



# Prescription Benefit Updates

January 1, 2015

Please review this update to the new CoOpportunity Health Drug List to learn about changes to our previous coverage and/or requirements effective January 1, 2015. Reminder: Appropriate generics can reduce member cost-sharing amounts. To view generic treatment options and their drug list status, select the therapeutic class on the new [CoOpportunity Health Drug List](#).

The 2015 CoOpportunity Health Drug List incorporates January 1 changes and is now available for review. This list is subject to change; always check the most current information using the Drug List.







## Note:

- Drugs are listed alphabetically by therapeutic class and subclass.
- Beginning January 1, 2015, Tier 4 drugs will include both high-cost and specialty drugs.
- Specialty Tier 4 drugs will include the Specialty icon in the Status column and must continue to be purchased through CVS Caremark Specialty Pharmacy. All other Tier 4 drugs can be purchased at a retail or mail-order pharmacy.
- Unless otherwise noted, changes below are effective January 1, 2015.
- Brand-name drugs are displayed in ALL CAPS. Generic drugs are displayed in lowercase italics.

Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Allergy</b>				
<i>Other, Oral</i>	GRASTEK	\$\$ Tier 2	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to Tier 2.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

► *cont. on p. 2*

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Allergy</b>				
<i>Other, Oral</i>	ORALAIR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding as a tier 3 drug with prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Other, Oral</i>	RAGWITEK	\$\$ Tier 2	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to tier 2.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<b>Alpha-1 Antitrypsin Deficiency</b>				
<i>Alpha-1 Antitrypsin Deficiency</i>	ARALAST	\$\$\$\$ Tier 4	 SPECIALTY PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Alpha-1 Antitrypsin Deficiency</i>	ARALAST NP	\$\$\$\$ Tier 4	 SPECIALTY PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Alpha-1 Antitrypsin Deficiency</i>	GLASSIA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Alpha-1 Antitrypsin Deficiency</i>	PROLASTIN	\$\$\$\$ Tier 4	 SPECIALTY PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Alpha-1 Antitrypsin Deficiency</i>	PROLASTIN-C	\$\$\$\$ Tier 4	 SPECIALTY PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Alpha-1 Antitrypsin Deficiency</i>	ZEMAIRA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>



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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Anti-Addiction/ Substance Abuse Treatment Agents</b>				
<i>Anti-Addiction/ Substance Abuse Treatment Agents</i>	EVZIO	\$\$\$ Tier 3		<ul style="list-style-type: none"> <li>• Adding as a tier 3 drug.</li> <li>• Adding naloxone prefilled syringe to formulary as an alternative.</li> </ul>
<i>Anti-Addiction/ Substance Abuse Treatment Agents</i>	<i>naloxone prefilled syringe</i>	\$ Tier 1		<ul style="list-style-type: none"> <li>• Adding as a tier 1 drug.</li> </ul>
<b>Anti-Infective</b>				
<i>Antibiotics, Macrolides</i>	DIFICID	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antibiotics, Other</i>	XIFAXAN	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antibiotics, Other</i>	ZYVOX	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antibiotics, Tetracyclines</i>	MONODOX	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antifungals</i>	SPORANOX	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Anti-Infective, Other</i>	MEPRON	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Anti-Infective, Other</i>	SIVEXTRO	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to Tier 4 (high-cost drug).</li> </ul>
<i>Antiviral, Hepatitis B</i>	BARACLUDGE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

► cont. on p. 4

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Anti-Infective</b>				
<i>Antiviral Hepatitis C</i>	INTRON A	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 high-cost specialty drug.</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral Hepatitis C</i>	MODERIBA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Antiviral, HIV</i>	APTIVUS	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	ATRIPLA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	COMPLERA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	EDURANT	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	EPZICOM	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	INTELENCE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	INVIRASE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	ISENTRESS	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

► cont. on p. 5

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Anti-Infective</b>				
<i>Antiviral, HIV</i>	KALETRA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	LEXIVA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	PREZISTA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	REYATAZ	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	SELZENTRY	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	STRIBILD	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	TIVICAY	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	TRIZIVIR	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	TRUVADA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, HIV</i>	VIRACEPT	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

► cont. on p. 6

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Anti-Infective</b>				
<i>Antiviral, HIV</i>	VIREAD	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Antiviral, Other</i>	VALCYTE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Arthritis</b>				
<i>Arthritis, Other</i>	CUPRIMINE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Asthma &amp; COPD</b>				
<i>Asthma &amp; COPD, Other</i>	AEROSPAN	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Asthma &amp; COPD, Other</i>	SINGULAIR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Asthma &amp; COPD, Other</i>	TUDORZA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Asthma &amp; COPD, Other</i>	ZYFLO	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Bronchodilators, Inhaled</i>	BROVANA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Bronchodilators, Inhaled</i>	PERFOROMIST	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Asthma &amp; COPD</b>				
<i>Combination Agents, Inhaled</i>	ANORO	\$\$ Tier 2	PRIOR ✓	<ul style="list-style-type: none"> <li>Adding as a tier 2 drug.</li> <li>Including prior authorization</li> </ul>
<i>Corticosteroids, Inhaled</i>	<i>budesonide suspension for nebulization</i>	\$ Tier 1	AGE ✓ PRIOR ✓ age 7 and older	<ul style="list-style-type: none"> <li>Adding an age requirement effective April 1, 2015.</li> <li>Covered for patients 6 years of age and younger.</li> <li>Prior authorization is required only for members age 7 and older. Metered-dose inhalers are preferred.</li> </ul>
<i>Corticosteroids, Inhaled</i>	PULMICORT 0.25 MG and 0.5 MG SUSPENSION	\$\$\$ Tier 3	AGE ✓ PRIOR ✓ age 7 and older	<ul style="list-style-type: none"> <li>Adding an age requirement effective April 1, 2015.</li> <li>Covered for patients 6 years of age and younger.</li> <li>Prior authorization is required only for members age 7 and older. Metered-dose inhalers are preferred.</li> </ul>
<b>Behavioral Health</b>				
<i>Antipsychotic</i>	INVEGA	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Depression</i>	APLENZIN	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Depression</i>	BRINTELLIX	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>Adding prior authorization.</li> <li>Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	CELEXA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>Adding prior authorization.</li> <li>Generic is Tier 1.</li> <li>Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	CYMBALTA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>Adding prior authorization.</li> <li>Generic is Tier 1.</li> <li>Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Behavioral Health</b>				
<i>Depression</i>	<i>desvenlafaxine</i> <i>er</i>	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	EFFEXOR XR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	EMSAM	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Depression</i>	FETZIMA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	<i>olanzapine-</i> <i>fluoxetine</i>	\$\$\$ Tier 3	AGE ✓ PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	PRISTIQ	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	SYMBYAX	\$\$\$ Tier 3	AGE ✓ PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Depression</i>	VIIBRYD	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<b>Bleeding Disorders</b>				
<i>Hemophilia</i>	STIMATE	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

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<b>Blood Thinner</b>				
<i>Platelet Inhibitors</i>	ZONTIVITY	\$\$ Tier 2	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to a tier 2 drug.</li> </ul>
<b>Cancer</b>				
<i>Cancer</i>	AFINITOR	\$\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Cancer</i>	BOSULIF	\$\$\$\$ Tier 4	 SPECIALTY <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Cancer</i>	CAPRELSA	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Cancer</i>	COMETRIQ	\$\$\$\$ Tier 4	 SPECIALTY <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Cancer</i>	ERIVEDGE	\$\$\$\$ Tier 4	 SPECIALTY <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Cancer</i>	GILOTRIF	\$\$\$\$ Tier 4	 SPECIALTY <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Cancer</i>	GLEEVEC	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Cancer</i>	HEXALEN	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>















► cont. on p. 10

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<b>Cancer</b>				
Cancer	HYCAMTIN	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	ICLUSIG	\$\$\$\$ Tier 4	 SPECIALTY  PRIOR	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	IMBRUVICA	\$\$\$\$ Tier 4	 SPECIALTY  PRIOR	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	INLYTA	\$\$\$\$ Tier 4	 SPECIALTY  PRIOR	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	JAKAFI	\$\$\$\$ Tier 4	 SPECIALTY  PRIOR	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	LUPRON	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	LYSODREN	\$\$\$\$ Tier 4	 SPECIALTY  PRIOR	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	MATULANE	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	MEKINIST	\$\$\$\$ Tier 4	 SPECIALTY  PRIOR	<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>



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<b>Cancer</b>				
Cancer	NEXAVAR	\$\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	POMALYST	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	REVLIMID	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	SPRYCEL	\$\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	STIVARGA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	SUTENT	\$\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	SYLATRON	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	TAFINLAR	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Cancer</b>				
Cancer	TARCEVA	\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	TARGRETIN	\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	TASIGNA	\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	TEMODAR	\$\$\$ Tier 4	 SPECIALTY  PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	THALOMID	\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	TYKERB	\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	VALCHLOR	\$\$\$ Tier 4	 SPECIALTY  PRIOR   LIMIT	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	VOTRIENT	\$\$\$ Tier 4	 SPECIALTY  TRIAL	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Cancer</b>				
Cancer	XALKORI	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	XELODA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	XTANDI	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	ZELBORAF	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	ZOLINZA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	ZYKADIA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
Cancer	ZYTIGA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Cough &amp; Cold</b>				
Cough & Cold	<i>promethazine-codeine</i>	\$\$\$ Tier 3	PRIOR  AGE 	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to tier 3.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Diabetes</b>				
<i>Diabetes, Injection</i>	SYMLINPEN	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Diabetes, Oral</i>	JANUMET	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Diabetes, Oral</i>	JANUMET XR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Diabetes, Oral</i>	JANUVIA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Diabetes, Oral</i>	KAZANO	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Diabetes, Oral</i>	KOMBIGLYZE	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Diabetes, Oral</i>	NESINA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Diabetes, Oral</i>	ONGLYZA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Diabetes, Oral</i>	OSENI	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Insulin</i>	APIDRA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Diabetes</b>				
<i>Insulin</i>	NOVOLIN	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Insulin</i>	NOVOLOG	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<b>Enzyme Replacement</b>				
<i>Enzyme Replacement</i>	CREON	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Enzyme Replacement</i>	PANCREAZE	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to affected providers, pharmacies and members.</li> </ul>
<i>Enzyme Replacement</i>	PERTZYE	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to affected providers, pharmacies and members.</li> </ul>
<i>Enzyme Replacement</i>	ULTRESA	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to affected providers, pharmacies and members.</li> </ul>
<i>Enzyme Replacement</i>	VIOKACE	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and members.</li> </ul>
<i>Enzyme Replacement</i>	ZENPEP	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to affected providers, pharmacies and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Heart Health</b>				
<i>Blood Pressure, ACEI/ARB</i>	ATACAND	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	ATACAND HCT	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	AVAPRO	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	AZOR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	BENICAR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	BENICAR HCT	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	COZAAR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	DIOVAN	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	DIOVAN HCT	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Heart Health</b>				
<i>Blood Pressure, ACEI/ARB</i>	EDARBI	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	EDARBYCLOR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	EPANED	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	HYZAAR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	MICARDIS	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	MICARDIS HCT	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, ACEI/ARB</i>	TARKA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, Beta Blockers</i>	BYSTOLIC	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Blood Pressure, Beta Blockers</i>	CORGARD	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>







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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Heart Health</b>				
<i>Blood Pressure, Beta Blockers</i>	INDERAL	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	ADVICOR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	CADUET	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	CRESTOR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	<i>fluvastatin</i>	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	LESCOL	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	LIPITOR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	LIVALO	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Cholesterol Lowering, Statins</i>	SIMCOR	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

















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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Heart Health</b>				
<i>Diuretics</i>	EDECIN	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>Changing to Tier 4 (high-cost drug).</li> <li>Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Triglyceride Lowering</i>	<i>niacin er</i>	\$\$\$ Tier 3		<ul style="list-style-type: none"> <li>Changing to Tier 3.</li> <li>Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<b>Hereditary Angioedema</b>				
<i>Hereditary Angioedema</i>	BERINERT	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>Changing to a specialty drug.</li> <li>Sending additional communications to affected members.</li> </ul>
<i>Hereditary Angioedema</i>	CINRYZE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>Changing to a specialty drug.</li> <li>Sending additional communications to affected members.</li> </ul>
<i>Hereditary Angioedema</i>	FIRAZYR	\$\$\$\$ Tier 4	 	<ul style="list-style-type: none"> <li>Moving to new category of Hereditary Angioedema.</li> </ul>
<i>Hereditary Angioedema</i>	KALBITOR	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>Changing to a specialty drug.</li> <li>Sending additional communications to affected members.</li> </ul>
<i>Hereditary Angioedema</i>	RUCONEST	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>Changing to a specialty drug.</li> <li>Sending additional communications to affected members.</li> </ul>













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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Immune Deficiency</b>				
<i>Immune Deficiency</i>	BIVIGAM	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	CARIMUNE NF	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	FLEBOGAMMA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	FLEBOGAMMA DIF	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	GAMASTAN S/D	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	GAMMAGARD S/D	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	GAMMAKED	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	GAMMAPLEX	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Immune Deficiency</b>				
<i>Immune Deficiency</i>	GAMUNEX	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	GAMUNEX-C	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Immune Deficiency</i>	HIZENTRA	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a high-cost specialty drug.</li> <li>• Adding prior authorization.</li> <li>• Sending letters to affected providers, pharmacies, and members.</li> </ul>
<i>Immune Deficiency</i>	OCTAGAM	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending additional communications to affected members.</li> </ul>
<i>Immune Deficiency</i>	PRIVIGEN	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending additional communications to affected members.</li> </ul>
<i>Immune Deficiency</i>	VIVAGLOBIN	\$\$\$\$ Tier 4	 SPECIALTY PRIOR 	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending additional communications to affected members.</li> </ul>
<b>Immune Suppressant</b>				
<i>Immune Suppressant</i>	CELLCEPT	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>


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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Immune Suppressant</b>				
<i>Immune Suppressant</i>	RAPAMUNE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Immune Suppressant</i>	ZORTRESS	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Mouth &amp; Throat</b>				
<i>Dry Mouth</i>	NEUTRASAL	\$\$\$\$ Tier 4	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Other Conditions</b>				
<i>Other Agents</i>	ALFERON	\$\$\$\$ Tier 4	 SPECIALTY	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Other Agents</i>	MESTINON	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Pain</b>				
<i>Non-Steroidal, Anti-Inflammatories</i>	INDOCIN ORAL SUSPENSION	\$\$\$\$ Tier 4	<b>AGE</b> ✓ <b>#</b> LIMIT	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Non-Steroidal, Anti-Inflammatories</i>	NAPRELAN	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Non-Steroidal, Anti-Inflammatories</i>	VIMOVO	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Pain</b>				
<i>Opioids</i>	ABSTRAL	\$\$\$\$ Tier 4	<b>PRIOR</b> ✓ <b>#</b> <b>LIMIT</b>	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Opioids</i>	<i>methadone</i>	\$ Tier 1	<b>#</b> <b>LIMIT</b> Some <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Decreasing quantity limits effective January 1, 2015.</li> <li>• Adding prior authorization to 40mg tablets.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<b>Parkinson's</b>				
<i>Parkinson's</i>	ZELAPAR	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Pulmonary Hypertension</b>				
<i>Pulmonary Hypertension</i>	REMODULIN	\$\$\$\$ Tier 4	 <b>SPECIALTY</b> <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<i>Pulmonary Hypertension</i>	VELETRI	\$\$\$\$ Tier 4	 <b>SPECIALTY</b> <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to a specialty drug.</li> <li>• Sending letters to affected members.</li> </ul>
<b>Seizures/Epilepsy</b>				
<i>Seizures/Epilepsy</i>	BANZEL	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Seizures/Epilepsy</i>	FELBATOL	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Seizures/Epilepsy</i>	KEPPRA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/Tier*	Status	Notes
<b>Seizures/Epilepsy</b>				
<i>Seizures/Epilepsy</i>	LAMICTAL LAMICTAL ODT	\$\$\$\$ Tier 4	ODT Versions <b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• ODT versions continue to require prior authorization.</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Seizures/Epilepsy</i>	OXTELLAR	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Skin Conditions</b>				
<i>Acne, Oral</i>	ABSORICA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Acne, Oral</i>	SOLODYN	\$\$\$\$ Tier 4	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Acne, Topical</i>	ACANYA	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	AKNE-MYCIN	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	ATRALIN	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	BENZACLIN	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	BENZEFOAM	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	CLEOCIN	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Skin Conditions</b>				
<i>Acne, Topical</i>	CLINDAGEL	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	DIFFERIN	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	EPIDUO	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	RETIN-A	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	TRETIN-X	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	VELTIN	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Acne, Topical</i>	ZIANA	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding as a Tier 3 drug with prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Corticosteroids, Topical</i>	CORDRAN TAPE	\$\$\$\$ Tier 4	PRIOR ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Corticosteroids, Topical</i>	VANOS	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>

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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Skin Conditions</b>				
<i>Psoriasis, Other</i>	SORIATANE	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Psoriasis, Topical</i>	SORILUX	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Skin Conditions, Other</i>	CARAC	\$\$\$\$ Tier 4	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Skin Conditions, Other</i>	VEREGEN	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Skin Conditions, Other</i>	ZYCLARA	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Sleep Disorders</b>				
<i>Narcolepsy/ Excessive Sleepiness</i>	PROVIGIL	\$\$\$\$ Tier 4	<b>PRIOR</b> ✓ # LIMIT	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<b>Stomach/ Gastrointestinal</b>				
<i>Chron's Disease/ Ulcerative Colitis</i>	UCERIS	\$\$\$\$ Tier 4		<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Stomach/ Gastrointestinal, Other</i>	LOTRONEX	\$\$\$\$ Tier 4	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Changing to Tier 4 (high-cost drug).</li> <li>• Sending additional communications to pharmacies and affected members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	<i>amoxicillin-clarithromycin-lansoprazole</i>	\$\$\$ Tier 3	<b>PRIOR</b> ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>


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Therapeutic Class /Subclass	Medication	Copay/ Tier*	Status	Notes
<b>Stomach/ Gastrointestinal</b>				
<i>Ulcers/Heartburn/ GERD</i>	ACIPHEX	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	DEXILANT	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	<i>omeprazole bicarb</i>	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	PREVACID CAPSULES	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	PREVPAC	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	PROTONIX	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Generic is Tier 1.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	<i>rabeprazole</i>	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>
<i>Ulcers/Heartburn/ GERD</i>	ZEGERID	\$\$\$ Tier 3	PRIOR ✓	<ul style="list-style-type: none"> <li>• Adding prior authorization.</li> <li>• Sending additional communications to affected providers, pharmacies, and members.</li> </ul>

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