




Updates to your prescription benefits

Effective July 1, 2016

Within the Prescription Drug List (PDL), medications are grouped by tier. The tier indicates the amount you pay when you fill a prescription. Please reference this chart as you review the following updates. Most options listed are available in Tier 1, your lowest cost option.

If your medication is listed below, you may continue taking it, but you may pay a higher cost. We encourage you to discuss the listed lower-cost option(s) that may also treat your condition with your doctor. Most options listed are available in Tier 1, your lowest-cost tier, and may have a clinical program in place.

 Tier 1 Lowest-cost medication	 Tier 2 and 3 Mid-range cost medications	 Tier 4 Highest-cost medications
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Medications Moving to a Lower Tier

The following medications are moving to a lower tier, making them more affordable. Down-tiers occur throughout the year, helping members take immediate advantage of the cost savings.

Therapeutic Use	Medication Name	Tier Placement
Cancer	Targetin Capsules	Tier 3 to Tier 2

Medications with New Benefit Coverage

The following medications were previously not covered under most pharmacy benefit plans and are now eligible for coverage.

Therapeutic Use	Medication Name	Tier Placement
Asthma/COPD	Symbicort	Tier 3
	Seebri NeoHaler	Tier 2
	Utibron NeoHaler	Tier 2
Cough/Cold	Obredon	Tier 4
Narcolepsy	modafanil (generic Provigil)	Tier 3

Medications Moving to a Higher Tier

Medications may move from a lower tier to a higher tier when they are more costly and have available lower-cost options.

Therapeutic Use	Medication Name	Tier Placement	Lower Cost Options
Asthma/COPD	Ventolin HFA	Tier 1 to Tier 2	None available
	Zyflo	Tier 3 to Tier 4	montelukast (generic Singulair), zafirlukast (generic Accolate)
	Zyflo CR	Tier 3 to Tier 4	
	Dulera	Tier 3 to Tier 4	Advair Duskus/HFA, Breo Ellipta, Symbicort
HAE	Ruconest	Tier 3 to Tier 4	Berinert

Medications Moving to a Higher Tier (cont.)

Medications may move from a lower tier to a higher tier when they are more costly and have available lower-cost options.

Therapeutic Use	Medication Name	Tier Placement	Lower Cost Options
Infections	clindamycin 2% vaginal cream (generic Cleocin)	Tier 1 to Tier 2	clindamycin capsules (generic Cleocin), metronidazole tablets (generic Flagyl)
	metronidazole 0.75% vaginal gel (generic Metrogel-Vaginal)	Tier 1 to Tier 2	
	Vandazole	Tier 1 to Tier 2	
Opioid Induced Constipation	Relistor	Tier 2 to Tier 4	Movantik
Pain	Trexix, acetaminophen/caffeine/dihydrocodeine	Tier 1 to Tier 4	acetaminophen/codeine (generic Tylenol with Codeine)
	Lazanda	Tier 3 to Tier 4	fentanyl citrate lozenges (generic Actiq)
Skin Conditions	clobetasol 0.05% cream (generic Temovate)	Tier 1 to Tier 2	None available
	clobetasol 0.05% emollient cream (generic Temovate-E)	Tier 1 to Tier 2	
	clobetasol 0.05% gel (generic Temovate)	Tier 1 to Tier 2	
	clobetasol 0.05% ointment (generic Temovate)	Tier 1 to Tier 2	
	Cordran Cream	Tier 3 to Tier 4	hydrocortisone valerate 0.2% cream (generic Westcort cream), prednicarbate 0.1% cream (generic Dermatop cream)
	Cordran Lotion	Tier 3 to Tier 4	triamcinolone acetonide 0.1% lotion (generic Kenalog lotion)
	Cordran Ointment	Tier 3 to Tier 4	prednicarbate 0.1% ointment (generic Dermatop), triamcinolone 0.025% ointment (generic Kenalog)
	econazole cream (generic Spectazole)	Tier 1 to Tier 3	ciclopirox (generic Loprox), ketoconazole (generic Nizoral), OTC Lamisil AT, OTC Lotrimin, OTC Lotrimin AF

Medications excluded from benefit coverage

We evaluate medications based on their total value, including how a medication works and how much it costs. When several medications work in the same way, we may choose to exclude the higher-cost option. The medications listed below will no longer be covered under many of our pharmacy benefit plans.

Therapeutic Use	Medication Name	Lower Cost Options
ADHD	Aptensio XR	Concerta, Metadate CD
	Evekeo	amphetamine/dextroamphetamine immediate-release (generic Adderall), dextroamphetamine immediate-release (generic Dexedrine)
Allergies	Pazeo	OTC ketotifen (Zaditor), azelastine (generic Optivar), olopatadine ophthalmic solution (generic Patanol), Lastacraft

Medications excluded from benefit coverage (cont.)

We evaluate medications based on their total value, including how a medication works and how much it costs. When several medications work in the same way, we may choose to exclude the higher-cost option. The medications listed below will no longer be covered under many of our pharmacy benefit plans.

Therapeutic Use	Medication Name	Lower Cost Options
Alzheimer's Disease	Exelon Patch (Brand Only)	rivastigmine transdermal patch (generic Exelon), rivastigmine oral capsules (generic Exelon)
	Namenda XR	memantine immediate-release (generic Namenda)
	Namzaric	donepezil (generic Aricept) plus memantine (generic Namenda)
Cancer	bexarotene caps (generic for Targretin)	Targretin capsules
COPD	Stiolto Respimat	Anoro Ellipta, Utibron NeoHaler
Cough/Cold	FlowTuss	guaifenesin/codeine solution (Cheratussin AC)
	Hycofenix	
	Tuzistra XR	hydrocodone polistirex/chlorpheniramine polistirex (generic Tussionex Pennkinetic), Z-Tuss AC
Diabetes	Toujeo Solostar	Lantus, Levemir
Heart Rhythm	Betapace (Brand Only)	sotalol (generic Betapace)
Hemophilia	Novoeight	Advate, Helixate FS, Kogenate FS, Recombinate
Hemorrhoids	Anusol HC Supp (Brand Only)	doxycycline hyclate (generic Vibramycin, Vibra-Tabs)
High Blood Pressure	Cardizem (Brand Only)	diltiazem (generic Cardizem)
	Cardizem CD (Brand Only)	diltiazem extended-release (generic Cardizem CD)
	Cardizem LA (Brand Only)	diltiazem extended-release (generic Cardizem LA)
	Dibenzylamine (Brand Only)	phenoxybenzamine (generic Dibenzylamine)
	Tenoretic (Brand Only)	atenolol/chlorthalidone (generic Tenoretic)
	Tenormin (Brand Only)	atenolol (generic Tenormin)
	Vaseretic (Brand Only)	enalapril/hydrochlorothiazide (generic Vaseretic)
	Vasotec (Brand Only)	enalapril (generic Vasotec)
	Zestoretic (Brand Only)	lisinopril/hydrochlorothiazide (generic Zestoretic)"
Zestril (Brand Only)	lisinopril (generic Zestril)	
Hormone Replacement	estradiol transdermal patches (generic for Vivelle-Dot)	Vivelle-Dot
Huntington's Disease	Xenazine (Brand Only)	tetrabenazine (generic Xenazine)
Infections	Augmentin (Brand Only)	amoxicillin/clavulanic acid (generic Augmentin)
	Augmentin ES-600 (Brand Only)	
	E.E.S. 400 (Brand Only)	erythromycin ethylsuccinate (generic E.E.S. 400)
	Metrogel 0.75% Vaginal (Brand Only)	metronidazole 0.75% vaginal gel (generic Metrogel-Vaginal)
	Nuessa	
	Valcyte (Brand Only)	valganciclovir (generic Valcyte)
Zyvox (Brand Only)	linezolid (generic Zyvox)	
Irritable Bowel Syndrome	Librax (Brand Only)	chlordiazepoxide/clidinium (generic Librax)
	Lotronex (Brand Only)	alosetron (generic Lotronex)
Lipid/Cholesterol Lowering	Lescol XL (Brand Only)	fluvastatin extended-release (generic Lescol XL)

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Therapeutic Use	Medication Name	Lower Cost Options
Mental Health	Anafranil (Brand Only)	clomipramine (generic Anafranil)
	Invega (Brand Only)	paliperidone (generic Invega)
	Irenka	duloxetine (generic Cymbalta), venlafaxine extended-release (generic Effexor XR)
	Wellbutrin (Brand Only)	bupropion (generic Wellbutrin)
Migraine	Axert (Brand Only)	almotriptan (generic Axert)
	D.H.E. 45 (Brand Only)	dihydroergotamine (generic D.H.E. 45)
	Migranal (Brand Only)	dihydroergotamine nasal spray (generic Migranal)
Narcolepsy	Nuvigil	modafinil (generic Provigil)
Pain	Disalcid (Brand Only)	salsalate (generic Disalcid)
	Embeda	fentanyl transdermal patch (12, 25, 50, 75, 100 mcg/hr only) (generic Duragesic), morphine sulfate extended-release (generic MS Contin), Opana ER, Nucynta ER
	fentanyl transdermal patch 37.5, 62.5, 87.5 mcg/hr only (Select strengths only)	fentanyl transdermal patch (12, 25, 50, 75, 100 mcg/hr only) (generic Duragesic)
	Tivorbex	diclofenac (generic Voltaren), ibuprofen (generic Motrin), indomethacin capsule (generic Indocin), meloxicam (generic Mobic), naproxen (generic Naprosyn)
Parkinson's Disease	Lodosyn (Brand Only)	carbidopa (generic Lodosyn)
	Rytary	carbidopa/levodopa extended-release tablet (generic Sinemet CR), carbidopa/levodopa (generic Sinemet)
	Tasmar (Brand Only)	tolcapone (generic Tasmar)
Prostate – Benign Prostatic Hypertrophy	Avodart (Brand Only)	dutasteride (generic Avodart), finasteride (generic Proscar)
Rosacea	doxycycline delayed-release capsule (Oracea authorized generic)	minocycline (generic Minoicin), doxycycline hyclate (generic Morgidox, Vibramycin), doxycycline monohydrate 50 mg and 100 mg (generic Monodox), Oracea
Skin Conditions	Clarifoam EF (Brand Only)	sulfacetamide sodium/sulfur 10-5% (generic Clarifoam EF)
	Kenalog Spray (Brand Only)	triamcinolone spray (generic Kenalog)
	Loprox Shampoo (Brand Only)	ciclopirox shampoo (generic Loprox Shampoo)
	Penlac Nail Lacquer (Brand Only)	ciclopirox 8% solution (generic Penlac Nail Lacquer)
	Proctocort (Brand Only)	hydrocortisone 1% cream (generic Proctocort), hydrocortisone 30 mg suppository (generic Proctocort)
	Synalar 0.01% (Brand Only)	fluocinolone 0.01% solution (generic Synalar)
	Synalar 0.025% cream, ointment (Brand Only)	fluocinolone 0.025% cream, ointment (generic Synalar)
Supportive Care for Cystic Fibrosis	Kitabis Pak	Bethkis
Ulcerative Colitis	Colazal (Brand Only)	balsalazide (generic Colazal)
Ulcers, Heartburn and Reflux	Zegerid packet	omeprazole (generic Prilosec), pantoprazole (generic Protonix), rabeprazole (generic Aciphex), Dexilant, Prevacid Solu-Tab, Nexium Suspension, OTC Nexium, OTC Prevacid 24; OTC Prilosec, OTC Zegerid

Legend Medications with Over-the-Counter Equivalents

Prescription medications containing the same active ingredient available in an over-the counter product may be excluded from coverage.

Therapeutic Use	Medication Name	Lower Cost Options
Pain	Duexis	ibuprofen (generic Motrin) plus OTC famotidine (generic Pepcid AC)
Ulcers, Heartburn and Reflux	Vimovo	OTC naproxen plus OTC omeprazole (generic Prilosec)

Non-FDA approved medications excluded from coverage

There are several prescription medications marketed that are not approved by the U.S. Food & Drug Administration (FDA). In order to ensure coverage is provided for FDA-approved medications, UnitedHealthcare excludes medications that are not approved by the FDA.

Therapeutic Use	Medication Name
Irritable Bowel Syndrome	Donnatal
	Donnatal Extentabs
Neuropathy	Active Pac/Gabapentin Kit
Skin Conditions	Salex Kit
	Salex Shampoo

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