

Important information about your prescription benefits

Traditional Prescription Drug List (PDL)

July 1, 2011

We want you to get the most out of your pharmacy benefit. We provide benefit coverage for a wide variety of U.S. Food and Drug Administration (FDA) approved prescription medications. Our programs and tools are designed to help you make informed decisions about your choice of prescription medications and pharmacy products. The more you know, the more you may save.

The following medications may move to a different tier on the Prescription Drug List (PDL) or may be excluded under your benefit plan.

Note: Beginning July 1, 2011 all updates may go into effect. Changes to this effective date are noted.

Down-Tiers			
Therapeutic Use	Medication Name	Tier Placement	Effective Date
Acne	Differin lotion	N/A to Tier 3	July 1, 2011 or earlier
	Solodyn 55mg, 80mg, 105mg	N/A to Tier 3	July 1, 2011 or earlier
Gout	Colcrys	Tier 3 to Tier 2	July 1, 2011 or earlier
Heart Rhythm Disorders	Multaq	Tier 3 to Tier 2	July 1, 2011 or earlier
Low Sodium	Samsca	Tier 3 to Tier 2	July 1, 2011 or earlier
Psoriasis	Stelara	Tier 3 to Tier 2	July 1, 2011 or earlier
Pulmonary Arterial Hypertension (PAH)	Tyvaso	Tier 3 to Tier 2	July 1, 2011 or earlier
Testosterone Replacement	Testim	N/A to Tier 2	July 1, 2011
Thyroid Replacement	Tirosint	N/A to Tier 2	July 1, 2011 or earlier

(continued on back)



Exclusions

Therapeutic Use	Medication Name	New Benefit Coverage	Alternatives
Alzheimer's Disease	Aricept 23mg	Excluded	donepezil 5mg, 10mg
Cough	Zonatuss	Excluded	benzonatate
Eye Allergies	Elestat	Excluded	Zaditor OTC (ketotifen OTC – various brands), azelastine, Bepreve, Optivar
	Emadine	Excluded	
	Pataday	Excluded	
	Patanol	Excluded	
Eye Infections	Zymaxid	Excluded	ciprofloxacin ophthalmic, ofloxacin ophthalmic, Zymar
Pain	Cambia	Excluded	diclofenac potassium, diclofenac sodium
	Orbivan	Excluded	butalbital / acetaminophen / caffeine
	Pennsaid	Excluded	Voltaren Gel
	Rybix ODT	Excluded	tramadol
	Vimovo	Excluded	naproxen plus Aciphex, Dexilant, omeprazole, or Zegerid
Parkinson's Disease	Mirapex ER	Excluded	pramipexole
Skin Lesions	Zyclara	Excluded	imiquimod 5%
Testosterone Replacement	Androgel	Excluded	Testim

* These drugs will be excluded under most benefit plans. Call the toll-free member phone number on the back of your Health Plan ID card for more information about your benefit plan design. These medications may also move to the highest tier based on your benefit plan on 1/1/2012.

The PDL includes brand and generic prescription medications approved by the FDA. Medications are placed on different “tiers” based on their overall value. Tier 1 is the lowest-cost tier option. When selecting a medication, you and your doctor should consult the PDL.

Log on to myuhc.com® or call the toll-free member phone number on the back of your Health Plan ID card to learn more about your pharmacy benefit and medications.



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