Your UnitedHealthcare pharmacy benefit offers flexibility and choice in finding the right medication for you.

This guide will:

- 1. Help you understand your medication choices and make informed decisions.
- 2. Help you understand which questions to ask your doctor or pharmacist.

#### What is a Prescription Drug List (PDL)?

A PDL is a list of Food and Drug Administration (FDA)-approved brand name and generic medications.

Your UnitedHealthcare pharmacy benefit provides coverage for a comprehensive selection of prescription medications. Below you will find some commonly prescribed medications for certain conditions. You and your doctor may refer to this list to select the right medication to meet your needs.

The benefit plan documents provided by your employer or health plan include a Summary Plan Description (SPD) or a Certificate of Coverage (COC). Please refer to these documents to determine which medications are covered under your individual plan.

#### **Understanding Tiers**

Prescription medications are categorized within three tiers. Each tier is assigned a copayment, the amount you pay when you fill a prescription, which is determined by your employer or health plan. Consult your benefit plan documents to find out the specific copayments, coinsurance and deductibles that are part of your plan. You and your doctor decide which medication is appropriate for you.

#### Tier 1 – Your Lowest-Cost Option

This is your lowest copayment option. For the lowest out-of-pocket expense, you should always consider Tier 1 medications if you and your doctor decide they are right for your treatment.

#### **Tier 2 – Your Midrange-Cost Option**

This is your middle copayment option. Consider Tier 2 medications if you and your doctor decide that a Tier 2 medication is right for your treatment.

#### **Tier 3 – Your Highest-Cost Option**

This is your highest copayment option.

Sometimes there are alternatives available in
Tier 1 or Tier 2 that may be appropriate to treat
your condition. If you are currently taking a
medication in Tier 3, ask your doctor whether
there are Tier 1 or Tier 2 alternatives that may be
right for your treatment.

Compounded medications, medications with one or more ingredients that are prepared "onsite" by a pharmacist, are classified at the Tier 3 level.

Please note: Some plans have a two-tier pharmacy benefit rather than a three-tier pharmacy benefit. Generally, a two-tier closed pharmacy benefit plan does not cover medications classified in Tier 3 of this PDL. A two-tier open pharmacy benefit plan covers one tier at the lower copayment and covers a second tier at a higher copayment.

In addition, some plans have a four-tier prescription plan. Refer to your enrollment materials, check the Drug Pricing / Coverage information on www.myuhc.com, or call the Customer Care number on your ID card for more information about your benefit plan.

If you have pharmacy benefit coverage with UnitedHealthcare, you may learn more about your benefit by visiting **www.myuhc.com** or by calling the Customer Care telephone number printed on your ID card. If you are not currently enrolled with UnitedHealthcare for pharmacy benefit coverage, you may access **www.myuhc.com** for additional information during your open enrollment period or you may contact your employer or health plan for additional information.

In certain documents, the Prescription Drug List (PDL) was referred to as the "Preferred Drug List (PDL)." This change in descriptive terms does not affect your benefit coverage.

# Who decides which medications get placed in which tier?

The UnitedHealthcare PDL Management Committee makes tier placement decisions to help ensure access to a wide range of medications and control health care costs for you and your employer or health plan. The PDL Management Committee is comprised of senior level physicians and business leaders. You and your doctor decide which medication is appropriate for you.

# What factors does the PDL Management Committee look at to make tier placement decisions?

The PDL Management Committee decides the tier placement of a particular prescription medication based upon clinical information from the UnitedHealthcare Pharmacy and Therapeutics (P&T) Committee and economic and financial considerations. The Committee looks at the overall health care value of a particular medication in order to balance the need for flexibility and choice for our members and an affordable pharmacy benefit for employer groups and health plans.

# How often will prescription medications change tiers?

Medications may move to a higher tier up to three times per calendar year, depending on your benefit. Additionally, when a brand name medication becomes available as a generic, the tier status of the brand name medication and its corresponding generic will be evaluated. When a medication changes tiers, you may be required to pay more or less for that medication. These changes may occur without prior notice to you. For the most current information on your pharmacy coverage, please call the Customer Care number on your ID card or visit www.myuhc.com.

# What is the difference between brand name and generic medications?

Generic medications contain the same active ingredients as brand name medications, but they often cost less. Generic medications become available after the patent on the brand name medication expires. At that time, other companies are permitted to manufacture an FDA-approved, chemically equivalent medication. Many companies that make brand name medications also produce and market generic medications.

The next time your doctor gives you a prescription for a brand name medication, ask if a generic equivalent is available and if it might be appropriate for you. While there are exceptions, generic medications are usually your lowest cost option. Please note that some generic medications may be in Tier 2 or Tier 3 and will not have the lowest copayment available under your pharmacy benefit plan. Go to myuhc.com to determine the copayment for your generic medication.

# Why is the medication that I am currently taking no longer covered?

Medications may be excluded from coverage under your pharmacy benefit. For example, a prescription medication may be excluded from coverage when it is therapeutically equivalent to an over-the-counter medication. Medications on the PDL and other over-the-counter medications may be available.

If you have pharmacy benefit coverage with UnitedHealthcare, you may learn more about your benefit by visiting **www.myuhc.com** or by calling the Customer Care telephone number printed on your ID card. If you are not currently enrolled with UnitedHealthcare for pharmacy benefit coverage, you may access **www.myuhc.com** for additional information during your open enrollment period or you may contact your employer or health plan for additional information.

# When should I consider discussing over-the-counter or non-prescription medications with my doctor?

An over-the-counter medication can be an appropriate treatment for many conditions. Consult your doctor about over-the-counter alternatives to treat your condition. These medications are not covered under your pharmacy benefit, but they may cost less than your out-of-pocket expense for prescription medications.

# Why are there notations next to certain medications in the PDL, and what do they mean?

The specific definitions for these notations (**QLL, QD, N,** etc.) are listed at the bottom of each page of the PDL and refer to our pharmacy programs. These programs can help:

- Confirm coverage based on your benefit plan
- Alert pharmacists and doctors of potentially harmful medication interactions
- Notify your pharmacist and doctor of duplication in treatments

Please call Customer Care if you need additional information about these notations.

#### What should I do if I use a selfadministered injectable medication?

You may have coverage for self-administered injectable medications through your pharmacy benefit plan. UnitedHealthcare has developed a specialty pharmacy network for these medications. Please call our toll-free Specialty Pharmacy Referral Line at 1-866-429-8177 where a representative will answer questions about our program and then transfer you to a specialty pharmacy based on your particular specialty medication prescription.

# How do I access updated information about my pharmacy benefit?

Since the PDL may change periodically, we encourage you to visit **www.myuhc.com** or call the Customer Care number on your ID card for more current information.

Log on to myuhc.com for the following pharmacy resources and tools:

- Pharmacy benefit and coverage information
- Specific copayment amounts for prescription medications
- Possible lower-cost medication alternatives
- A list of medications based on a specific medical condition
- Medication interactions and side effects, etc.
- Locate a participating retail pharmacy by zip code
- Review your prescription history

And, if mail order is included in your pharmacy benefit, you can also:

- Refill prescriptions
- · Check the status of your order
- · Set up e-mail reminders for refills
- Manage your account

#### What if I still have questions?

Please call the Customer Care number on your ID card. Representatives are available to assist you 24 hours a day, except Thanksgiving and Christmas.

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**Tier One** 

Acebutolol

Acetaminophen with Caffeine

and Butalbital

Acetaminophen with Codeine QLL/QD Acetaminophen with Codeine, Caffeine

and Butalbital QLL/QD

Acetaminophen with Hydrocodone

QLL/QD Acetazolamide

Acetic Acid with Hydrocortisone Otic

Solution

Acyclovir Tablet, Capsule, Suspension Albuterol Extended Release Tablet

**Albuterol Inhalation Solution** 

Alendronate QLL Allopurinol Alprazolam

Alprazolam Extended Release Amantadine Tablet, Capsule, Syrup Amiloride with Hydrochlorothiazide

Amiodarone Amitriptyline

Amitriptyline with Chlordiazepoxide Amitriptyline with Perphenazine

Amlodipine Besylate

Amoxicillin

Amoxicillin with Potassium Clavulanate Amphetamine with Dextroamphetamine

Salt Combination

Ampicillin

Antipyrine with Benzocaine Otic

Solution Asmanex QLL

Aspirin with Caffeine and Butalbital Aspirin with Codeine, Caffeine and

Butalbital Atenolol

Atenolol with Chlorthalidone

Aviane Azathioprine Azithromycin Baclofen Benazepril

Benazepril with Hydrochlorothiazide

Benzonatate Benztropine Betamethasone Dipropionate

**Augmented Cream** 

Betamethasone Dipropionate Cream,

Lotion, Ointment, Gel Betamethasone Valerate Betamethasone with Clotrimazole

Bisoprolol

Bisoprolol with Hydrochlorothiazide

**Bromocriptine** Bumetanide Bupropion **QLL** 

Bupropion Sustained Action QLL, N

Buspirone Calcitriol Captopril

Captopril with Hydrochlorothiazide

Carbidopa/Levodopa Carisoprodol Carvedilol Cefaclor

Carbamazepine

Cefadroxil Cefuroxime Cephalexin Chlordiazepoxide Chlorhexidine Chlorthalidone Chlorzoxazone

Cholestyramine

Cholestyramine with Aspartame

Cilostazol Ciprofloxacin Citalopram QLL Clarithromycin Tablet

Clidinium with Chlordiazepoxide

Clindamycin Capsule

Clindamycin Gel, Soln, Lotion, Swabs

Clindamycin Vaginal Cream Clobetasol

Clomiphene Clomipramine Clonazepam Clonidine Clorazepate

Clotrimazole Troches

Clotrimazole with Betamethasone Colestipol Cromolyn Cyclessa Cyclobenzaprine Cyproheptadine Desipramine

Desmopressin

Desogen Desonide Desoximetasone Dexamethasone Dextroamphetamine

**Dextroamphetamine Sustained Release** Diazepam Diclofenac

Dicloxacillin Dicyclomine Diflorasone Diflunisal Diaoxin

Diltiazem Controlled Release Capsule

Diltiazem Sustained Release 12 Hours Cansule Diltiazem Tablet

Diphenoxylate Diphenoxylate with Atropine

Dipyridamole Doxazosin Doxepin Doxycycline **Econazole** Enalapril

Enalapril with Hydrochlorothiazide

Enpresse

Ergotamine Tartrate, Belladonna Alkaloids and Phenobarbital

Errin

Erythromycin Base 250, 333mg Erythromycin Ethylsuccinate **Erythromycin Stearate** 

Erythromycin with Benzoyl Peroxide

Estradiol Patch QLL

Estropipate **Etidronate Disodium** 

Etodolac

Fast Take Test Strips QLL, DS

Felodipine Fenofibrate Flecainide

Fluconazole 50, 100, 200mg N Fluconazole 150mg QLL Fludrocortisone

Flunisolide Nasal Spray QLL

Fluocinolone Fluocinonide Fluocinonide-F Fluorometholone Fluorouracil Cream Fluoxetine **QLL** Flurazepam Flurbiprofen

Fluticasone Nasal Spray QLL

Fluvoxamine QLL Folic Acid Foradil OLL Fosinopril

Fosinopril with Hydrochlorothiazide Freestyle Lite Test Strips QLL, DS Freestyle Test Strips QLL, DS

Frova QLL **Furosemide** 

Gabapentin Capsule, Tablet

Some medications are noted with N, QD, QLL, or DS. The definitions for these symbols are listed below. Your benefit plan determines how these medications may be covered for you.

N = Notification. There are a few medications that your doctor must notify us of to make sure their use is covered within your benefit.

= Progression Rx.

QD = Quantity Duration. Some medications have a limited amount that can be covered for a specific period of time.

QLL = Quantity Level Limit. Some medications have a limited amount that can be covered at one time

DS = Diabetic Supplies. Diabetic supplies may be covered by your benefit plan. ½T = Eligible for Half Tablet Program.

Gemfibrozil Gentamicin Glimepiride Glipizide

Glipizide Extended-Release

Glyburide

Glyburide Micronized

Guanfacine

Halobetasol Cream, Ointment

Haloperidol Hvdralazine

Hydrochlorothiazide

Hydrocodone with Homatropine Hydrocortisone Acetate Suppositories

Hydrocortisone Valerate Hydromorphone Hydroxychloroquine Hvdroxvzine

Ibuprofen - Prescription strengths only

Ibuprofen with Hydrocodone

**Imipramine** Indapamide Indomethacin

**Ipratropium Inhalation Solution** 

Isometheptene, Dichloralphenazone and

Acetaminophen Isoniazid

Isosorbide Dinitrate Isosorbide Mononitrate

Isradipine

Junel

Itraconazole QLL, N

Junel FE Kariva Ketoconazole Ketoprofen Ketorolac Labetalol Lactulose Leflunomide QLL Lessina Levothyroxine

Levora Lidocaine Viscous

Lisinopril

Lisinopril with Hydrochlorothiazide

Lithium Carbonate

Lithium Carbonate Controlled-Release Lithium Carbonate Extended-Release

Lo/Ovral Lorazepam Lovastatin QLL/QD Maxalt QLL Maxalt MLT QLL Mebendazole

Medroxyprogesterone 150mg/ml QLL

Medroxyprogesterone Tablet Mefloquine QLL

Megestrol Meloxicam QLL Meneridine

Meperidine with Promethazine

Metformin

Metformin Extended-Release

Methadone Methimazole Methocarbamol Methotrexate Methyldopa Methylphenidate

Methylphenidate Extended-Release

Methylprednisolone

Methyltestosterone with Esterfied

Estrogens Metoclopramide Metolazone Metoprolol

Metoprolol Succinate Sustained

Release 25mg Metronidazole Metronidazole Cream Microgestin Microgestin FE Minoxidil Tablet

Mirtazapine QLL Mirtazapine Dispersible Tablet QLL

Misoprostol Mometasone Mononessa Morphine

Morphine Sulfate Controlled Release

QLL/QD

Mupirocin Ointment

Nadolol

Nadolol with Bendroflumethiazide Naproxen - Prescription strengths only

Necon Nefazodone QLL

Neomycin/Polymyxin B/Dexamethasone

Neomycin/Polymyxin/Gramicidin Neomycin/Polymyxin/Hydrocortisone

**Nifedipine** 

Nifedipine Controlled-Release Nifedipine Extended Release Nitrofurantoin/Nitrofurantoin

Macrocrystals

Nitrofurantoin Macrocrystals

Nitroglycerin Norethindrone Nortrel

Nortriptyline **Novolin Vials Novolog Vials** Nvstatin

Nystatin with Triamcinolone Ofloxacin Eve Drops Ofloxacin Otic Drops

**Ogestrel** 

Ondansetron QLL

One Touch Test Strips QLL, DS One Touch Ultra Test Strips QLL, DS

Orapred Oral Solution

Oxaprozin Oxazepam Oxvbutvnin Oxycodone

Oxycodone with Acetaminophen

QLL/QD

Oxycodone with Aspirin Oxycodone with Ibuprofen QLL

Paroxetine QLL

PEG 3350/Powder for Solution

Penicillin V Potassium Pentoxifvlline Permethrin Cream Phenazopyridine Phenobarbital

Phenylephrine with Chlorpheniramine

and Scopolamine

Phenylephrine with Hydrocodone

Phenytoin Pindolol Piroxicam

Polymyxin B with Trimethoprim

Portia

Potassium Chloride Potassium Citrate Pravastatin QLL/QD, 1/2T

Prazosin

Precision Q-I-D Test Strips QLL, DS Precision Xtra Test Strips QLL, DS

Prednisolone Prednisone

Prenatal Vitamins - Generic prescription

strengths only Primidone Probenecid Prochlorperazine Promethazine

Promethazine with Codeine

Promethazine with Dextromethorphan Promethazine with Phenylephrine Promethazine with Phenylephrine and

Codeine Propafenone

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Propoxyphene

Propoxyphene with Acetaminophen

QLL/QD

Propranolol Tablet
Propylthiouracil
Pulmicort Flexhaler **QLL**Pulmicort Turbuhaler **QLL** 

QVAR QLL
Ranitidine Syrup
Relpax QLL
Ribavirin QLL, N
Rifampin
Salsalate
Selenium Sulfide
Sertraline QLL, 1/2T
Silver Sulfadiazine
Simvastatin QLL/QD, 1/2T

Sodium Fluoride

Sotalol

Spironolactone with Hydrochlorothiazide Spironolactone

Spironolactone Sprintec Sucralfate Sulfacetamide

Sulfacetamide with Sulfur

Sulfamethoxazole with Trimethoprim

Sulfasalazine Sulfasalazine EC Sulfatrim

Sulindac

Surestep Test Strips **QLL, DS** 

Tamoxifen
Temazepam
Terazosin
Terbutaline

Terconazole Suppository QLL

Tetracycline Theophylline

Theophylline Anhydrous Tablet,

**Sustained Action** 

Thyroid Timolol Drops Tizanidine Tobramycin

Torsemide

Tramadol **QLL** 

Tramadol with

Acetaminophen **QLL** 

Trazodone Tretinoin **N** Tri-Sprintec Triamcinolone

Triamterene with Hydrochlorothiazide

Triazolam

Trimethobenzamide

Trimethobenzamide with Benzocaine

Trimethoprim

Trimipramine Maleate

Trinessa Trivora Ursodiol Venlafaxine **QLL** Verapamil Warfarin

Xopenex HFA **QLL**Zolpidem **QLL/QD**Zomig **QLL**Zomig ZMT **QLL**Zonisamide
Zovia 1/35E
Zovia 1/50E

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 Diabetic Supplies. Diabetic supplies may be covered by your benefit plan.

1/2T = Eligible for Half Tablet Program.

Tier Two
Aceon 1/2T
Aciphex QLL/QD
Activella
Actonel QLL

Actonel with Calcium **QLL**Actoplus Met **QLL**Actos **QLL** 

Adderall XR **QLL** Adoxa (Dosepack = Tier 3)

Advicor Aldara Alesse Alphagan P **QLL** Altace

Altoprev **QLL/QD** Androderm Androgel **QLL** Antabuse Antara

Aranesp QLL/QD
Aricept QLL
Aricept ODT QLL
Arimidex
Arixtra QLL
Asacol
Astelin QLL
Atrovent Inhaler
Avandamet QLL
Avandaryl QLL

Avandia **QLL**Avonex **QLL**Axid Oral Solution
Azelex

Balsalazide Disodium Benicar **QLL/QD**, ½T

Benicar HCT **QLL/QD**Benzamycin
Betaseron **QLL/QD**Betoptic S

BiDil Boniva **QLL** 

Butorphanol Nasal Spray QLL

Byetta **QLL**Cabergoline
Canasa
Capex Shampoo
Carac Cream
Cardizem LA
Cefdinir **QLL** 

Cefprozil Cellcept Cenestin Ciprodex

Clarithromycin Suspension

Clarithromycin XL

Cleocin Vaginal Suppositories

Climara QLL
Clindesse
Copaxone QLL
Coumadin
Cozaar QLL/QD, ½T
Crestor QLL/QD, ½T

Dapsone
Depakote
Depakote ER
Depakote Sprinkle
Diclofenac Sodium Drops

Dilantin

Diltiazem Sustained Action Capsule Diltiazem Sustained Release

24 Hour Capsule
Diovan QLL/QD, '/2T
Diovan HCT QLL/QD
Dovonex QLL

Duetact QLL
Effexor XR QLL
Elestat
Emend QLL
Enablex QLL
Enjuvia
Entocort EC
Epogen QLL/QD
Esclim QLL
Estraderm QLL
Estratest

Estring **QLL**Evista
Femara
Fentanyl Citrat

Estratest H.S.

Fentanyl Citrate Lollipop **QLL/QD**, **N**Fentanyl Transdermal System **QLL/QD**Fortical **QLL** 

Fortical **QLL**Fosrenol
Gabitril
Geodon **QLL** 

Glipizide with Metformin Glucagon Emergency Kit Glyburide with Metformin

Glycopyrrolate Granisetron Tablet **QLL** Grifulvin V Tablet Humatrope **QLL/QD, N** Hyzaar **QLL/QD** 

Imitrex Injection QLL
Intal QLL
Isotretinoin
Janumet QLL
Januvia QLL
Keppra

Lanoxin
Lantus Vials
Leuprolide
Levaquin
Levemir Vials
Lidoderm **QLL/QD**Lindane

Lipitor **QLL/QD**, 1/2**T**Locoid Lipocream
Lofibra Tablet
Lovenox **QLL**Lumigan **QLL**Malarone
Mesalamine Enema

Methergine
Metoprolol Succinate Sustained

Release 50, 100, 200mg Metrogel Metrolotion

Metronidazole Vaginal Gel

Micardis **QLL/QD**Micardis HCT **QLL/QD** 

Minocycline
Mirapex
Moexipril ½T
Nabumetone
Nasonex QLL
Neoral
Neupogen
Niaspan

Niaspan Norditropin **QLL/QD, N** Novolin Pens/Cartridges Novolog Pens/Cartridges Nutropin **QLL/QD, N** 

Nuvaring

Omeprazole **QLL/QD** 

Optivar Orphenadrine

Orphenadrine Compound

Oxandrolone
Oxcarbazepine
Oxycontin **QLL/QD**Oxytrol

Pegasys **QLL, N**Peg-Intron **QLL, N**Plavix
Prandin **QLL** 

Precare
Precose
Prefest
Prevacid So

Prevacid Solutab **QLL/QD** 

Prevacid Soldian
Prevacid Soldian
Prevacid Soldian
Prevacid Soldian
Procrit QLL/QD
Procrit QLL/QD
Prograf

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 DS = Diabetic Supplies. Diabetic supplies may be covered by your benefit plan.

<sup>1/2</sup>T = Eligible for Half Tablet Program.

Prometrium

Protonix QLL/QD

Protopic QLL, N

Pulmicort Respules **QLL** 

Pylera

Quinapril

Quinapril with Hydrochlorothiazide

Ramipril Capsule

Ranexa QLL

Renagel

Renvela

Requip

Retin-A Micro QLL, N

Risperdal (M-Tab = Tier 3) QLL

Roferon A QLL, N

Seroquel QLL

Serostim QLL/QD, N

Singulair QLL

Soriatane

Spiriva QLL

Sular

Symbyax

Synthroid

Tazorac QLL, N

Tegretol

Tegretol XR

Terbinafine Tablet QLL, N

Testim 1% QLL

Tev-Tropin QLL/QD, N

Tilade **QLL** 

Tolmetin

Travatan **QLL** 

Travatan Z QLL

Tricor Tablet

Triglide

Triphasil

Trusopt

Twinject **QLL** 

Urso

Urso Forte

Valtrex QLL

Vesicare **QLL** 

Vivelle QLL

Vivelle-Dot QLL

Vytorin **QLL** 

Vyvanse QLL

Welchol

Yasmin

Yaz

Zegerid QLL/QD

Zomig Nasal Spray QLL

Zovirax Ointment, Cream

Zylet

Zyprexa (Zydis = Tier 3) **QLL** 

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**Tier Three** Abilify QLL Accolate QLL

Accu-Chek Test Strips QLL, DS

Accupril Accuretic Aclovate Actiq QLL/QD, N Acular

Advair Diskus QLL Advair HFA QLL

Aggrenox

Albuterol Sulfate/Ipratropium Solution,

Non-Oral Allegra QLL/QD

Allegra ODT QLL/QD, Excluded Allegra Suspension QLL/QD, Excluded

Allegra-D QLL/QD, Excluded

Alocril Alomide

Ambien CR QLL/QD Amerge QLL

Amlodipine and Benazepril QLL

Analpram-HC Anzemet QLL Apri

Armour Thyroid Arthrotec

Ascensia Autodisc QLL, DS Ascensia Elite QLL, DS Atacand QLL/QD. 1/2T Atacand HCT QLL/QD Auamentin XR Avalide QLL/QD Avapro QLL/QD, 1/2T

Avelox Avinza QLL/QD Avodart QLL, N Axert QLL Azmacort QLL Bactroban QLL Beconase AQ QLL Benzaclin

Biaxin Suspension Biaxin XL

Blephamide Eye Drops **Bupropion Sustained Release** 24 Hour 300mg QLL, N

Caduet QLL

Carafate Suspension

Carbatrol Catapres-TTS QLL

Cefzil

Celebrex QLL/QD

Cenogen Ultra Cesamet QLL. P

Cesia Chemstrip BG Test Strips QLL, DS Cialis OD

Ciclopirox Solution, Topical QLL

Ciloxan Ophthalmic Ointment

Cipro XR

Ciprofloxacin Tablet, Sustained Release,

Clarinex QLL/QD. Excluded

Clarinex-D QLL/QD. Excluded Climara Pro QLL

Clindagel Colazal Colvte

Combinatch QLL Combivent QLL Concerta QLL Coreg CR QLL Cosopt QLL Covera-HS Cryselle Cutivate

Cymbalta QLL/QD Cytomel Davtrana **QLL** Denavir

Derma-Smoothe/FS Detrol Detrol LA **QLL** Differin QLL, N Diprolene

Ditropan XL QLL Doryx

**Dostinex** Duac, Duac CS DuoNeb

Duragesic QLL/QD Elidel QLL, N Elocon Enbrel QLL/QD Epipen QLL Epipen Jr. QLL Estrostep FE Extendryl SR

Factive Famciclovir QLL Famvir **QLL FemHRT** 

Fentora QLL/QD, N Fexofenadine QLL/QD

Finacea Finasteride N Flomax

Flovent HFA QLL Focalin QLL Focalin XR QLL Fosamax Plus D QLL Genotropin QLL/QD, N

Glucometer Test Strips QLL, DS

Glucovance Glumetza Gvnazole-1

Gynodiol 1.5mg Tablet

Humalog Humibid DM Humibid LA Humira QLL/QD Humulin

Imitrex Nasal Spray QLL Imitrex Tablet QLL Inderal LA Intron A QLL, N Invega QLL Kadian QLL/QD

Ketek

Kineret QLL/QD Kytril Tablet QLL Lamictal

Lamisil Tablet QLL, N Lantus SoloStar Lescol QLL/QD Lescol XL QLL/QD Levemir Pen Levitra **QD** 

Levonorgestrel-Ethinyl Estradiol Tablet,

Dosepack, 3 Month QLL

Levothroid Lexapro QLL, 1/2T

Lialda Locoid Loestrin Loestrin FE Loprox Lotemax Lotrel QLL Lovaza QLL Low-Ogestrel Lunesta QLL/QD

Luxiq Lvbrel Lvrica QLL/QD Mavik 1/2T

Maxair Autohaler QLL

Menest Mentax

Metadate CD QLL

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Metaglip Metrogel Vaginal

Miacalcin Nasal Spray QLL

Mircette Modicon Naftin Nasacort **QLL** Nasacort AQ QLL

Natelle Nestabs RX

Nexium QLL/QD. Excluded

Nitrostat Nordette Noritate Nulev Nulvtelv

Olux QLL Omnicef QLL Orapred ODT Ortho Evra QLL Ortho Micronor

Ortho Tri-Cyclen Ortho Tri-Cyclen Lo

Ortho-Cept Ortho-Cyclen Ortho-Novum Oscion Ovcon-50

Oxistat

Oxybutynin Sustained Release QLL

Pantoprazole QLL/QD

**Pataday** Patanol

Paxil CR QLL Penlac QLL Pentasa Periostat

Pexeva QLL, 1/2T Toprol XL 50, 100, 200mg Plexion Tracer BG Test Strips QLL, DS

Ponstel Trandolapril **Precare Conceive** Precare Prenatal Tri-Norinyl Premarin Triaz Excluded Premesis RX Trileptal Premphase Tussionex Prempro Uniretic Prenate Advance Univasc 1/2T Prenate GT Uroxatral **QLL** Prevacid Capsule QLL/QD, Excluded Vagifem Vantin

Primacare

ProAir HFA QLL **Propranolol Sustained Action Capsule** 

Proscar N

Proventil HFA QLL

Verapamil Capsule, 24 Hour Sustained

Release Pellets

Provigil QLL, N Prozac Weekly QLL

Quixin Rebif QLL/QD Reclipsen Relafen Relenza QLL, N Restasis QLL, N Restoril 7.5, 22.5mg Rhinocort **QLL** Rhinocort Agua QLL

Rosanil Rozerem QLL/QD Sanctura QLL Sarafem QLL

Ritalin LA QLL

Robinul Forte

Seasonale QLL Seasonique Sensipar

Serevent Diskus QLL

Skelaxin Solia

Sonata QLL/QD Starlix QLL Strattera QLL Symlin **QLL** Tamiflu QLL, N

Tarka

Tekturna QLL/QD

Teguin Terazol **QLL** 

Terconazole Cream QLL

Teveten QLL/QD Theo-24 Tobradex Topamax

Transderm-Scop

Velivet Ventolin HFA QLL

Verelan PM Viagra QD Vigamox Visicol

Voltaren Eye Drops Wellbutrin XL QLL, N

Xalatan QLL **Xopenex Solution** Xyzal QLL/QD Zelnorm QLL/QD, N Zetia QLL/QD Ziana QLL Zmax QLL Zvmar

NOTE:

• Compounded prescriptions are

**Tier Three** 

• Insulin pens & cartridges are Tier Three except for Novolin and Novolog pens and cartridges which are Tier Two.

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#### **Additional Tier Three drugs** with a generic equivalent in Tier One

Adderall (Amphetamine with

**Dextroamphetamine Salt Combination)** 

Aldactone (Spironolactone)

Amaryl (Glimepiride)

Ambien QLL/QD (Zolpidem QLL/QD)

Anaprox (Naproxen)

Arava QLL (Leflunomide QLL)

Ativan (Lorazepam)

Augmentin ES (Amoxicillin with

Potassium Clavulanate)

Biaxin Tablet (Clarithromycin Tablet)

Buspar (Buspirone)

Calan, Calan SR (Verapamil)

Capoten (Captopril)

Cardizem CD except for 360mg strength (Diltiazem Sustained Release 24 Hour

Capsule)

Cardura (Doxazosin)

Ceftin (Cefuroxime)

Celexa QLL (Citalogram QLL)

Ciloxan Eye Drops (Ciprofloxacin)

Cipro (Ciprofloxacin)

Cleocin T (Clindamycin Gel, Lotion,

Solution, Swabs)

Colestid (Colestipol)

Combunox QLL (Oxycodone with

Ibuprofen QLL)

Copegus QLL, N (Ribavirin QLL, N)

Coreg (Carvedilol)

Darvocet-N QLL/QD (Propoxyphene with

Acetaminophen QLL/QD)

DDAVP (Desmopressin)

Depo-Provera QLL

(Medroxyprogesterone

Acetate 150mg/ml QLL)

Dexedrine SR (Dextroamphetamine

Sustained Release Capsule)

DiaBeta, Micronase, Glynase

(Glyburide)

Didronel (Etidronate Disodium)

Diflucan 50, 100, 200mg

Tablet N (Fluconazole N)

Diflucan 150mg QLL (Fluconazole QLL)

Diprolene AF (Betamethasone

Dipropionate Augmented Cream)

Duricef (Cefadroxil)

Dyazide (Triamterene with

Hydrochlorothiazide)

Dynacirc (Isradipine)

Effexor QLL (Venlafaxine QLL)

Elocon Cream, Ointment, Solution

(Mometasone)

Eskalith CR (Lithium Carbonate

Controlled-Release)

Fioricet (Butalbital with Acetaminophen and Caffeine)

Flexeril (Cyclobenzaprine)

Flonase **QLL** (Fluticasone Nasal

Spray QLL)

Floxin Otic (Ofloxacin Otic Drops)

Fosamax QLL (Alendronate QLL)

Glucophage, XR (Metformin)

Glucotrol, XL (Glipizide)

Hytrin (Terazosin)

Inderal (Propranolol)

Keflex (Cephalexin)

Klonopin (Clonazepam)

Lasix (Furosemide)

Lithobid (Lithium Carbonate

Extended-Release)

Lopid (Gemfibrozil)

Lopressor (Metoprolol)

Lotensin (Benazepril)

Lotensin HCT (Benazepril with

Hydrochlorothiazide)

Lotrisone (Betamethasone with

Clotrimazole)

Macrobid (Nitrofurantoin/

Nitrofurantoin Macrocrystal)

Medrol Dosepak (Methylprednisolone) Metrocream (Metronidazole Cream)

Mevacor QLL/QD (Lovastatin QLL/QD)

Mobic QLL (Meloxicam QLL)

Monopril (Fosinopril)

Monopril HCT (Fosinopril with

Hydrochlorothiazide)

Motrin (Ibuprofen) - Prescription

strengths only

Mycelex Troche (Clotrimazole Troche)

Naprosyn (Naproxen) - Prescription

strengths only

Nasarel QLL, Nasalide QLL (Flunisolide

Nasal Spray QLL)

Neurontin Capsule, Tablet (Gabapentin)

Nizoral (Ketoconozole)

Norvasc (Amlodipine Besylate)

Ocuflox Eye Drops (Ofloxacin)

Paxil QLL (Paroxetine QLL)

Percocet 5-325, 7.5-500, 10-650 QLL/QD

(Oxycodone with Acetaminophen

QLL/QD)

Plendil (Felodipine) Pletal (Cilostazol)

Pravachol QLL/QD. 1/2T

(Pravastatin QLL/QD, 1/2T)

Prinivil, Zestril (Lisinopril)

Prinzide, Zestoretic (Lisinopril with Hydrochlorothiazide)

Procardia XL (Nifedipine Extended-Releasel

Provera (Medroxyprogesterone)

Prozac OLL (Fluoxetine OLL)

Rebetol QLL, N (Ribavirin QLL, N)

Remeron QLL (Mirtazapine QLL)

Remeron SolTab QLL (Mirtazapine

Dispersible Tablet QLL)

Restoril 15, 30mg (Temazepam)

Ritalin (Methylphenidate)

Ritalin SR (Methylphenidate

Extended-Release)

Sporanox QLL, N (Itraconazole QLL, N)

Surmontil (Trimipramine Maleate)

Tenormin (Atenolol)

Tenoretic (Atenolol with Chlorthalidone)

Toprol XL 25mg (Metoprolol Succinate

Sustained Release)

Tylenol #3 QLL/QD (Acetaminophen with

Codeine QLL/QD)

Ultracet QLL (Tramadol with

Acetaminophen QLL)

Ultram QLL (Tramadol QLL)

Ultravate Cream, Ointment (Halobetasol Propionate)

Uniphyl (Theophylline Anhydrous Tablet,

Sustained Action)

Valium (Diazepam)

Vaseretic (Enalapril with Hydrochlorothiazide)

Vasotec (Enalapril)

Vicodin QLL/QD, Vicodin ES QLL/QD

(Acetaminophen with Hydrocodone QLL/QD)

Vicoprofen (Ibuprofen with

Hvdrocodone)

Voltaren Tablet (Diclofenac)

Wellbutrin QLL (Bupropion QLL)

Wellbutrin SR QLL, N (Bupropion

Sustained Action QLL, N)

Xanax, Xanax XR (Alprazolam)

Zantac Syrup (Ranitidine Syrup)

Ziac (Bisoprolol with Hydrochlorothiazide)

Zithromax (Azithromycin)

Zocor QLL/QD, 1/2T

(Simvastatin QLL/QD, 1/2T) Zofran QLL (Ondansetron QLL)

Zoloft QLL, 1/2T (Sertraline QLL, 1/2T)

(Acyclovir)

Zonegran (Zonisamide) Zovirax Tablet, Capsule, Suspension

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