

FORMULARY MANAGEMENT TO DRIVE BETTER PLAN AFFORDABILITY

Changes begin 1/1/18

To position our pharmacy plans for long-term affordability, Cigna regularly makes changes to our prescription drug lists (formularies). In alignment with our low net cost formulary strategy, this process ensures that any decision to actively manage a specific drug within a class is both clinically appropriate and provides better overall value.

Changes beginning 1/1/18

Pharmacy costs are currently the number one driver of client expenses.¹ It is estimated that between now and 2020, pharmacy costs will account for 31% of overall health care costs (under pharmacy and medical benefits).¹ At the same time, opioid use and abuse continues to be a U.S. public health crisis.² For these reasons, the 1/1/18 formulary changes will focus on **three primary areas**:

- Drugs which have experienced significant price hikes where clinically appropriate lower cost alternatives are available to treat the same conditions. Or where contract negotiations help narrow a drug class to promote use of lower cost drugs.
 - Part of our formulary actions affects drugs that treat diabetes. We will offer clinically appropriate alternatives to some market leading brand named insulins that will be removed from formulary pending a medical necessity review.
- Appropriate use of opioids
 - We will remove from formularies a market leading opioid and offer preferred brand alternatives where the manufacturer has demonstrated a willingness to improve affordability and align with and advance Cigna's goal of reducing opioid prescriptions by 25% by 2019.³
 - This strategy follows a similar action taken by Medicare and Medicaid plans.
- Adding drugs to our formularies or placing them on a lower cost tier.
 - Due to the action our clients have taken to proactively manage their formularies, Cigna had more leverage to successfully negotiate with drug manufacturers. Some drugs, previously removed from a formulary or moved to non-preferred tier, have been welcomed back to our formularies or will be offered at a lower cost, improving affordability for our customers.

Below is a list of drug classes and drugs that are moving to not-covered or non-preferred brand status, or will require approval for coverage on the Legacy Formulary, beginning January 1, 2018.*

DRUG CLASS	NON-PREFERRED BRAND DRUG(S)	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
ALLERGY/NASAL SPRAYS	Astepro	azelastine
ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR	dextroamphetamine-amphetamine ER
DIABETES	Apidra	Humalog, Novolog
	Lantus, Lantus SoloStar, Toujeo SoloStar	Basaglar, Levemir, Tresiba
GASTROINTESTINAL/HEARTBURN	omeprazole bicarbonate packet, 40mg-1100mg capsule, 20mg-1100 mg capsule	omeprazole
INFECTIONS	Eryped 400	erythromycin

DRUG CLASS	NON-PREFERRED BRAND DRUG(S)	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
PAIN RELIEF AND INFLAMMATORY DISEASE	D.H.E. 45	dihydroergotamine
	Imitrex	sumatriptan
	OxyContin	Embeda, Hysingla ER, Xtampza ER
SKIN CONDITIONS	Ala-Scalp	hydrocortisone
	Analpram HC	hydrocortisone-pramoxine
	Capex shampoo	fluocinolone
	Cordran	flurandrenolide
	Differin	adapalene
	Kenalog	triamcinolone spray
	Locoid lotion	hydrocortisone butyrate
	Metrogel	metronidazole
	Naftin	naftifine
	Nucort, Texacort	hydrocortisone
DRUG CLASS	DRUG(S) REQUIRING PRIOR AUTHORIZATION	ADDITIONAL INFORMATION
DIABETES	Lantus, Lantus SoloStar, Sancuso, Toujeo SoloStar	Your plan will only cover this medication if the customer's doctor requests and receives approval from Cigna.
GASTROINTESTINAL/HEARTBURN	Akynzeo, Anzemet, Emend capsule, powder packet, tripack, Sancuso, Varubi	
HORMONAL AGENTS	Androderm, Androgel, Axiron, Fortesta, Natesto, Striant, Testim, testosterone, Vogelxo	
PAIN RELIEF AND INFLAMMATORY DISEASE	Roxicodone	
DRUG CLASS	DRUG(S) WITH QUANTITY LIMITS	ADDITIONAL INFORMATION
ALLERGY/NASAL SPRAYS	cromolyn oral, Nasonex, mometasone	Your plan only covers a certain amount of this medication over a certain number of days.
ALZHEIMER'S DISEASE	Namenda XR, Namzaric	
ANXIETY/DEPRESSION/BIPOLAR DISORDER	Marplan, Pristiq	
ASTHMA/COPD/RESPIRATORY	Perforomist	
BLOOD PRESSURE/HEART MEDICATIONS	Ranexa	
CANCER	Fareston, Nilandron, nilutamide	
DIABETES	Jentadueto, Tradjenta	
EYE CONDITIONS	bimatoprost eye drops, Cystaran, Zioptan	
HORMONAL AGENTS	Alora, estradiol patch, Estring, Menostar, Minivelle, Vagifem, yuvafem	
INFECTIONS	Zovirax	
MISCELLANEOUS	Nuedexta	
OSTEOPOROSIS PRODUCTS	alendronate	
PAIN RELIEF AND INFLAMMATORY DISEASE	Daliresp, Mitigare	
SCHIZOPHRENIA/ANTI-PSYCHOTICS	Fanapt	
SEIZURE DISORDERS	Gabitril, Potiga	
SKIN CONDITIONS	Denavir, Regranex, Santyl, Zyclara	
SLEEP DISORDERS/SEDATIVES	Hetlioz	

DRUG CLASS	STEP THERAPY	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
ATTENTION DEFICIT HYPERACTIVITY DISORDER	Adderall XR	dextroamphetamine-amphetamine ER
	Focalin XR	dexmethylphenidate ER
SCHIZOPHRENIA/ANTI-PSYCHOTICS	Abilify	aripiprazole
	Orap	pimozide
SLEEP DISORDERS/SEDATIVES	Silenor	eszopiclone, zolpidem
DRUG CLASS	DRUG STRENGTH NOT COVERED ^	DRUG STRENGTH COVERED BY YOUR PLAN
ALLERGY/NASAL SPRAYS	desloratadine ODT 2.5mg	desloratadine ODT 5mg
ANXIETY/DEPRESSION/BIPOLAR DISORDER	Fetzima ER 20mg	Fetzima ER 40mg
	Fetzima ER 40mg	Fetzima ER 80mg
	Trintellix 5mg	Trintellix 10mg
	Trintellix 10mg	Trintellix 20mg
BLOOD PRESSURE/HEART MEDICATIONS	Azor 5-20mg	Azor 10-40mg
	Benicar 20mg	Benicar 40mg
	Benicar HCT 20-12.5mg	Benicar HCT 40-25mg
	Bystolic 10mg	Bystolic 20mg
	Tekturna 150mg	Tekturna 300mg
	Tekturna HCT 150-12.5mg	Tekturna HCT 300-25mg
CHOLESTEROL MEDICATIONS	Livalo 1mg	Livalo 2mg
	Livalo 2mg	Livalo 4mg
DIABETES	Farxiga 5mg	Farxiga 10mg
PAIN RELIEF AND INFLAMMATORY DISEASE	Uloric 40mg	Uloric 80mg
SCHIZOPHRENIA/ANTI-PSYCHOTICS	Latuda 60mg	Latuda 120mg
SEIZURE DISORDERS	Aptiom 200mg	Aptiom 400mg
	Aptiom 400mg	Aptiom 800mg
	Fycompa 4mg	Fycompa 8mg
	Fycompa 6mg	Fycompa 12mg
	Trokendi XR 25mg	Trokendi XR 50mg
	Trokendi XR 100mg	Trokendi XR 200mg
SLEEP DISORDERS/SEDATIVES	Silenor 3mg	Silenor 6mg

^ There is a "medical necessity" review process in place for customers who have proven a higher strength once per day is not clinically appropriate and require the use of a lower strength twice per day.



Please contact your Cigna account manager or service partner if you'd like to discuss these changes.



* In accordance with Texas and Louisiana state law, customers with affected benefit plans who receive coverage for medications that are removed from the prescription drug list during the plan year will continue to have those medications covered at the same benefit level until their plan renewal date. To find out if these state mandates apply to your plan, please contact your Cigna representative..

1. Cigna book of business national study 2016. Projection compares the following health care spend for medical service categories: Drugs and Biologics, Inpatient Facility, Outpatient Facility, Professional Services, Other Medical Services.
2. Rudd, R.A., et al. Morbidity and Mortality Weekly Report (MMWR), "Increases in Drug and Opioid Overdose Deaths - United States", January 2016.
3. Cigna press release May 2017.

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