






## Updates to your prescription benefits

Effective January 1, 2013

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.

 <p><b>Tier 1</b> Your lowest-cost medications</p>	 <p><b>Tier 2</b> Your midrange-cost medications</p>	 <p><b>Tier 3</b> Your highest-cost medications</p>
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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.

### 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
Diabetes	Janumet	2 ▶ 3	Kombiglyze XR, Jentadueto
	Januvia	2 ▶ 3	Onglyza, Tradjenta
Osteoporosis	Actonel	2 ▶ 3	alendronate (generic Fosamax), ibandronate (generic Boniva)
Overactive Bladder	Enablex	2 ▶ 3	oxybutynin (generic Ditropan), oxybutynin sustained-release (generic Ditropan XL), trospium (generic Sanctura), Sanctura XR, Vesicare
Viral Infection	Condylox gel	2 ▶ 3	podofilox liquid (generic Condylox liquid)

### Medication being added to the Select Designated Pharmacy (SDP) Program

Through this program, participants must choose one of three options to continue to receive network benefits. Call the number on the back of your health plan ID card to determine if this program applies to your benefit plan.

Therapeutic Use	Medication Name	Tier Placement	Lower-Cost Options
Depression	Cymbalta	Tier 3	Depression Diagnosis: citalopram (generic Celexa), fluoxetine (generic Prozac), sertraline (generic Zoloft), venlafaxine sustained-release (generic Effexor XR), Pristiq
			Neuropathic Pain Diagnosis: gabapentin (generic Neurontin)
Diabetes	Janumet	Tier 3	Kombiglyze XR, Jentadueto
	Januvia	Tier 3	Onglyza, Tradjenta
	Janumet XR	Tier 3	Kombiglyze XR, Jentadueto
	Juvisync	Tier 3	simvastatin plus Onglyza or Tradjenta

### 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
Acne	Clindagel	clindamycin gel 1% (generic Cleocin-T)
	Sumaxin CP	sulfacetamide sodium/sulfur (generic Sulfatol)
Contraceptive	Generess FE	Gildess FE, Junel FE, Microgestin FE (generics for Loestrin FE)

## Medications excluded from benefit coverage

Therapeutic Use	Medication Name	Lower-Cost Options
<b>Depression</b>	Oleptro	trazodone (generic Desyrel)
<b>Erectile Dysfunction</b>	Staxyn	Levitra, Viagra
<b>Eye Allergies</b>	Bepreve	OTC ketotifen (Zaditor), azelastine ophthalmic solution (generic Optivar), Lastacaft
	Optivar (brand only)	
<b>Eye Pain</b>	Bromday	bromfenac (generic Xibrom), ketorolac (generic Acular)
<b>Hepatitis C</b>	Ribapak	ribavirin (generic Copegus, Rebetol)
<b>High Blood Pressure</b>	Exforge	<ul style="list-style-type: none"> <li>amlodipine (generic Norvasc) plus losartan (generic Cozaar)</li> <li>amlodipine (generic Norvasc) plus Benicar or Micardis</li> <li>amlodipine (generic Norvasc) plus Diovan</li> </ul>
	Exforge HCT	<ul style="list-style-type: none"> <li>amlodipine (generic Norvasc) plus losartan/hydrochlorothiazide (generic Hyzaar)</li> <li>amlodipine (generic Norvasc) plus Benicar HCT or Micardis HCT</li> <li>amlodipine (generic Norvasc) plus Diovan HCT</li> </ul>
<b>High Cholesterol</b>	Altoprev	lovastatin (generic Mevacor)
	Lipitor (brand only)	atorvastatin (generic Lipitor)
<b>Inflammation</b>	Flo-Pred	prednisolone (generic Prelone), Orapred, Pediapred
<b>Nasal Allergies</b>	Astelin (brand only)	azelastine nasal spray (generic Astelin), Astepro
<b>Neuropathic Pain</b>	Gralise	gabapentin (generic Neurontin)
<b>Pain</b>	ConZip	tramadol extended-release (generic Ultram ER), tramadol immediate-release (generic Ultram)
	Duexis	ibuprofen (generic Motrin) plus OTC famotidine (generic Pepcid AC)
	Lorzone	chlorzoxazone (generic Parafon Forte DSC)
	Skelaxin (brand only)	chlorzoxazone (generic Parafon Forte DSC), cyclobenzaprine (generic Flexeril), metaxalone (generic Skelaxin), methocarbamol (generic Robaxin)
<b>Psoriasis</b>	Uramaxin GT Kit	urea 40%
<b>Restless Legs Syndrome</b>	Horizant	gabapentin (generic Neurontin)
<b>Rosacea</b>	Metrogel 1%	metronidazole gel 0.75% (generic Metrogel)
	Rosadan Kit (gel)	metronidazole gel 0.75% (generic Metrogel)
<b>Skin Conditions (Other)</b>	Aqua Glycolic HC	hydrocortisone 2.5% (generic Hytone)
	Trianax	triamcinolone (generic Aristocort)
	ProCort	hydrocortisone/pramoxine (generic Analpram E)
	Promiseb Complete Kit	Promiseb
<b>Toenail Infections</b>	Pedipirox-4	ciclopirox (generic Penlac)
<b>Ulcers, Heartburn &amp; Reflux</b>	Zegerid capsule	OTC Zegerid, omeprazole (generic Prilosec), pantoprazole (generic Protonix)



### For more information

Visit [myuhc.com](http://myuhc.com) or call the toll-free number on the back of your health plan ID card.