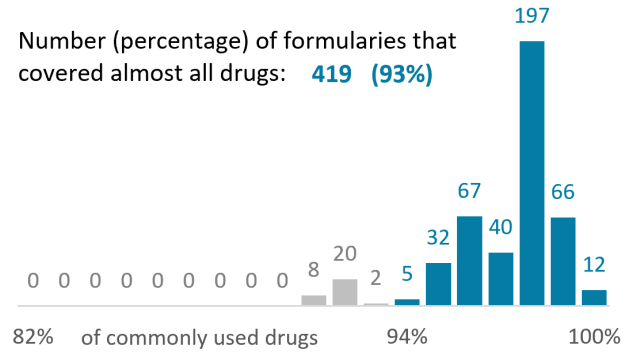
Number (percentage) of formularies that covered almost all drugs: **413 (91%)**



2022

Total Number of Formularies: 449

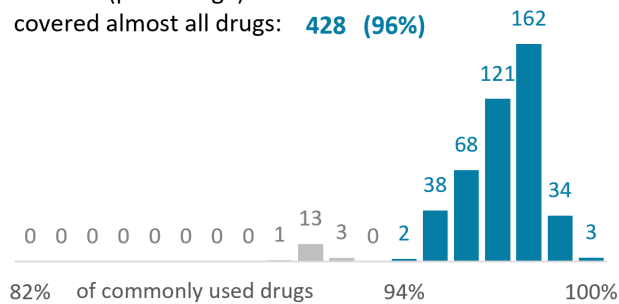
Number (percentage) of formularies that covered almost all drugs: **419 (93%)**



2023

Total Number of Formularies: 445

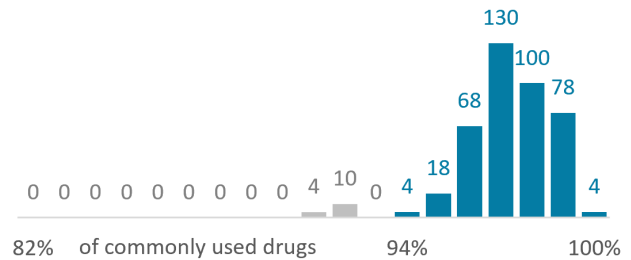
Number (percentage) of formularies that covered almost all drugs: **428 (96%)**



2024

Total Number of Formularies: 416

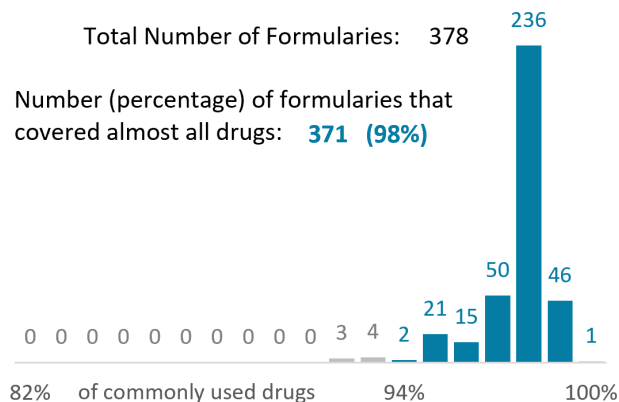
Number (percentage) of formularies that covered almost all drugs: **402 (97%)**



2025

Total Number of Formularies: 378

Number (percentage) of formularies that covered almost all drugs: **371 (98%)**



## Appendix B

### OIG Annual Reports

Report Title and Date of Publication	Report Number
1. <i>Part D Plans Generally Cover Drugs Commonly Used by Dual Eligibles</i> , April 2011	<a href="#">OEI-05-10-00390</a>
2. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2012, June 2012	<a href="#">OEI-05-12-00060</a>
3. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2013, June 2013	<a href="#">OEI-05-13-00090</a>
4. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2014, June 2014	<a href="#">OEI-05-14-00170</a>
5. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2015, June 2015	<a href="#">OEI-05-15-00120</a>
6. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2016, June 2016	<a href="#">OEI-05-16-00090</a>
7. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2017, July 2017	<a href="#">OEI-05-17-00160</a>
8. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2018, June 2018	<a href="#">OEI-05-18-00240</a>
9. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2019, June 2019	<a href="#">OEI-05-19-00220</a>
10. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2020, June 2020	<a href="#">OEI-05-20-00190</a>
11. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2021, June 2021	<a href="#">OEI-05-21-00170</a>
12. <i>Part D Plans Generally Include Drugs Commonly Used by Dual Eligibles</i> : 2022, June 2022	<a href="#">OEI-05-22-00230</a>
13. <i>Part D Plans Generally Include Drugs Commonly Used by Dual-Eligible Enrollees</i> : 2023, June 2023	<a href="#">OEI-05-23-00130</a>
14. <i>Part D Plans Generally Include Drugs Commonly Used by Dual-Eligible Enrollees</i> : 2024, June 2024	<a href="#">OEI-05-24-00210</a>
15. <i>Part D Plans Generally Include Drugs Commonly Used by Dual-Eligible Enrollees</i> : 2025, June 2025	<a href="#">OEI-05-25-00120</a>

Data Snapshot: Trends in Dual-Eligible Enrollees' Access to Drugs Under Part D, 2011-2025  
OEI-05-25-00350

## Endnotes

<sup>1</sup> Kaiser Family Foundation, [Medicare's Role for Dual Eligible Beneficiaries](#), April 2012. Accessed on May 16, 2025.

<sup>2</sup> The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 required that dual-eligible enrollees receive prescription drug coverage from Medicare under Part D, rather than Medicaid. The change took effect with the start of the Part D program in 2006. Medicare Prescription Drug, Improvement, and Modernization Act of 2003, P.L. No. 108-173 (enacted Dec. 8, 2003), § 101. Kaiser Family Foundation, “Dual Eligibles and Medicare Part D.” Accessed on May 30, 2025.

<sup>3</sup> For the mandate, see the Patient Protection and Affordable Care Act, P.L. No. 111-148, § 3313(a). For each study, OIG has reviewed drug coverage under Medicare Part D for all dual-eligible enrollees, rather than only for full-benefit dual-eligible enrollees as specified by the mandate. (Under Social Security Act § 1935(c)(6), full-benefit dual-eligible enrollees are individuals who are eligible for both Medicare and full Medicaid benefits.) With the data available for these studies, we could not confidently identify and separate full-benefit dual-eligible enrollees—and thus the drugs they used—from the total population of dual-eligible enrollees.

<sup>4</sup> We set the threshold at 94 percent in this data snapshot to standardize our results because we used slightly different thresholds to define “almost all” commonly used drugs across years.

<sup>5</sup> Plan formularies do not have to include every available drug. Rather, to meet CMS’s formulary requirements, they generally must include at least two drugs in each therapeutic category or class. 42 CFR § 423.120(b)(2). CMS, Prescription Drug Benefit Manual (PDBM), ch. 6, § 30.2.1.

<sup>6</sup> 42 CFR § 423.38(c)(4). Effective as of June 3, 2024. Prior to June 3, 2024, dual-eligible enrollees had up to three chances during the first 9 months of the year to switch to plans that covered the prescription drugs they required.

<sup>7</sup> CMS, Parts C & D Enrollee Grievances, Organization/Coverage Determinations, and Appeals Guidance, §§ 40-60.

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