

2016 City of Austin
Preventive Drug List for
Consumer Driven Health Plans
Expanded List
80% Plan paid, no Deductible



### **Alphabetical Listing - Expanded List**

	B	۸	

Abacavir

Abacavir-Lamivudine-Zidovudine

Abilify
Acarbose
Accolate
Accuneb

Accupril Accuretic Acebutolol Aceon

Actonel ACTOplus Met ACTOplus Met XR

ACTOplus Met X Adalat CC Advair Diskus Advair HFA Advicor Aerospan Afeditab

**Aggrenox**Albuterol Nebulized
Solution

Albuterol Oral Tablet

Aldactazide

Aldactone
Alendronate
Altace
Alvesco
Amaryl
Amiloride

Amiloride-Hydrochlorothiazide Aminophylline

Amlodipine Amlodipine-Benazepril Amlodipine-Valsartan

Amlodipine-Valsartai Anastrozole Anoro Ellipta

Apidra Aptivus Arcapta Neohaler

Aripiprazole
Arixtra
Arnuity Ellipta
Aromasin
Asmanex HFA
Asmanex Twisthaler

Atacand HCT

Atenolol-Chlorthalidone

Atripla
Atorvastatin
Atrovent HFA
Aubagio
Avalide
Avandamet

Avandamet Avandaryl Avandia Avapro Avonex Azasan Azathioprine В

Benazepril Benazepril-Hydrochlorothiazide

Benicar Benicar HCT Betaseron Betaxolol\* Bidil

Bisoprolol-

Hydrochlorothiazide

Boniva
Breo Ellipta
Brilinta
Brovana
Budesonide
Bumetanide
Bydureon
Byetta
Bystolic

С

Calan Calan SR

Calcitonin (Salmon) Candesartan Candesartan-

Hydrochlorothiazide Captopril

Captopril-Hydrochlorothiazide

Cardene SR
Cardizem
Cardizem CD
Cardizem LA
Cardura
Cardura XL
Cartia XT
Carvedilol
Catapres

Catapres TTS
Cellcept
Chlorothiazide
Chlorpromazine
Cholestyramine

Cholestyramine Light
Cilostazol
Clonidine
Clonidine Patch
Clopidogrel
Clorpress
Clozapine

Clozapine Clozaril Colestid Colestipol

Corzide

Combivent Respimat
Combivir
Complera
Copaxone
Coreg
Corgard

Coumadin Covera HS Cozaar Crestor Crixivan Cromolyn Cycloset

Cyclosporine

D

Daliresp Demadex Diabeta

Diabetic Testing - Lancets Didanosine

Didronel
Dilacor XR
Dilt CD
Dilt XR
Diltia XT
Diltiazem
Diltiazem ER
Diltzac FR

Dipyridamole
Diuril
Doxazosin
Duetact
Dulera
Duoneb
Dutoprol

Dyazide Dynacirc CR Dynacirum

Edarbi Edarbyclor Edecrin Edurant Effient Eliquis

Eliquis
Elixophyllin
Emtriva
Enalapril
Enalapril-

Hydrochlorothiazide Enoxaparin

Epaned
Epivir
Eplerenone
Eprosartan
Epzicom
Etidronate

Exemestane

**Evotaz** 

F

Fanapt
Fareston
Farxiga
FazaClo
Felodipine ER
Fenofibrate 54, 160 mg

Tablet
Flovent Diskus
Flovent HFA
Fluphenazine
Fluvastatin

Fondaparinux Foradil Forteo Fortical Fosamax

Fosamax Plus D

Fosinopril-

Hydrochlorothiazide

Fragmin
Furosemide
Fuzeon

G

Gastrocrom Gemfibrozil Gengraf Gilenya Glimepiride

Glimepiride Glipizide Glipizide ER Glipizide-Metformin

Glucophage Glucophage XR Glucotrol Glucotrol XL Glucovance

Glyburide Glyburide Micronized Glyburide-Metformin

Glynase Glyset Guanfacine

Н

Haloperidol
Hecoria
Heparin
Humalog
Humalog Mix 50/50
Humalog Mix 75/25
Humulin 50/50
Humulin 70/30
Humulin N
Humulin R
Hydralazine
Hydrochlorothiazide

Hyzaar

ı

Ibandronate
Imuran
Incruse Ellipta
Indapamide
Inderal
Inderal LA
Innopran XL
Inspra

Insulin Needles/Syringes

Intelence
Invega
Invirase
Invokamet
Invokana
Ipratropium
Ipratropium/Albuterol
Irbesartan

Irbesartan -Hvdrochlorothiazide

Isentress Isoptin SR Isradipine

J

Jantoven
Janumet
Janumet XR
Januvia
Jardiance
Jentadueto

K

Kaletra Kazano Kombiglyze XR

<u>L</u>

Labetalol Lamivudine Lamivudine-Zidovudine

Lantus
Lasix
Latuda

Lescol
Lescol XL
Letrozole
Levatol
Levemir
Lexiva
Lisinopril

Lisinopril-

Hydrochlorothiazide

Livalo
Lopid
Lopressor
Lopressor HCT
Losartan

Losartan-

Hydrochlorothiazide

Lotensin HCT Lotrel Lovastatin Lovenox Loxapine Lufyllin

### **Alphabetical Listing - Expanded List**

#### М

Matzim LA Mavik Maxzide

Metaproterenol Metformin Metformin ER (generic Glucophage XR)

Methyclothiazide Methyldopa Methyldopa-

Hydrochlorothiazide Metolazone Metoprolol Succinate

Metoprolol Succinate Metoprolol Tartrate Metoprolol-

Hydrochlorothiazide

Mevacor Miacalcin Microzide Midamor Minipress Minoxidil Moban

Moexipril-Hydrochlorothiazide Montelukast Mycophenolate Mycophenolic Acid

Myfortic

Moexipril

Ν

Nadolol Nadolol-

Bendroflumethazide

Nateglinide **Neoral** 

**Nesina**Nevirapine
Nevirapine

Extended-Release Niacin

Extended-Release

Niacor Niaspan Nicardipine Nifedipine Nifedipine ER Nimodipine Nisoldipine Norvasc

Norvir Novolin 70/30 Novolin N Novolin R

Novolog

Novolog Mix 70/30

0

Olanzapine Omega-3 Acid Ethyl Esters

OneTouch Diabetic Meters

OneTouch Diabetic Test Strips Onglyza

Р

Oseni

Pediatric Flouride Preparations

Perforomist Perindopril

Perphenazine Persantine

Pioglitazone
Pioglitazone-Glimepiride

Pioglitazone-Metformin Pindolol Pletal

Pradaxa
PrandiMet
Prandin
Pravachol
Pravastatin

Pravastatin Prazosin

**Precose** Prenatal Vitamins

Prevalite
Prezcobix
Prezista

Prinivil
Proair HFA
Procardia
Procardia XL

Prograf
Propranolol
Propranolol
Hydrochlorothiazide

Proventil HFA
Pulmicort

Pulmicort Pulmicort Flexhaler

Q

Questran Questran Light

Quetiapine Quinapril Quinapril-

Hydrochlorothiazide

QVÁR

R

Raloxifene
Ramipril
Rapamune
Rebif
Repaglinide
Rescriptor
Reserpine
Retrovir
Reyataz
Riomet
Risedronate

Risperidone

S

Sandimmune
Saphris
Savaysa
Sectral
Selzentry
Serevent Diskus
Seroquel XR
Simcor
Simcor
Simvastatin
Sirolimus

Spiriva HandiHaler Spiriva Respimat Spironolactone

Spironolactone-Hydrochlorothiazide

Starlix Stavudine Stribild

Striverdi Respimat Sular

Sustiva SymlinPen

Т

Tacrolimus
Tamiflu
Tamoxifen
Tanzeum
Tarka
Taztia XT
Tecfidera
Tekturna
Tekturna HCT

Telmisartan Telmisartan-

Hydrochlorothiazide

Tenex
Tenoretic
Tenormin
Terazosin

**Terbutaline** 

Teveten Teveten HCT Thalitone Theo-24

Theochron Theophylline

Theophylline/Guaifenesin

Thioridazine Thiothixene **Tiazac** 

Ticlopidine Timolol\* **Tivicay** 

Tolbutamide
Toprol XL
Torsemide

Tradjenta Trandate

Trandolapril
Trandolapril-Verapamil

Triamterene-

Hydrochlorothiazide Trifluoperazine

Triumeq Trizivir Trulicity Truvada

Tudorza Pressair

U

Uniretic Univasc

V

Valsartan Valsartan-

Hydrochlorothiazide **Vascepa** 

Vaseretic
Vasotec
Ventolin HFA
Verapamil
Verapamil ER
Verelan
Verelan PM
Victoza
Videx
Videx EC
Viracept

Viteka VoSpire ER Vytorin

Viramune

Viread

W

Warfarin **Welchol** 

X

Xarelto Xopenex HFA

Z

Zafirlukast
Zaroxolyn
Zebeta
Zerit
Zestoretic
Zestril
Zetia
Ziac
Ziagen
Zidovudine
Ziprasidone
Zocor
Zontivity

Zortress

Zyflo CR

Zyflo

<sup>\*</sup>Coverage is provided for oral formulations.

#### **Anti-Infectives - Antivirals**

Tamiflu

#### **Breast Cancer Prevention**

Anastrozole **Aromasin** Exemestane **Fareston** Letrozole Tamoxifen

### Cardiovascular/Heart Disease -

**Blood Clot/Platelet Therapy** 

Aggrenox **Arixtra Brilinta** Cilostazol Clopidogrel Coumadin Dipyridamole **Effient** Eliquis Enoxaparin Fondaparinux Fragmin Heparin Jantoven Lovenox Persantine Pletal **Pradaxa** Savaysa **Ticlopidine** 

Warfarin

**Xarelto** 

Zontivity

### Cardiovascular/Heart Disease - High Blood Pressure

Accupril **Accuretic** Acebutolol Aceon **Adalat CC** Afeditab **Aldactazide** Aldactone **Altace** Amiloride

Amiloride-Hydrochlorothiazide

Amlodipine

Amlodipine-Benazepril Amlodipine-Valsartan

**Atacand Atacand HCT** 

Atenolol Atenolol-Chlorthalidone

Avalide **Avapro** Benazepril

Benazepril-Hydrochlorothiazide

Benicar **Benicar HCT** Betaxolol\* Bidil Bisoprolol

Bisoprolol-Hydrochlorothiazide

Bumetanide **Bystolic** Calan

Calan SR

Candesartan

Candesartan-Hydrochlorothiazide

Captopril

Captopril-Hydrochlorothiazide

Cardene SR Cardizem Cardizem CD Cardizem LA Cardura Cardura XL Cartia XT Carvedilol Catapres **Catapres TTS** Chlorothiazide Clonidine Clonidine Patch Clorpress

Coreg Corgard Corzide Covera HS Cozaar Demadex

**Dilacor XR** Dilt CD Dilt XR Diltia XT Diltiazem Diltiazem ER Diltzac FR Diuril Doxazosin **Dutoprol** 

Dvazide **Dynacirc CR** Dyrenium Edarbi Edarbyclor Edecrin Enalapril

Enalapril-Hydrochlorothiazide

**Epaned Eplerenone** . Eprosartan Felodipine ER Fosinopril

Fosinopril-Hydrochlorothiazide

Furosemide Guanfacine Hydralazine Hydrochlorothiazide

Hyzaar Indapamide Inderal **Inderal LA** Innopran XL Inspra Irbesartan

Irbesartan - Hydrochlorothiazide

Isoptin SR Isradipine Labetalol Lasix Levatol Lisinopril

Lisinopril-Hydrochlorothiazide

Lopressor **Lopressor HCT** 

<sup>\*</sup>Coverage is provided for oral formulations. Bold type = Brand name drug [Plain type = Generic drug]

Losartan

Losartan-Hydrochlorothiazide

Lotensin Lotensin HCT Lotrel Matzim LA Mavik

**Maxzide** Methyclothiazide Methyldopa

Methyldopa-Hydrochlorothiazide

Metolazone

Metoprolol Succinate Metoprolol Tartrate

Metoprolol-Hydrochlorothiazide

Microzide Midamor Minipress Minoxidil Moexipril

Moexipril-Hydrochlorothiazide

Nadolol

Nadolol-Bendroflumethazide

Nicardipine
Nifedipine
Nifedipine ER
Nimodipine
Nisoldipine
Norvasc
Perindopril
Pindolol
Prazosin
Prinivil
Procardia

Procardia XL
Propranolol

Propranolol-Hydrochlorothiazide

Quinapril

Quinapril-Hydrochlorothiazide

Ramipril Reserpine **Sectral** Spironolactone

Spironolactone-Hydrochlorothiazide

Sular Tarka Taztia XT Tekturna Tekturna HCT Telmisartan

Telmisartan-Hydrochlorothiazide

Tenoretic
Tenormin
Terazosin
Teveten
Teveten HCT
Thalitone
Tiazac
Timolol\*
Toprol XL
Torsemide
Trandate

**Tenex** 

Trandolapril-Verapamil

Triamterene-Hydrochlorothiazide

Uniretic Univasc Valsartan

Trandolapril

Valsartan-Hydrochlorothiazide

Vaseretic Vasotec Verapamil Verapamil ER

Verelan Verelan PM Zaroxolyn

Zebeta Zestoretic Zestril Ziac

Cardiovascular/Heart Disease - High Cholesterol

Advicor Atorvastatin Cholestyramine Cholestyramine Light

Colestid Colestipol Crestor

Fenofibrate 54, 160 mg Tablet

Fluvastatin
Gemfibrozil
Lescol
Lescol XL
Livalo
Lopid
Lovastatin
Mevacor

Niacin Extended-Release

Niacor Niaspan

Omega-3 Acid Ethyl Esters
Prayachol

Pravastatin
Pravastatin
Prevalite
Questran
Questran Light
Simcor
Simvastatin
Vascepa
Vytorin
Welchol
Zetia

Zocor

**Central Nervous System - Mental Health** 

Abilify
Aripiprazole
Chlorpromazine
Clozapine
Clozaril
Fanapt
FazaClo
Fluphenazine
Haloperidol
Invega
Latuda
Loxapine
Moban
Olanzapine
Perphenazine
Quetiapine
Risperidone

Quetiapine
Risperidone
Saphris
Seroquel XR
Thioridazine
Thiothixene
Trifluoperazine
Ziprasidone

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<sup>\*</sup>Coverage is provided for oral formulations. Bold type = Brand name drug [Plain type = Generic drug]

#### **Central Nervous System - Multiple Sclerosis**

Aubagio Avonex Betaseron Copaxone Gilenya Rebif Tecfidera

#### **Diabetes - Diabetic Supplies**

Diabetic Testing - Lancets Insulin Needles/Syringes OneTouch Diabetic Meters OneTouch Diabetic Test Strips

#### **Diabetes - Insulin**

Apidra
Humalog
Humalog Mix 50/50
Humalog Mix 75/25
Humulin 50/50
Humulin 70/30
Humulin N
Humulin R
Lantus
Levemir
Novolin 70/30
Novolin N

Novolog Novolog Mix 70/30

#### **Diabetes - Non-Insulin**

Acarbose

Novolin R

ACTOplus Met ACTOplus Met XR

Amaryl Avandamet Avandaryl Avandia Bydureon Byetta Cycloset Diabeta Duetact Farxiga Glimepiride Glipizide Glipizide ER

Glipizide-Metformin Glucophage Glucophage XR Glucotrol Glucotrol XL

Glucovance

Glyburide Glyburide Micronized Glyburide-Metformin

Glynase
Glyset
Invokamet
Invokana
Janumet
Janumet XR
Januvia
Jardiance
Jentadueto
Kazano
Kombiglyze XR

Metformin

Metformin ER (generic Glucophage XR)

Nateglinide Nesina Onglyza Oseni Pioglitazone

Pioglitazone-Glimepiride

Pioglitazone-Metformin

PrandiMet
Prandin
Precose
Repaglinide
Riomet
Starlix
SymlinPen
Tanzeum
Trulicity
Tolbutamide
Tradjenta
Victoza

#### HIV

Abacavir

Abacavir-Lamivudine-Zidovudine

**Aptivus Atripla** Combivir Complera Crixivan Didanosine **Edurant Emtriva Epivir Epzicom** Evotaz Fuzeon Intelence Invirase **Isentress** Kaletra Lamivudine

Lamivudine-Zidovudine

Lexiva

Nevirapine

Nevirapine Extended-Release

Norvir **Prezcobix** Prezista Rescriptor Retrovir Reyataz Selzentry Stavudine Stribild Sustiva **Tivicay** Triumea Trizivir Truvada Videx Videx EC Viracept **Viramune** Viread Viteka Zerit

Ziagen

Zidovudine

<sup>\*</sup>Coverage is provided for oral formulations.

#### **Immunosuppressant - Organ Rejection**

Azathioprine

Cellcept

Cyclosporine Gengraf

Hecoria

**Imuran** 

Mycophenolate Mycophenolic Acid

Myfortic Neoral **Prograf** Rapamune Sandimmune

Sirolimus Tacrolimus Zortress

### Musculoskeletal - Osteoporosis

Actonel Alendronate **Boniva** 

Calcitonin (salmon)

Didronel Etidronate **Forteo Fortical** Fosamax

Fosamax Plus D

Ibandronate Miacalcin Raloxifene Risedronate

#### Respiratory - Asthma/COPD

Accolate **Accuneb** Advair Diskus Advair HFA Aerospan Albuterol Nebulized Solution Albuterol Oral Tablet

Alvesco

Aminophylline **Anoro Ellipta Arcapta Neohaler Arnuity Ellipta** Asmanex HFA **Asmanex Twisthaler** Atrovent HFA

**Breo Ellipta** Brovana

Budesonide

**Combivent Respimat** 

Cromolvn **Daliresp** Dulera Duoneb Elixophyllin Flovent Diskus Flovent HFA Foradil Gastrocrom Incruse Ellipta Ipratropium

Ipratropium/Albuterol

Lufvllin Metaproterenol Montelukast Perforomist **Proair HFA** Proventil HFA **Pulmicort** 

**Pulmicort Flexhaler** 

OVAR

Serevent Diskus Spiriva HandiHaler **Spiriva Respimat** Striverdi Respimat

**Terbutaline** Theo-24 Theochron Theophylline Theophylline/Guaifenesin **Tudorza Pressair** 

Ventolin HFA VoSpire ER Xopenex HFA Zafirlukast Zyflo Zvflo CR

#### **Vitamins**

Pediatric Flouride Preparations (for example: Florvite, Poly-Vi-Flor, Tri-Vi-Flor) - Brand Name and Generic Products Prenatal Vitamins (for example: Citranatal Assure, Prenate DHA, Stuartnatal) - Brand Name and Generic Products

If you have pharmacy benefit coverage with UnitedHealthcare, you may learn more about your benefit by visiting myuhc.com® or by calling the toll-free member phone number on the back of your ID card. If you are not currently enrolled with UnitedHealthcare for pharmacy benefit coverage, you may access myuhc.com for additional information during your open enrollment period or you may contact your employer or health plan for additional information.

Medications are categorized by common therapeutic conditions in this reference guide for ease of reference only. These categories do not determine coverage for the medication for your condition. Your benefit plan determines how these medications may be covered for you.

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Where differences are noted between this reference guide and your benefit plan documents, the benefit plan documents will govern.

\*Coverage is provided for oral formulations.

Bold type = Brand name drug [Plain type = Generic drug]

Clinical programs such as Notification/Prior Authorization, Step Therapy and Supply Limits may apply to listed medications based off your benefit plan.

This list is intended as a reference and may not be all-inclusive. Brand or generic availability may not be current due to changes in the market. The list will be updated annually.

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Created December, 2015. For the most current PDL updates, visit myuhc.com or call toll-free member phone number on the back of your health plan ID card.

City of Austin Preventive Drug List for Consumer Driven Health Plans - Expanded List 1/16





# Addendum

# **2016 Preventive Care Medications**

100% Plan Paid





# Traditional Prescription Drug List (PDL)<sup>1,2,3</sup> \$0 Cost-share Medications & Products

### U.S. Preventive Services Task Force A & B Recommendation Medications and Supplements

These medications and supplements will be covered at \$0 cost-share when:

- ▶ Prescribed by a health care professional
- Age and/or condition appropriate
- Filled at a network pharmacy

Most medications are available over-the-counter (OTC) except for prescription fluoride.

отс	Medication/Supplement	Population	Reason
	Aspirin – 81 mg	Women who are at risk for preeclampsia during pregnancy	Prevent preeclampsia during pregnancy
	Aspirin - 81, 162 & 325 mg	Men age 45-79 Women age 55-79	Prevent cardiovascular disease
	Folic acid 400 & Women who are or may become pregnant Prevent birth defects		Prevent birth defects
	Iron liquid supplement	Children age 0-1 year	Prevent anemia due to iron deficiency
	Vitamin D - 400 & 1,000 units	Age 65 and over	Fall risk prevention
Rx	Medication/Supplement	Population	Reason
	Fluoride tablets, solution (not toothpaste, rinses)	Children age 0-6 years	Prevent dental cavities if water source is deficient in fluoride

### Over-the-Counter Birth Control (contraceptives) for Women

These forms of birth control (contraceptives) are available over-the-counter (OTC) and will be covered at \$0 cost-share when:

- Prescribed by a health care professional
- Filled at a network pharmacy

Contraceptive films	
Contraceptive foams	
Contraceptive gels	
Contraceptive sponges	
Emergency birth control (contraceptives) (generic for Plan B, generic for Plan B One-Step)	
Female condoms	

Male forms of birth control (contraception) are not currently considered Preventive Care Medications under the Affordable Care Act.



### **Prescription Hormonal Birth Control (contraceptives)**

#### **Brand Hormonal Birth Control (contraceptives)**

- Natazia
- O NuvaRing

### **Generic Hormonal Birth Control (contraceptives)**

- Altavera, Chateal, Kurvelo, Levonorgestrel/Ethinyl Estradiol, Levora-28, Marlissa, Portia (generic Nordette)
- Alyacen 1/35, Cyclafem 1/35, Dasetta 1/35, Necon 1/35, Nortrel 1/35, Pirmella (generic Ortho-Novum 1/35)
- Alyacen 7/7/7, Cyclafem 7/7/7, Dasetta 7/7/7, Necon 7/7/7, Nortrel 7/7/7, Pirmella 7/7/7 (generic Ortho-Novum 7/7/7)
- Amethia, Ashlyna, Camrese, Daysee (generic Seasonique)
- Amethia Lo, Camrese Lo, Levonorgestrel/Ethinyl Estradiol 0.1 mg/20 mcg/10 mcg (generic LoSeasonique)
- Amethyst, Levonorgestrel/Ethinyl Estradiol 0.09 mg/20 mcg (generic Lybrel)
- Apri, Emoquette, Enskyce, Desogestrel/Ethinyl Estradiol, Reclipsen, Solia (generic Desogen, Ortho-Cept)
- Aranelle, Leena (generic Tri-Norinyl)
- Aubra, Aviane, Delyla, Falmina, Lessina, Levonorgestrel/Ethinyl Estradiol 0.1 mg/20 mcg, Lutera, Orsythia, Sronyx (generic Alesse)
- Azurette, Desogestrel/Ethinyl Estradiol, Kariva, Pimtrea, Viorele (generic Mircette)
- Balziva, Briellyn, Gildagia, Philith, Vyfemla, Zenchent (generic Ovcon-35)
- Camila, Deblitane, Errin, Heather, Jencycla, Jolivette, Lyza, Nora-BE, Norethindrone 35 mcg, Norlyroc, Sharobel (generic Micronor, Nor-Q-D)
- Caziant, Velivet, Cesia (generic Cyclessa)
- Cryselle, Elinest, Low-Ogestrel, Norgestrel/Ethinyl Estradiol 0.3 mg/30 mcg, Ogestrel (generic Lo/Ovral, Ovral)
- Drospirenone/Ethinyl Estradiol 3 mg/30 mcg, Ocella, Syeda, Zarah (generic Yasmin)
- Enpresse, Levonest, Myzilra, Trivora-28 (generic Triphasil)
- Estarylla, MonoNessa, Mono-Linyah, Norgestimate/Ethinyl Estradiol, Previfem, Sprintec (generic Ortho-Cyclen)
- Gianvi, Loryna, Nikki, Vestura (generic Yaz)
- Gildess FE, Junel FE, Larin FE, Microgestin FE, Tarina FE (generic Loestrin FE)
- Gildess, Junel, Larin, Microgestin (generic Loestrin)
- Introvale, Jolessa, Levonorgestrel/Ethinyl Estradiol 0.15 mg/30 mcg, Quasense (generic Seasonale)
- Kelnor 1/35, Zovia 1/35E (generic Demulen 1/35)
- LoMedia 24 FE, Gildess 24 FE, Larin 24 FE (generic Loestrin 24 FE)
- Medroxyprogesterone Acetate (generic Depo-Provera)
- Necon 1/50 (generic Norinyl 1/50)
- Necon 0.5/35, Nortrel 0.5/35, Wera 0.5/35 (generic Brevicon, Modicon)
- Necon 10/11 (generic Ortho-Novum 10/11)
- Norgestimate/Ethinyl Estradiol, Tri-Estarylla, Tri-Linyah, Trinessa, Tri-Previfem, Tri-Sprintec (generic Ortho Tri-Cyclen)
- Wymzya FE, Zenchent FE (generic Femcon FE)
- Tilia FE, Tri-Legest FE (generic Estrostep FE)
- Xulane (generic Ortho Evra)
- Zovia 1/50E (generic Demulen 1/50)

### **Prescription Emergency Birth Control (contraceptives)**

### **Brand Emergency Birth Control (contraceptives)**

ella

Plan B One-Step

#### **Generic Emergency Birth Control (contraceptives)**

Levonorestrel 0.75 mg, Next Choice (generic Plan B)

EContra EZ, Fallback Solo, Levonorgestrel 1.5 mg, My Way, Next Choice One Dose, Opcicon One-Step (generic Plan B One-Step)

#### **KEY**

- Birth Control Pill (oral contraceptive)
- Birth Control Ring (contraceptive vaginal ring)
- Birth Control Shot (injectable contraceptive)
- Birth Control Patch (contraceptive transdermal patch)

### Prescription Cervical Caps and Diaphragms for Birth Control (contraceptives)

Brand Cervical Caps	
Femcap	
Prentif	
Brand Diaphragms	
Koro-Flex	
Koromex	
Omniflex	
Ortho Coil	
Ortho-Diaphragm	
Ortho Flex	
Wide-Seal	

#### **Tobacco Cessation Medications**

If you need help to quit smoking or using tobacco products, these preventive medications will be available at \$0 cost-share starting on your health plan's next renewal date on or after January 1, 2015. To qualify, you need to:

- ▶ Be age 18 or older.
- Ask your doctor to obtain Notification/Prior Authorization. Your doctor will need to let us know you are also getting counseling to help you stop using tobacco products.
- ▶ Get a prescription for these products from your doctor, even if the products are sold over-the-counter (OTC).
- Fill the prescription at a network pharmacy.

Up to two 90-day treatment courses are covered at no cost each year. Prior Authorization is required for each 90-day drug supply.

Over-the-counter Medications Requires Prior Authorization	Nicotine Replacement Gum		
	Nicotine Replacement Lozenge		
	Nicotine Replacement Patch		
<b>Prescriptions</b> Requires Prior Authorization	<ul> <li>Nicotrol Inhaler</li> <li>Nicotrol Nasal Spray</li> <li>Chantix Tablet</li> </ul> These three prescription medications are covered with Prior Authorization after members have tried: <ul> <li>1) One over-the-counter nicotine product and</li> <li>2) Bupropion sustained-release (generic Zyban) separately</li> </ul>		

#### **Breast Cancer Preventive Medications**

For members who are at increased risk for breast cancer but have not had breast cancer, these preventive medications are available at \$0 cost-share. To qualify, a member must:

- ▶ Be age 35 or older
- At increased risk for the first occurrence of breast cancer after risk assessment and counseling
- ▶ Obtain Prior Authorization

Most plans cover these medications at normal cost-share for the treatment of breast cancer, to prevent breast cancer recurrence and for other indications. They are available at \$0 cost-share to prevent the first occurrence of breast cancer if a Prior Authorization is obtained. If a member qualifies, they can receive these drugs at \$0 cost-share for up to five years, minus any time they have been taking them for prevention.

raloxifene			
tamoxifen			

# **Health Care Reform**

# **Pharmacy Benefit Preventive Care Medications Coverage**

# Frequently Asked Questions

Under the health reform law, health plans must cover U.S. Preventive Services Task Force A & B Recommendation medications and FDA-approved prescription and Over-The-Counter (OTC) contraceptives for women at 100 percent without charging a co-payment, co-insurance or deductible when:

- Prescribed by a health care professional
- ▶ Age and/or condition appropriate
- Filled at a network pharmacy

To comply with this new law which continues to be clarified further by the U.S. Dept. of Labor, Health & Human Services and the Treasury, UnitedHealthcare offers this list of no-cost Preventive Care Medications.

#### When are Preventive Care Medications available?

This list of Preventive Care Medications is available to you for \$0 cost-share at network pharmacies now except for:

▶ Tobacco cessation medications which will become available on your plan's next renewal date on or after January 1, 2015.<sup>4</sup>

Please note, in order to obtain coverage for Preventive Care Medications, even if they are available over the counter, you must have a prescription from a health care professional and the product(s) must be age- and condition-appropriate.

# Which Preventive Care Medications are available at no cost?

A list of Preventive Care Medications can be found on pages 1-3 of this document so you can discuss them with your doctor. You can also sign in to **myuhc.com** or call the number on your health plan ID card to confirm the most current list of Preventive Care Medications for your plan.

# Are all birth control products available at no cost to me?

No, only the products on the list applicable to your plan will be no cost under the pharmacy benefit.<sup>5</sup> Due to new health reform guidelines issued on May 11, 2015, one new method of birth control (contraception) became available at no cost to you on July 1, 2015. The new method of birth control is NuvaRing, a vaginal ring.

The health reform law allows plans to use reasonable medical management to decide which birth control products are provided at no cost-share.

If you choose a no-cost product from the list applicable to your plan, your cost at the pharmacy will be \$0. If you choose a covered birth control product that is not on the list, a co-pay or co-insurance may be required. And this cost will apply to your deductible if you have one.

# What if my doctor says I need birth control that is not on this Preventive Care Medication List?

Our Preventive Care Medications list covers all methods of FDA-approved birth control available through your **pharmacy benefit**. However, your doctor may decide you need birth control (contraception) that is not on this list for medical reasons. If so, you can request the type you need by calling the number on your health plan ID card, and asking how to obtain coverage. Medical reasons may include side effects, whether the birth control is permanent or can be reversed, and whether you can use the product as required.

Your **medical benefit** will also cover other forms of birth control such as IUDs, implants and surgical sterilization (having your tubes tied).

# How can I get preventive medications to help me stop using tobacco for no cost?

If you are age 18 or older and want to quit using tobacco products, talk to your doctor about medications that can help. If your doctor decides this therapy is right for you, they may prescribe an Over-the-Counter or prescription medication.

Your doctor can submit a Prior Authorization request to get these approved for you at \$0 cost-share if you are also **getting counseling** to help you stop using tobacco products. Your doctor can provide this counseling or help you to find a provider.

### **Frequently Asked Questions continued**

# If I'm at risk for breast cancer, how can I get preventive medications for no cost?

If you are a member age 35 or older, talk to your doctor about your risk of getting breast cancer if you have not had it.

If your doctor decides these drugs are appropriate for you, your doctor may offer to prescribe risk-reducing medications, such as raloxifene or tamoxifen.

You doctor can submit a Prior Authorization request to get these approved for you at \$0 cost-share if you meet coverage criteria.<sup>6</sup>

# How can I get aspirin to prevent preeclampsia during pregnancy for no cost?

Low-dose or baby aspirin (81 mg) is available at no cost to pregnant women at risk for preeclampsia. If you are pregnant and at risk for preeclampsia, ask your doctor about whether low-dose aspirin can help. If so, your doctor can give you a prescription for low-dose aspirin to be filled at a retail network pharmacy at no cost to you.

#### Will this drug list change?

Drug lists can and do change, so it's always good to check. You can learn the cost of all products and view no-cost options by:

- Signing in to myuhc.com, and going to Pharmacy Information
- ▶ Calling the number on your health plan ID card

# What if I have a high-deductible or consumer-driven health (CDH) plan?

The same no-cost options on the list applicable to your plan will be available to you if you are in one of these plans. If you fill a prescription for covered products not on your plan's no-cost drug list, you will need to pay the full cost, until your pharmacy plan deductible is reached.

# Are the no-cost Preventive Care Medications available at both retail and mail pharmacies?

Preventive Care Medications are available at both network retail pharmacies and the mail order pharmacy for plans with a mail order benefit.

# What if the health care reform law requirements for Preventive Care Medication coverage change?

If the law requiring plans to provide Preventive Care Medications at no cost changes, information on how your costs may be impacted will be available to you by:

- Signing in to myuhc.com, and going to Pharmacy Information
- ▶ Calling the number on your health plan ID card

# What if my plan has a religious exemption for covering contraceptives?

Some plans may not have coverage for contraceptives if your employer qualifies for a religious exemption. However, you will still have coverage without cost-share of the U.S. Preventive Services Task Force A & B Recommendation medications listed on the Preventive Care Medications list, such as aspirin and vitamin D, tobacco cessation and breast cancer preventive medications.





<sup>&</sup>lt;sup>1.</sup> Please note this list is subject to change.

<sup>&</sup>lt;sup>2</sup> Always refer to your benefit plan materials to determine your coverage for medications and cost-share. Some medications listed on the PDL may not be covered under your specific benefit. Where differences are noted, the benefit plan documents will govern.

 $<sup>^{\</sup>rm 3}$  All branded medications are trademarks or registered trademarks of their respective owners.

<sup>&</sup>lt;sup>4</sup> The cost for U.S. Preventive Services Task Force A & B Recommendation medications and OTC contraceptives on this list could be reimbursed back to Feb. 20, 2013 when the U.S. Dept. of Labor FAQ guidance was issued. However, they became available at network retail pharmacies at \$0 cost-share on November 1, 2013.

<sup>&</sup>lt;sup>5</sup> When informed by a member's health care provider, UnitedHealthcare will accommodate a coverage exception request for any member when one of the zero cost contraceptives listed on the Preventive Care Medications list may be medically inappropriate as determined by the health care provider for that member and UnitedHealthcare will waive the otherwise applicable cost-sharing for a contraceptive not represented on the Preventive Care Medications list.

<sup>&</sup>lt;sup>6</sup> If your pharmacy benefit plan is grandfathered under the ACA, these drugs may be covered at the normal cost-share.