CIGNA STANDARD 3-TIER PRESCRIPTION DRUG LIST

As of January 1, 2018

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595200 z Standard 3-Tier w DRT 08/17

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View your drug list online

This document was last updated 09/01/2017.* To see a current list of the medications covered on your plan's drug list, visit:

myCigna.com – Once you're registered, log in and select Estimate Health Care Costs, then select Get drug costs.

Cigna.com/druglist – Select your drug list name – Standard 3 Tier – from the drop down menu.

Questions? – Call the toll-free number on the back of your Cigna ID card. We're here to help.

* Drug list created: originally created 01/01/2004

Last updated: 05/15/2017, for changes that were effective 07/01/2017

Next planned update: 09/01/17, for changes that will be effective 01/01/2018

Your prescription drug list

This drug list includes the most commonly prescribed medications covered by your plan as of January 1, 2018.[1] These generic and brand name prescription medications are approved by the U.S. Food and Drug Administration (FDA). Medications are listed by the condition they treat, then listed alphabetically within tiers, or coverage/cost levels.

This drug list is not a complete list of covered medications, and not all of the medications listed here may be covered by your specific plan. You should log into **myCigna.com** or check your plan materials to learn more about the medications your plan covers.

How to read your drug list

Use the sample chart below to help you understand this drug list.

TIER 1 $	TIER 2 $$
BLOOD PRESSURE/HEART MEDICATIONS	
afeditab CR	Berinert* (PA)
amlodipine besylate	Bidil
amlodipine besylate-benazepril	Bystolic
amlodipine-valsartan	Cinryze* (PA)
amlodipine-valsartan-HCTZ	Coreg CR
atenolol	Cozaar (ST)
atenolol-chlorthalidone	Diovan (ST)
benazepril	Diovan HCT (ST)
benazepril-HCTZ	Edarbi (ST)
candesartan cilexetil	Edarbyclor (ST)
cartia XT	Exforge
carvedilol	Exforge HCT
clonidine	Firazyr* (PA)
digitek	Hemangeol
digox	Inderal LA
digoxin	Inderal XL
diltiazem ER	Innopran XL
diltiazem CD	Lotrel
diltiazem	Micardis (ST)
dilt-XR	Multaq
enalapril	Nitro-dur
flecainide acetate	Nitrolingual
hydralazine	Nitromist
irbesartan	Nitronal
isosorbide mononitrat	Nitrostat
	Northera* (PA)
	Norvasc
	Ranexa (ST)
	Tekturna
	Tekturna HCT

Tier (coverage/cost level) gives you an idea of the cost level you may pay for a medication

Medications are grouped by the **condition** they treat

Medications in each column are listed in **alphabetical** order

Specialty medications have an asterisk listed next to them

Brand name medications are **capitalized**

Generic medications are **lowercase**

Medications that require approval for coverage or have limits will have an **abbreviation** listed next to them

For illustrative purposes only.

Here's more helpful information on how to read this drug list:

Tiers

Covered medications are divided into tiers, or coverage/cost levels. The tier the medication is listed in determines how much you'll pay when you fill the prescription. Typically, the higher the tier, the greater the cost of the medication.

› **Tier 1 – Typically Generics**	(Lower-cost medication)	**$**
› **Tier 2 – Typically Preferred Brands**	(Medium-cost medication)	**$$**
› **Tier 3 – Typically Non-Preferred Brands**	(Higher-cost medication)	**$$$**

Abbreviations next to medications

Some medications on your drug list have special requirements before they may be covered by your plan. This helps to make sure you're receiving coverage for the right medication, at the right cost, in the right amount and for the right situation. These medications will have an abbreviation next to them in the drug list. Here's what each of the abbreviations mean.

(PA)	**Prior Authorization** – Your doctor has to provide Cigna with information about why you need to use this medication. The medication will only be covered if your doctor requests and receives approval from Cigna.
(ST)	**Step Therapy** – Certain high-cost brand name medications are part of the Step Therapy program. These medications aren't covered unless your doctor requests and receives approval from Cigna. Step Therapy encourages the use of lower-cost, clinically appropriate medications to treat your condition. These are typically generics or preferred brands. You have to try these medications first before your plan covers higher-cost brands.
(QL)	**Quantity Limits** – For some medications, your plan only covers up to a certain amount over a certain number of days. For example, 30mg per day for 30 days. Your plan will only cover a larger amount if your doctor requests and receives approval from Cigna.
(AGE)	**Age Requirements** – You must be within a specific age range for this medication to be covered.

Brand name medications are capitalized

In this drug list, brand name medications are capitalized and generic medications begin with a lowercase letter.

Specialty medications are marked with an asterisk

Specialty medications are used to treat complex conditions like multiple sclerosis, hepatitis C and rheumatoid arthritis. In this drug list, specialty medications are marked with an asterisk (*). Some plans may cover these medications on a specialty tier and/or require the use of a preferred specialty pharmacy. Log into **myCigna.com** or check your plan materials to learn more about how your plan covers specialty medications.

No cost-share preventive medications are marked with a plus sign

Health care reform under the Patient Protection and Affordable Care Act (PPACA) requires that most plans cover certain categories of medications and other products as preventive care services. In this drug list, medications with a plus sign (+) next to them may be available to you at no cost-share (copay, coinsurance and/or deductible). Log into **myCigna.com** or check your plan materials to learn more about how your plan covers preventive medications.

Plan exclusions

Some medications shown in this drug list may not be covered by your specific plan. For example, medications used for weight loss or to treat infertility may not be covered. In this drug list, these medications have a carat (^) next to them. Log into **myCigna.com** or check your plan materials to learn more about how your plan covers these medications.

How to find your medication on the drug list

Look for your condition in the alphabetical list below. Then go to that page to see the list of covered medications available to treat the condition.

AIDS/HIV	6
ALLERGY/NASAL SPRAYS	6
ALZHEIMER'S DISEASE	6
ANXIETY/DEPRESSION/BIPOLAR DISORDER	6
ASTHMA/COPD/RESPIRATORY	6
ATTENTION DEFICIT HYPERACTIVITY DISORDER	6
BLOOD MODIFIERS/BLEEDING DISORDERS	7
BLOOD PRESSURE/HEART MEDICATIONS	7
BLOOD THINNERS/ANTI-CLOTTING	7
CANCER	7, 8
CHOLESTEROL MEDICATIONS	8
CONTRACEPTIVE PRODUCTS	8, 9
COUGH/COLD MEDICATIONS	10
DENTAL PRODUCTS	10
DIABETES	10
DIURETICS	10
EAR MEDICATIONS	10
ERECTILE DYSFUNCTION	10
EYE CONDITIONS	10, 11
FEMININE PRODUCTS	11
GASTROINTESTINAL/HEARTBURN	11
HORMONAL AGENTS	11, 12
INFECTIONS	12
INFERTILITY	12
MISCELLANEOUS	12, 13
MULTIPLE SCLEROSIS	13
NUTRITIONAL/DIETARY	13
OSTEOPOROSIS PRODUCTS	13
PAIN RELIEF AND INFLAMMATORY DISEASE	14
PARKINSON'S DISEASE	15
SCHIZOPHRENIA/ANTI-PSYCHOTICS	15
SEIZURE DISORDERS	15
SKIN CONDITIONS	15, 16
SLEEP DISORDERS/SEDATIVES	16
SMOKING CESSATION	16
SUBSTANCE ABUSE	16
TRANSPLANT MEDICATIONS	16
URINARY TRACT CONDITIONS	16

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
AIDS/HIV		
lamivudine*	Isentress HD*	Atripla*
lamivudine-zidovudine*	Isentress*	Complera*
nevirapine ER*	Kaletra*	Descovy*
nevirapine*	Norvir*	Epzicom*
	Prezista*	Genvoya*
	Reyataz*	Intelence*
	Selzentry*	Odefsey*
	Sustiva*	Prezcobix*
	Truvada*	Stribild*
	Viread*	Tivicay*
		Triumeq*
ALLERGY/NASAL SPRAYS		
azelastine	Astepro	
cromolyn solution	Bactroban Nasal	
cyproheptadine		
desloratadine		
epinephrine auto-injector (QL)		
fluticasone		
hydroxyzine		
ipratropium		
mometasone (QL)		
olopatadine		
promethazine		
ALZHEIMER'S DISEASE		
donepezil	Mestinon syrup	Mestinon tablet
donepezil ODT	Namenda titration pack	Namenda
memantine		Namenda XR (QL)
pyridostigmine		Namzaric (QL)
pyridostigmine ER		
rivastigmine		
ANXIETY/DEPRESSION/BIPOLAR DISORDER		
alprazolam		Brisdelle (QL)
alprazolam ER		Effexor XR (ST)
alprazolam ODT		Fetzima (ST)
alprazolam XR		Forfivo XL (ST)
amitriptyline		Onfi
bupropion		Pristiq (ST, QL)
bupropion SR		Prozac (ST)
bupropion XL		Sarafem (ST)
buspirone		Trintellix (ST)
citalopram		Viibryd (ST)
clomipramine		Wellbutrin SR (ST)
duloxetine		Xanax
escitalopram		Xanax XR
fluoxetine		Zoloft (ST)
fluoxetine DR		

TIER 1 $	TIER 2 $$	TIER 3 $$$
ANXIETY/DEPRESSION/BIPOLAR DISORDER *(cont)*		
fluvoxamine		
fluvoxamine ER		
lorazepam		
lorazepam intensol		
paroxetine		
paroxetine CR		
paroxetine ER		
sertraline		
trazodone		
venlafaxine		
venlafaxine ER		
ASTHMA/COPD/RESPIRATORY		
albuterol	Advair Diskus	Adcirca* (PA)
budesonide	Advair HFA	Adempas* (PA)
fluticasone-salmeterol	Anoro Ellipta	Kalydeco* (PA)
montelukast	Breo Ellipta	Letairis* (PA)
	Combivent Respimat	Ofev* (PA)
	Incruse Ellipta	Opsumit* (PA)
	ProAir HFA	Orenitram ER* (PA)
	ProAir RespiClick	Orkambi* (PA)
	Pulmicort Flexhaler	Pulmicort Respules
	Pulmozyme* (PA)	Tracleer* (PA)
	QVAR	Tyvaso* (PA)
	Serevent Diskus	Uptravi* (PA)
	Spiriva	Xolair* (PA)
	Spiriva Respimat	
	Stiolto Respimat	
	Striverdi Respimat	
	Symbicort	
	Ventolin HFA	
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
dexmethylphenidate	Focalin XR 30mg (ST)	Adderall (ST)
dexmethylphenidate ER	Vyvanse	Adderall XR (ST)
dextroamphetamine-amphetamine ER		Aptensio XR (ST)
dextroamphetamine-amphetamine		Concerta ER (ST)
guanfacine ER		Focalin (ST)
Metadate ER		Focalin XR (ST)
methylphenidate		Methylin (ST)
methylphenidate CD		Mydayis ER
methylphenidate ER		Quillichew ER (ST)
methylphenidate LA		Ritalin (ST)
		Ritalin LA (ST)
		Strattera

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
BLOOD MODIFIERS/BLEEDING DISORDERS		
tranexamic acid*	Amicar*	Neupogen*^ (PA)
	Aranesp*^ (PA)	Promacta* (PA)
	Droxia	
	Epogen*^ (PA)	
	Granix*^	
	Neulasta*^ (PA)	
	Procrit*^ (PA)	
	Zarxio*^	
BLOOD PRESSURE/HEART MEDICATIONS		
Afeditab CR	Bystolic	Azor
amiodarone	Byvalson	Bayer chewable aspirin+
amlodipine	Coreg CR	Benicar (ST)
amlodipine-benazepril	Corlanor (PA)	Benicar HCT (ST)
amlodipine-valsartan	Entresto (PA)	BiDil (QL)
amlodipine-valsartan-HCTZ	Haegarda* (PA)	Cardizem LA
Aspir 81+	Multaq	Cozaar (ST)
aspirin 81mg+	Nitro-Dur 0.3mg, 0.8mg	Diovan (ST)
aspirin EC 81mg+	Tekturna	Diovan HCT (ST)
Aspir-Low+	Tekturna HCT	Ecotrin+
atenolol		Edarbi (ST)
atenolol-chlorthalidone		Edarbyclor (ST)
benazepril		Exforge
bisoprolol-HCTZ		Exforge HCT
candesartan		Firazyr* (PA)
Cartia XT		Hemangeol
carvedilol		Inderal LA
children's aspirin+		Inderal XL
clonidine		Innopran XL
Digitek		Lotrel
Digox		Micardis (ST)
digoxin		Nitro-Dur 0.1mg, 0.2mg, 0.4mg, 0.6mg
diltiazem		Nitrolingual
diltiazem CD		Nitromist
diltiazem ER		Nitrostat
Dilt-XR		Northera** (PA)
dofetilide (QL)		Norvasc
doxazosin		Ranexa (ST, QL)
EcPirin+		Tiazac
enalapril		Tikosyn (QL)
flecainide		Toprol XL
hydralazine		Tribenzor
irbesartan		
isosorbide		
isosorbide ER		

TIER 1 $	TIER 2 $$	TIER 3 $$$
BLOOD PRESSURE/HEART MEDICATIONS *(cont)*		
labetalol		
lisinopril		
lisinopril-HCTZ		
losartan		
losartan-HCTZ		
low-dose aspirin EC+		
Matzim LA		
metoprolol		
nadolol		
nifedipine		
nifedipine ER		
nisoldipine		
olmesartan		
olmesartan-HCTZ		
Pacerone		
propafenone		
propafenone ER		
propranolol		
propranolol ER		
ramipril		
Taztia XT		
telmisartan		
telmisartan-HCTZ		
tri-buffered aspirin+		
valsartan		
valsartan-HCTZ		
verapamil		
verapamil ER		
verapamil SR		
BLOOD THINNERS/ANTI-CLOTTING		
aspirin-dipyridamole ER	Brilinta	Pradaxa
clopidogrel	Effient	Savaysa
enoxaparin* (QL)	Eliquis	
fondaparinux* (QL)	Fragmin* (QL)	
Jantoven	Xarelto	
warfarin		
CANCER		
anastrozole	Actimmune* (PA)	Afinitor Disperz* (PA)
bexarotene*	Gleostine	Afinitor* (PA)
capecitabine*	Intron A*^ (PA)	Alecensa*
exemestane	Nexavar* (PA)	Arimidex
hydroxyurea	Revlimid* (PA)	Bosulif* (PA)
imatinib* (PA)	Sprycel* (PA)	Cabometyx* (PA)
letrozole	Sutent* (PA)	Cometriq* (PA)
mercaptopurine	Tarceva* (PA)	Cotellic* (PA)
methotrexate*	Tasigna* (PA)	Erivedge* (PA)
raloxifene+	Trexall*	Fareston (QL)
tamoxifen+		Femara
temozolomide* (PA)		Gilotrif* (PA)
		Gleevec* (PA)

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
CANCER *(cont)*		
		Ibrance* (PA)
		Iclusig* (PA)
		Imbruvica* (PA)
		Inlyta* (PA)
		Jakafi* (PA)
		Lenvima* (PA)
		Lonsurf* (PA)
		Lynparza* (PA)
		Mekinist* (PA)
		Ninlaro* (PA)
		Pomalyst* (PA)
		Purixan*
		Stivarga* (PA)
		Sylatron* (PA)
		Tafinlar* (PA)
		Tagrisso* (PA)
		Targretin*
		Votrient* (PA)
		Xalkori* (PA)
		Xatmep*
		Xtandi* (PA)
		Zelboraf* (PA)
		Zykadia* (PA)
		Zytiga* (PA)
CHOLESTEROL MEDICATIONS		
amlodipine-atorvastatin	Praluent* (PA)	Crestor (ST)
atorvastatin	Repatha* (PA)	Korlym (PA)
atorvastatin 10mg, 20mg+	Welchol	Kynamro* (PA)
fenofibrate		Livalo (ST)
fenofibric acid		Vascepa
fluvastatin 20mg, 40mg+		Vytorin (ST)
fluvastatin ER 80mg+		Zetia
lovastatin 20mg, 40mg+		
niacin ER		
omega-3 acid ethyl esters		
pravastatin+		
rosuvastatin		
rosuvastatin 5mg, 10mg+		
simvastatin		
simvastatin 10mg, 20mg, 40mg+		

TIER 1 $	TIER 2 $$	TIER 3 $$$
CONTRACEPTIVE PRODUCTS		
Aftera+	Beyaz	Conceptrol+
Altavera+	Lo Loestrin FE	Ella+
Alyacen+	LoSeasonique	Estrostep FE
Amethia+	Minastrin 24 FE	Layolis FE+
Amethia LO+	NuvaRing+	Loestrin FE
Apri+	Seasonique	Microgestin+
Aranelle+	Taytulla	Microgestin 24 FE+
Ashlyna+		Microgestin FE+
Aubra+		Rivelsa+
Aviane+		Skyla*
Azurette+		Take Action+
Balziva+		Trinessa Lo+
Bekyree+		Today Contraceptive Sponge+
Blisovi 24 FE+		VCF+
Blisovi FE+		
Briellyn+		
Camila+		
Camrese+		
Camrese LO+		
Caya Contoured+		
Caziant+		
Chateal+		
Cryselle+		
Cyclafem+		
Cyred+		
Dasetta+		
Daysee+		
Deblitane+		
Delyla+		
desogestr-eth estrad eth estra+		
drospirenone-eth estra-levomef+		
drospirenone-ethinyl estradiol+		
Econtra EZ+		
Elinest+		
Emoquette+		
Enpresse+		
Enskyce+		
Errin+		
Estarylla+		
ethynodiol-ethinyl estradiol+		
Fallback Solo+		
Falmina+		
Fayosim+		

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
CONTRACEPTIVE PRODUCTS *(cont)*		
FC2 Female Condom+		
Femcap+		
Femynor+		
Gianvi+		
Gildagia+		
Gynol II+		
Heather+		
Introvale+		
Jencycla+		
Jolessa+		
Jolivette+		
Juleber+		
Junel+		
Junel FE+		
Junel FE 24+		
Kaitlib FE+		
Kariva+		
Kelnor 1-35+		
Kimidess+		
Kurvelo+		
Larin+		
Larin 24 FE+		
Larin FE+		
Larissia+		
Leena+		
Lessina+		
Levonest+		
levonorgestrel+		
levonorgestrel-eth estradiol+		
levonorg-eth estrad eth estrad+		
Levora+		
Lomedia 24 FE+		
Loryna+		
Low-Ogestrel+		
Lutera+		
Lyza+		
Marlissa+		
Mibelas 24 FE+		
Mono-Linyah+		
Mononessa+		
My Way+		
Myzilra+		
Necon+		
Next Choice One Dose+		
Nikki+		
Nora-Be+		
norethindrone+		
norethindron-ethinyl estradiol+		

TIER 1 $	TIER 2 $$	TIER 3 $$$
CONTRACEPTIVE PRODUCTS *(cont)*		
norethin-eth estra-ferrous+		
norgestimate-ethinyl estradiol+		
Norlyda+		
Norlyroc+		
Nortrel+		
Ocella+		
Opcicon One-Step+		
Option 2+		
Orsythia+		
Philith+		
Pimtrea+		
Pirmella+		
Portia+		
Previfem+		
Quasense+		
Rajani+		
React+		
Reclipsen+		
Rivelsa+		
Setlakin+		
Sharobel+		
Sprintec+		
Sronyx+		
Syeda+		
Tarina FE+		
Tilia FE+		
Tri Femynor+		
Tri-Estarylla+		
Tri-Legest FE+		
Tri-Linyah+		
Tri-LO-Estarylla+		
Tri-LO-Marzia+		
Tri-LO-Sprintec+		
Trinessa+		
Tri-Previfem+		
Tri-Sprintec+		
Velivet+		
Vestura+		
Vienva+		
Viorele+		
Vyfemla+		
Wera+		
Wide Seal Diaphragm+		
Wymzya FE+		
Xulane+		
Zarah+		
Zenchent+		
Zenchent FE+		
Zovia+		

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
COUGH/COLD MEDICATIONS		
benzonatate		Flowtuss (QL)
Bromfed DM		Hycofenix (QL)
brompheniramine-pseudoephedrine-DM		Tussionex (QL)
hydrocodone BT-homatropine (QL)		Tuzistra XR (QL)
hydrocodone-chlorpheniramine ER (QL)		
Hydromet (QL)		
promethazine-codeine (QL)		
Tussigon (QL)		
DENTAL PRODUCTS		
chlorhexidine		Floriva^+
doxycycline		Fluorabon^+
fluoride 0.25mg, 0.5mg^+		Fluor-a-Day^+
fluoride 1mg^		
Fluoritab 0.5mg^+		
Fluoritab 1mg		
Flura-Drops^+		
Ludent fluoride^		
Oralone		
Paroex		
Peridex		
Periogard		
sodium fluoride 1mg^		
sodium fluoride drops+		
triamcinolone		
DIABETES		
BD insulin syringes/pen needles	Basaglar	Cycloset
glimepiride	Bydureon (QL)	Glucophage
glipizide	Byetta	Glucophage XR
glipizide ER	Farxiga	Riomet
glipizide XL	Glucagen HypoKit (QL)	VGo
metformin	Glucagon Emergency Kit (QL)	
metformin ER	Glyxambi	
TechLite lancets	Humalog	
	Humulin	
	Janumet	
	Janumet XR	
	Januvia	

TIER 1 $	TIER 2 $$	TIER 3 $$$
DIABETES *(cont)*		
	Jardiance	
	Kombiglyze XR	
	Levemir	
	OneTouch test strips and meters	
	Onglyza	
	Soliqua	
	SymlinPen	
	Synjardy	
	Synjardy XR	
	Tresiba	
	Trulicity (QL)	
	Xigduo XR	
DIURETICS		
acetazolamide		Aldactazide
chlorthalidone		Aldactone
eplerenone		Dyazide
furosemide		Maxzide
hydrochlorothiazide		Samsca*
spironolactone		
triamterene-HCTZ		
EAR MEDICATIONS		
fluocinolone oil	Cipro HC	
neomycin-polymyxin-HC	Ciprodex	
ERECTILE DYSFUNCTION		
	Cialis^ (QL)	
	Muse^ (QL)	
	Viagra^ (QL)	
EYE CONDITIONS		
brimonidine	Alphagan P 0.1%	Acuvail
ciprofloxacin	Azasite	Alphagan P 0.15%
dorzolamide-timolol	Azopt	Alrex
erythromycin	Betimol	Bepreve
fluorometholone	Betoptic S	Besivance
gatifloxacin	Lotemax drops, gel	Bromsite
latanoprost	Moxeza	Combigan
neomycin-polymyxin-dexameth	Pataday	Cosopt PF
ofloxacin	Pazeo	Cystaran (QL)
olopatadine	Pred Mild	Durezol
polymyxin B sul-trimethoprim	Restasis	Ilevro
prednisolone	Simbrinza	Lastacaft
	Tobradex ointment	Lotemax ointment
		Lumigan
		Nevanac

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
EYE CONDITIONS *(cont)*		
timolol	Travatan Z	Omnipred
tobramycin	Vigamox	Patanol
tobramycin-dexamethasone	Xiidra	Pred Forte
		Prolensa
		Tobradex drops
		Tobradex ST
		Zioptan (ST, QL)
		Zirgan
		Zylet
FEMININE PRODUCTS		
Fem pH		AVC
Gynazole 1		Relagard
miconazole 3		Terazol 7
terconazole		
GASTROINTESTINAL/HEARTBURN		
Alophen+	Apriso	Aciphex (ST)
alosetron	Canasa	Akynzeo* (PA, QL)
Anucort-HC	Carafate suspension	Amitiza
balsalazide	Creon	Carafate tablet
bisacodyl+	Dexilant	Chenodal
Bisa-lax+	GoLytely powder+	Cholbam* (PA)
chlordiazepoxide-clidinium	Lialda	Colyte With Flavor Packets+
Clearlax+	Pentasa	Correctol+
dicyclomine	Proctofoam-HC	Diclegis
diphenoxylate-atropine	Zenpep	Donnatal
dronabinol		Dulcolax+
Ducodyl+		Emend* (PA, QL)
esomeprazole		Gattex* (PA)
famotidine		Gialax+
Gavilax+		GoLytely solution+
Gavilyte-C+		Linzess
Gavilyte-G+		Miralax+
Gavilyte-N+		Movantik (PA)
Gentle laxative+		Moviprep+
Glycolax+		Nexium packet (ST)
Healthylax+		NuLytely with Flavor Packs+
Hemmorex-HC		Ome-PPI
hydrocortisone suppository		Osmoprep+
lansoprazole		Pancreaze
lansoprazole-amoxicillin-clarithromycin (combo pak)		Pertzye
mesalamine		Prepopik
metoclopramide		Prevacid (ST)
metoclopramide ODT		Procort
		Protonix (ST)
		Ravicti
		Rectiv
		Relistor (PA)
		Sancuso (PA, QL)

TIER 1 $	TIER 2 $$	TIER 3 $$$
GASTROINTESTINAL/HEARTBURN *(cont)*		
omeprazole		Sensipar*
ondansetron		sfRowasa
ondansetron ODT		Suprep+
pantoprazole		Varubi* (PA, QL)
peg-3350+		Viberzi
peg-3350 and electrolytes		Viokace
peg-3350 with flavor packs+		
peg-prep+		
Phenadoz		
Powderlax+		
promethazine		
promethegan		
Purelax+		
rabeprazole		
ranitidine		
Smoothlax+		
sucralfate		
TriLyte with flavor packets+		
ursodiol		
HORMONAL AGENTS		
Amabelz	Androderm (PA, QL)	Activella
budesonide EC	Androgel (PA, QL)	Alora (QL)
cabergoline (QL)	Armour Thyroid	Armour Thyroid
Covaryx	Cytomel 50mcg	Climara
Covaryx H.S.	Depo-Testosterone	Climara Pro
desmopressin	Divigel	Combipatch
dexamethasone	Duavee	Cytomel 5mcg, 25mcg
dexamethasone intensol	Estring (QL)	Deltasone
EEMT	Forteo*	Egrifta* (PA)
EEMT H.S.	Ganirelix*^	Elestrin
estradiol patch (QL)	Humatrope* (PA)	Emflaza* (PA)
estradiol-norethindrone	Levo-T	Entocort EC
estrogen & methyltestosterone	Lupron Depot*^ (PA)	Estrace
levothyroxine	Lupron Depot-Ped*^ (PA)	Estrogel
Levoxyl	Premarin	Evamist
liothyronine	Premphase	Femring
LoCort	Prempro	Menostar (QL)
medroxyprogesterone	Serostim 4mg, 6mg* (PA)	Minivelle (QL)
methylprednisolone	Somavert* (PA)	Natpara* (PA)
Millipred	Synthroid	Osphena
Millipred DP	Unithroid	Rayaldee
Mimvey		Saizen-saizenprep* (PA)
		Serostim 5mg* (PA)

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
HORMONAL AGENTS *(cont)*		
Mimvey LO		Somatuline Depot*^ (PA)
Nature-Throid		Striant (PA, QL)
norethindrone		Tirosint
NP Thyroid		Vagifem (QL)
prednisolone		Vivelle-Dot (QL)
prednisolone ODT		Zorbtive* (PA)
prednisone		
prednisone intensol		
progesterone		
testosterone (PA)		
testosterone cypionate		
Westhroid		
WP Thyroid		
Yuvafem (QL)		
INFECTIONS		
acyclovir	Albenza	Alinia
adefovir*	Baraclude solution*	Bactrim
amoxicillin	Ceftin	Bactrim DS
amoxicillin-clavulanate ER	Cipro suspension	Baraclude tablet*
amoxicillin-clavulanate	Daraprim (PA)	Cayston*
atovaquone	E.E.S. 400 filmtab	Cleocin
Avidoxy	Epclusa* (PA)	Clindesse
azithromycin	Ery-Tab	Cresemba (PA)
cefdinir	Harvoni* (PA)	Daklinza* (PA)
cefixime	Kitabis Pak*	Dificid (PA)
cefuroxime	Pegintron* (PA)	Eryped 200
cephalexin	Sovaldi* (PA)	Ery-Tab
ciprofloxacin	Tamiflu suspension (QL)	Metrogel-vaginal
clarithromycin	Thalomid* (PA)	Monurol
clarithromycin ER	Uretron D-S	Noxafil
clindamycin	vibramycin syrup	Nuvessa
dapsone		PCE
doxycycline		Plaquenil
doxycycline IR-DR		Sulfatrim
entecavir*		Suprax
erythromycin		Tamiflu capsule (QL)
famciclovir		Tobi Podhaler*
fluconazole		Uribel
hydroxychloroquine		Urogesic-blue
itraconazole		Uta
levofloxacin		Valtrex
linezolid (PA)		vibramycin suspension
metronidazole		Viekira Pak* (PA)
minocycline		Viekira XR* (PA)
minocycline ER		Xifaxan
Moderiba*		Zepatier* (PA)
		Zithromax
		Zmax

TIER 1 $	TIER 2 $$	TIER 3 $$$
INFECTIONS *(cont)*		
Mondoxyne NL		
Morgidox		
moxifloxacin		
nitrofurantoin		
nitrofurantoin mono-macro		
nystatin		
oseltamivir (QL)		
penicillin VK		
sulfamethoxazole-trimethoprim		
terbinafine		
tetracycline		
tinidazole		
tobramycin*		
valacyclovir		
valganciclovir		
vancomycin		
vandazole		
voriconazole (PA)		
INFERTILITY		
clomiphene^	Follistim AQ*^	Crinone 8%^
	Menopur*^	Endometrin^
		Gonal-F*^
MISCELLANEOUS		
disulfiram	Ace Aerosol Cloud Enhancer	Addyi^ (QL)
NebuSal 3%	AeroChamber (QL)	Esbriet* (PA)
PulmoSal	AeroTrach Plus	Exjade*
sodium chloride	AeroVent Plus (QL)	Ferriprox
tetrabenazine* (PA)	BreatheRite (QL)	Hyper-Sal
	BreathRite (QL)	Jadenu*
	Cerdelga* (PA)	Kuvan* (PA)
	Clever Choice holding chamber (QL)	Myalept* (PA)
	Compact Space Chamber (QL)	NebuSal 6%
	EasiVent (QL)	Nuedexta (QL)
	E-Z Spacer (QL)	Strensiq* (PA)
	Flexichamber (QL)	Syprine* (PA)
	InspiraChamber (QL)	Xenazine* (PA)
	LiteAire (QL)	Zavesca* (PA)

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
MISCELLANEOUS *(cont)*		
	MicroChamber (QL) MicroSpacer (QL) OptiChamber Diamond (QL) Orfadin* Pocket Chamber (QL) PrimeAire (QL) ProChamber (QL) RiteFlo (QL) Vortex (QL) Vortex VHC Frog Mask (QL) Vortex VHC Ladybug Mask (QL)	
MULTIPLE SCLEROSIS		
Glatopa* (PA)	Ampyra* (PA) Aubagio* (PA) Avonex* (PA) Betaseron* (PA) Copaxone* (PA) Extavia* (PA) Gilenya* (PA) Plegridy* (PA) Rebif* (PA) Tecfidera* (PA)	Zinbryta* (PA)
NUTRITIONAL/DIETARY		
Baby D Drops+ Baby Vitamin D3+ calcitriol calcium children's iron+ cyanocobalamin injection D3-2000+ daily prenatal+ D Drops+ Delta D3+ Dialyvite Vitamin D3 Max+ D-vi-sol+ D-vita+ FA-8+ fer-iron+ folic acid 1mg folic acid+	CitraNatal D3-50+ Decara+ Dialyvite vitamin D+ Escavite+ Escavite D+ Floriva+ Fosrenol Just D+ Klor-Con M15 K-Tab ER 20meq Maximum D3+ Mephyton MVC-fluoride^+ Nascobal Nestabs DHA OB Complete Optimal D3 M+	Auryxia (QL) Concept DHA Fer-in-sol+ Feriva 21-7 Ferralet 90 Icar+ Integra Plus Ironup+ Klor-Con 8, 10meq KPN Prenatal+ K-Tab ER 8meq, 10meq Novaferrum+ Phoslyra Prenatal Formula-DHA+ Renagel Velphoro

TIER 1 $	TIER 2 $$	TIER 3 $$$
NUTRITIONAL/DIETARY *(cont)*		
Folixapure^ Klor-Con M10, M20 Klor-Con Sprinkle levocarnitine multivitamin with fluoride^ multivitamin-iron-fluoride+ One daily prenatal+ Optimal D3+ PNV-DHA potassium chloride Prena1 Pearl Prenatal+ Prenatal Complete+ Prenatal Formula+ Prenatal Multi+ DHA+ prenatal multivitamin+ prenatal multivitamin-DHA+ Prenatal Plus prenatal vitamin+ prenatal vitamin plus low iron PrePlus Virt-PN DHA vitamin D2+ Vitajoy daily D+ vitamins A, C, D and fluoride+ vitamin D+ vitamin D3+ vitamin D-400+ Wee care+ Zatean-PN DHA Zavara^	Perry Prenatal+ Poly-Vi-Flor^+ Poly-Vi-Sol with Iron+ Prefera OB Prenate Quflora+ Renvela Replesta+ Replesta NX+ Select-OB+ DHA Super Daily D3+ Texavite LQ+ Thera-D+ Tristart DHA Tri-Vi-Flor+ Urosex+ Vitafol vitaMedMD One Rx vitaPearl	
OSTEOPOROSIS PRODUCTS		
alendronate (QL) calcitonin-salmon ibandronate raloxifene risedronate risedronate DR		Actonel (ST) Atelvia (ST)

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
PAIN RELIEF AND INFLAMMATORY DISEASE		
acetaminophen-codeine (PA, QL)	colchicine tablet	Abstral (PA, QL)
acetaminophen-codeine (QL)	Colcrys	Actemra* (PA)
acitretin	Cuprimine* (PA)	Actiq (PA, QL)
allopurinol	Depen* (PA)	Analpram HC
baclofen	Embeda (PA, QL)	Arymo ER (PA, QL)
butalb-acetaminoph-caff-codeine (PA, QL)	Enbrel* (PA)	Butrans (QL)
butalb-caff-acetaminoph-codeine (PA, QL)	Humira* (PA)	Celebrex (ST, QL)
butalbital-acetaminophen-caff (QL)	Hysingla ER (PA, QL)	Cimzia* (PA)
Capacet (QL)	Indocin	colchicine capsule
carisoprodol	Nucynta (PA, QL)	Cosentyx* (PA)
celecoxib (QL)	Otezla* (PA)	Duragesic (PA, QL)
cyclobenzaprine	Rasuvo* (PA)	Fentora (PA, QL)
DermacinRx Empricaine	Remicade*^ (PA)	Fexmid
DermacinRx Prizopak	Savella	Flector (ST, QL)
diclofenac 0.1% gel (QL)	Subsys (PA, QL)	Frova (QL)
diclofenac ER	Uloric	Ilaris*^ (PA)
diclofenac-misoprostol	Xtampza ER (PA, QL)	Lazanda (PA, QL)
dihydroergotamine (QL)		Lidoderm
Endocet (PA, QL)		Mitigare
etodolac		Morphabond ER (PA, QL)
etodolac ER		Nucynta ER (PA, QL)
fentanyl (PA, QL)		Onzetra Xsail (QL)
frovatriptan (QL)		Orencia* (PA)
Glydo		Otrexup* (PA)
hydrocodone-acetaminophen (PA)		Oxaydo (PA, QL)
hydromorphone (PA, QL)		Parafon Forte DSC
hydromorphone ER (PA, QL)		Pennsaid (ST)
ibuprofen		Percocet (PA, QL)
indomethacin		Relpax (QL)
indomethacin ER		Simponi Aria* (PA)
ketorolac (QL)		Simponi* (PA)
leflunomide		Stelara* (PA)
lidocaine (QL)		Taltz* (PA)
lidocaine viscous		Voltaren (ST, QL)
		Xeljanz XR* (PA)
		Xeljanz* (PA)
		Zohydro ER (PA, QL)

TIER 1 $	TIER 2 $$	TIER 3 $$$
PAIN RELIEF AND INFLAMMATORY DISEASE *(cont)*		
lidocaine-prilocaine		
Lidopril		
Lidopril XR		
Lido-Prilo Caine Pack		
LiproZonePak		
Livixil Pak		
Lorcet (PA, QL)		
Lorcet HD (PA, QL)		
Lorcet Plus (PA, QL)		
Lortab (PA, QL)		
Medolor Pak		
meloxicam		
Metaxall		
metaxalone		
methocarbamol		
morphine (PA, QL)		
morphine ER (PA, QL)		
nabumetone		
naproxen		
naproxen DS		
oxycodone (PA, QL)		
oxycodone ER (PA, QL)		
oxycodone-acetaminophen (PA, QL)		
oxymorphone (PA, QL)		
oxymorphone ER (PA, QL)		
Prilolid		
Primlev (PA, QL)		
Relador Pak		
Relador Pak Plus		
rizatriptan (QL)		
sumatriptan (QL)		
tizanidine		
tramadol (QL)		
tramadol ER (QL)		
Verdrocet (PA, QL)		
Vicodin (PA, QL)		
Vicodin ES (PA, QL)		
Vicodin HP (PA, QL)		
zolmitriptan (QL)		
zolmitriptan ODT (QL)		

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
PARKINSON'S DISEASE		
benztropine	Apokyn* (PA)	Duopa*
bromocriptine	Azilect	Mirapex
carbidopa-levodopa		Mirapex ER
carbidopa-levodopa ER		Neupro
carbidopa-levodopa-entacapone		Rytary
pramipexole		Sinemet
pramipexole ER		Sinemet CR
ropinirole		Tasmar
ropinirole ER		
SCHIZOPHRENIA/ANTI-PSYCHOTICS		
aripiprazole		Invega (ST)
aripiprazole ODT		Latuda (ST)
chlorpromazine		Rexulti (ST)
clozapine		Risperdal (ST)
clozapine ODT		Risperdal M-tab (ST)
haloperidol		Saphris (ST)
olanzapine		Seroquel (ST)
olanzapine ODT		Seroquel XR (ST)
olanzapine-fluoxetine		Vraylar (ST)
paliperidone ER		
quetiapine		
quetiapine ER		
risperidone		
risperidone ODT		
ziprasidone		
SEIZURE DISORDERS		
carbamazepine	Dilantin 30mg	Aptiom
carbamazepine ER	Lamictal ODT	Banzel (QL)
clonazepam	Lamictal XR dose pack	Briviact
divalproex	Lyrica	Carbatrol
divalproex ER	Vimpat	Depakote
Epitol		Depakote ER
gabapentin		Depakote Sprinkle
lamotrigine		Dilantin 50mg, 100mg, susp.
lamotrigine ER		Fycompa
lamotrigine ODT		Keppra
levetiracetam		Keppra XR
levetiracetam ER		Lamictal
oxcarbazepine		Lamictal XR
Roweepra		Oxtellar XR
topiramate		Phenytek
		Qudexy XR
		Sabril*

TIER 1 $	TIER 2 $$	TIER 3 $$$
SEIZURE DISORDERS *(cont)*		
		Spritam
		Tegretol
		Tegretol XR
		Topamax
		topiramate ER
		Trileptal
		Trokendi XR
SKIN CONDITIONS		
acitretin	Aczone	Acanya
acyclovir	Azelex	Atralin (PA age)
adapalene (PA age)	Denavir (QL)	Avar pads
Ala-Cort	Differin (PA age)	Avar LS
Amnesteem (QL)	Drysol	Avita
Avar cleanser	Epiduo	Avita cream (PA age)
Avar-E	Epiduo Forte	Cleocin T
BP 10-1	Eucrisa	Cordran (ST)
calcipotriene	Exelderm	Desonate (ST)
calcipotriene-betamethasone DP	Finacea	Desowen (ST)
calcitrene	Fluoroplex	Efudex
Claravis (QL)	Metrogel	Elidel
Clindacin ETZ	Naftin	Enstilar
Clindacin P	Tazorac	Evoclin
clindamycin		Metrocream
clindamycin-benzoyl peroxide		Metrolotion
clobetasol		Nizoral
Clodan		Olux (ST)
clotrimazole-betamethasone		Onexton
Cormax		Picato
desonide		Retin-A (PA age)
diclofenac 0.3% gel		Retin-A Micro (PA age)
doxepin		Sklice
econazole		Soolantra
fluocinonide		Taclonex
fluorouracil		Targretin*
hydrocortisone		Temovate (ST)
imiquimod		Tolak
ketoconazole		Topicort (ST)
metronidazole		Tretin-X
mupirocin		Tridesilon (ST)
Myorisan (QL)		Veltin
Neuac gel		Xolegel
nystatin-triamcinolone		
Permethrin		
Procto-Med HC		
Procto-Pak		

Cigna Standard 3-Tier Prescription Drug List

TIER 1 $	TIER 2 $$	TIER 3 $$$
SKIN CONDITIONS *(cont)*		
Proctosol-HC		
Proctozone-HC		
Rosadan		
Rosanil		
Scalacort		
sodium sulfacetamide-sulfur		
SS 10-2		
SSS 10-5		
SulfaCleanse 8-4		
tacrolimus		
tretinoin (PA age)		
tretinoin microsphere (PA age)		
triamcinolone		
Triderm		
Zenatane (QL)		
SLEEP DISORDERS/SEDATIVES		
armodafinil (PA)	Belsomra (ST)	Xyrem* (PA)
eszopiclone	Silenor (ST)	Zolpimist (ST)
modafinil (PA)		
temazepam		
zolpidem		
zolpidem ER		
SMOKING CESSATION		
bupropion SR 150mg+	Chantix^ (QL)	Nicorette lozenge, gum+
Nicoderm CQ+	Nicotrol^ (QL)	Zyban^
Nicorelief+	Nicotrol NS^ (QL)	
nicotine gum+		
nicotine lozenge+		
nicotine patch+		
NTS+		
Quit 2+		
Quit 4+		
stop smoking aid+		
SUBSTANCE ABUSE		
buprenorphine	Bunavail	
buprenorphine-naloxone	Narcan	
naloxone	Suboxone	
naltrexone (QL)	Zubsolv	

TIER 1 $	TIER 2 $$	TIER 3 $$$
TRANSPLANT MEDICATIONS		
azathioprine*	Cellcept*	Astagraf XL*
mycophenolate*	Neoral*	Envarsus XR*
mycophenolic acid*	Prograf*	Myfortic*
sirolimus*		
tacrolimus*		
URINARY TRACT CONDITIONS		
cevimeline	Cystagon*	Avodart
dutasteride	Elmiron	Jalyn
finasteride	Thiola	Procysbi* (PA)
oxybutynin		Rapaflo
oxybutynin ER		
phenazopyridine		
potassium ER		
tamsulosin		
tolterodine		
tolterodine ER		

Medications that are not covered

The medications listed below aren't covered on your plan's drug list.^^ If you fill a prescription for any of these medications, you'll have to pay the full cost of the medication. You should think about switching to a covered alternative.^^ We've listed some alternatives below for you to talk about with your doctor.

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
ALLERGY/NASAL SPRAYS	Auvi-Q EpiPen EpiPen Jr	epinephrine auto-injector
	Beconase AQ Dymista Nasonex Omnaris QNASL Zetonna	Generic nasal steroids (e.g., fluticasone)
	QNASL Children	budesonide fluticasone triamcinolone
ANXIETY/DEPRESSION/BIPOLAR DISORDER	Aplenzin	bupropion XL
	Anafranil	clomipramine
	Ativan	lorazepam
	Cymbalta	duloxetine
	Lexapro	escitalopram
	Pamelor	nortripyline
	Parnate	tranylcypromine
	Pexeva	paroxetine
	Tofranil	imipramine
	Wellbutrin XL	bupropion XL (ER 24hr tablet)
ASTHMA/COPD/RESPIRATORY	Aerospan Alvesco Arnuity Ellipta Asmanex Asmanex HFA Flovent Diskus Flovent HFA	QVAR
	Bevespi	Anoro Ellipta Stiolto Respimat
	AirDuo RespiClick Dulera	Advair Diskus Advair HFA Breo Ellipta
	Proventil HFA Xopenex HFA	ProAir HFA ProAir RespiClick
	Seebri Neohaler Tudorza Pressair	Spiriva Spiriva Respimat
	Utibron Neohaler	Anoro Ellipta
	Zyflo	zileuton ER montelukast zafirlukast
	Zyflo CR	zileuton ER

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
ATTENTION DEFICIT HYPERACTIVITY DISORDER	Desoxyn	methamphetamine
	Dexedrine	dextroamphetamine ER
BLOOD PRESSURE/HEART MEDICATIONS	Betapace	sotalol
	Cardizem	diltiazem
	Cardizem CD	diltiazem CD/ER Cartia XT
	Isordil Isordil Titradose	isosorbide dinitrate
	Lanoxin	Digitek digoxin
BLOOD THINNERS/ANTI-CLOTTING	Yosprala	Durlaza
CANCER	Nilandron	nilutamide
CHOLESTEROL MEDICATIONS	Antara Fenoglide	fenofibrate
	Lipitor	atorvastatin
COUGH/COLD MEDICATIONS	Tussicaps	hydrocodone-chlorpheniramne ER promethazine-codeine
DENTAL PRODUCTS	Arestin	minocycline
DIABETES	Accu-Chek, Contour, Freestyle, all other test strips	OneTouch Ultra, OneTouch Verio
	Afrezza Apidra Aprida SoloStar	Humalog
	Fortamet Glumetza metformin ER (generic Fortamet and generic Glumetza)	metformin ER (generic Glucophage XR)
	Invokamet Invokamet XR	Synjardy, Synjardy XR Xigduo XR
	Invokana	Farxiga
	Jentadueto Jentadueto XR Kazano Nesina	Janumet, Janumet XR
	Kombiglyze XR Onglyza Oseni Tradjenta	alogliptin alogliptin-metformin Januvia, Janumet, Janumet XR
	Lantus Toujeo SoloStar	Basaglar Levemir Tresiba
	Novolin, Novolog	Humalog, Humulin
	Tanzeum Victoza	Trulicity
DIURETICS	Edecrin ethacrynic acid	bumetanide furosemide torsemide

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
GASTROINTESTINAL/HEARTBURN	Anusol-HC suppository Cortifoam Uceris foam	Anucort-HC Hemmorex-HC hydrocortisone suppository
	Asacol-HD Colazal Delzicol Dipentum Giazo mesalamine tablet	Apriso balsalazide Lialda Pentasa sulfasalazine sulfasalazine DR
	Librax	chlordiazepoxide-clidinium
	Lotronex	alosetron
	Marinol	dronabinol
	Nexium capsule	esomeprazole
	Omeclamox-pak Prevpac Pylera	lansoprazole-amoxicillin-clarithromycin pak
	omeprazole-bicarbonate Zegerid	omeprazole
	Pepcid	famotidine
	Prevacid SoluTab	Generic prescription PPIs (e.g., lansoprazole)
	Rowasa	mesalamine enema
	Trulance	Amitiza, Linzess
	Zofran	ondansetron
	Zofran ODT	ondansetron ODT
	Zuplenz	ondansetron ondansetron ODT
HORMONAL AGENTS	Axiron Fortesta Natesto Testim Vogelxo	Androgel testosterone
	Cortrosyn	cosyntropin
	DDAVP	desmopressin
	Dexpak Zonacort	dexamethasone
	Genotropin Norditropin Nutropin AQ Omnitrope Saizen Zomacton	Humatrope (PA)
	Hectorol	doxercalciferol
	Rayos	prednisone prednisone intensol
	Uceris tablet	budesonide EC

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
INFECTIONS	Acticlate Doryx Minocin capsule Monodox Oracea Solodyn vibramycin capsule	Generic products (e.g., doxycycline; minocycline)
	Augmentin/ES/XR	amoxicillin-clavulanate ER
	Bethkis Tobi	Kitabis Pak tobramycin
	Diflucan	fluconazole
	E.E.S. 200 Eryped 400	erythromycin ethylsuccinate
	Mepron	atovaquone
	Onmel	itraconazole terbinafine
	Sitavig	acyclovir
	Sporanox	itraconazole
	Targadox	tobramycin
	Valcyte	valganciclovir
	Vancocin	vancomycin
	Zovirax	acyclovir
MISCELLANEOUS	Horizant	gabapentin
PAIN RELIEF AND INFLAMMATORY DISEASE	Amrix	cyclobenzaprine Other generic muscle relaxants
	Belbuca	buprenorphine
	Bupap	butalbital-acetaminophen Marten-Tab Tencon
	Cambia diclofenac drops Duexis Naprelan naproxen CR naproxen ER Pennsaid Tivorbex Vimovo Vivlodex Zipsor Zorvolex	Generic prescription NSAIDs (e.g., celecoxib, meloxicam)
	Conzip	tramadol tramadol ER
	D.H.E 45	dihydroergotamine
	Gralise	gabapentin

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
PAIN RELIEF AND INFLAMMATORY DISEASE *(cont)*	Imitrex Sumavel DosePro Zembrace SymTouch	sumatriptan
	levorphanol	Generic products (e.g., acetaminophen-codeine, hydromorphone, oxycodone)
	lidocaine vial, syringe, ampule	lidocaine jelly, solution, ointment, patch
	Lido-K	
	Lorzone	chlorzoxazone
	Migranal	dihydroergotamine
	OxyContin	Xtampza ER (PA) Embeda ER (PA) Hysingla ER (PA)
	Roxicodone	oxycodone
	Sprix	ketorolac
	Treximet	Generic NSAIDs Generic triptans (e.g., sumatriptan, naratriptan)
	Vanatol LQ	butalbital-acetaminophen-caffe
	Zomig	zolmitriptan sumatriptan
	Zomig ZMT	zolmitriptan ODT
PARKINSON'S DISEASE	Lodosyn	carbidopa
	Requip XL	ropinirole ER
SCHIZOPHRENIA/ANTI-PSYCHOTICS	Abilify	aripiprazole
	Fazaclo Versacloz	clozapine clozapine ODT
	Geodon	ziprasidone
	Zyprexa	olanzapine
	Zyprexa Zydis	olanzapine ODT
SEIZURE DISORDERS	Mysoline	primidone
SKIN CONDITIONS	Absorica	Claravis Myorisan Zenatane
	Aldara Zyclara	imiquimod
	Anusol-HC cream	hydrocortisone Procto-Med HC Proctosol-HC Proctozone-HC
	Bensal HP	salicylic acid
	Benzaclin Duac Neuac kit	clindamycin-benzoyl peroxide Neuac gel
	Carac	fluorouracil

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
SKIN CONDITIONS *(cont)*	Clindagel	clindamycin
	Clobex	clobetasol
	Cutivate	Generic topical steroid (e.g. betamethasone)
	Ertaczo Extina Luzu Vusion	ketoconazole
	Halog Ultravate X	clobetasol halobetasol
	Jublia Kerydin	Ciclodan ciclopirox itraconazole terbinafine
	Kenalog	triamcinolone
	Locoid Locoid Lipocream	hydrocortisone
	Loprox	ciclopirox
	Noritate	metronidazole Rosadan
	Oxistat	clotrimazole econazole ketoconazole
	Penlac	Ciclodan ciclopirox
	Plexion	sodium sulfacetamide-sulfur SS 10-2
	Prudoxin Zonalon	doxepin
	Salex	salicylic acid
	Sernivo	betamethasone fluocinonide hydrocortisone
	Siliq	Humira, Cosentyx
	Soriatane	acitretin
	Trianex	triamcinolone Triderm
	Ultravate	clobetasol
	Vanos	fluocinonide
	Verdeso Xerese	desonide acyclovir hydrocortisone
	Ziana	tretinoin clindamycin-benzoyl peroxide

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
SLEEP DISORDERS/SEDATIVES	Ambien Ambien CR Edluar Intermezzo	zolpidem zolpidem ER
	Nuvigil	armodafinil
	Provigil	modafinil
	Restoril	temazepam
URINARY TRACT CONDITIONS	Detrol Detrol LA Ditropan XL Enablex Gelnique Myrbetriq Oxytrol Toviaz VESIcare	darifenacin ER oxybutynin ER tolterodine ER trospium ER

^^ These medications require approval from Cigna before they're covered by your plan. If your doctor feels that an alternative medication isn't right for you, he or she can ask Cigna to consider approving coverage of your medication.

Prescription drug list FAQs

We want to make sure you understand your prescription drug coverage so you can get the most from your pharmacy benefit. Below are answers to some of the most commonly asked questions about the Cigna Prescription Drug List.

Why do you make changes to the drug list?

Cigna regularly reviews and updates the prescription drug list. We make updates to the drug list for many reasons, like when new generics become available, medications are no longer available or when medication prices change. For example, the price of a brand name medication may increase much more than other medications that treat the same condition. When that happens, we may try to find lower-cost generic or "preferred brand" alternatives that are just as safe and effective as the higher-cost brand. These changes may include:[1]

- Moving a medication to a lower cost tier. This can happen at any time during the year.
- Moving a medication to a higher cost tier when a generic becomes available. This can happen at any time during the year.
- Moving a medication to a higher cost tier or no longer covering a medication. This typically happens twice per year on January 1st and July 1st.
- Adding requirements to a medication. For example, requiring approval from Cigna before a medication is covered or adding a quantity limit to a medication.

When a medication changes tiers or is no longer covered, you may have to pay a different amount to fill that medication.

Why aren't some medications covered on my drug list?

Some high-cost medications have clinically appropriate alternatives. Meaning, they work the same or similar to another covered prescription medication or over-the-counter (available without a prescription) alternative. To help lower your overall health care costs, these high-cost medications are not covered. If your doctor feels an alternative medication isn't right for you, he or she can ask Cigna to consider approving coverage of your medication.

We also do not cover medications that aren't approved by the U.S. Food and Drug Administration (FDA).

How do you decide what medications are covered?

The Cigna Prescription Drug List is developed in cooperation with Cigna's Pharmacy and Therapeutics Committee, a panel of practicing doctors and pharmacists, most of whom work outside of Cigna. Every medication available on the drug list has been approved by the FDA. The Pharmacy and Therapeutics Committee uses medical resources and references on the safety and efficacy of prescription medications, and doesn't consider finances. The committee's findings are based on clinical evidence and are shared with a separate business decision team. The business team reviews their findings and other factors when deciding the placement of the medication on the drug list. Our goal is to provide access to coverage for safe, clinically effective and low-cost medications.

What medications are covered under the health care reform law?

The Patient Protection and Affordable Care Act, commonly referred to as "health care reform," was signed into law on March 23, 2010. Under this law, certain preventive medications (including some over-the-counter medicines) may be available to you at no cost-share ($0), depending on your plan. Log into **myCigna.com** or check your plan materials to learn more about how your plan covers preventive medications. You can also view the No Cost-Share Preventive Medications drug list on **Cigna.com/druglist**.

For more information about health care reform, visit **www.informedonreform.com** or **Cigna.com**.

Are medications newly approved by the FDA covered on my drug list?

Newly approved medications may not be covered on your drug list for the first six months after they receive FDA approval. These include, but are not limited to, medications, medical supplies or devices covered under standard

pharmacy benefit plans. We review all newly approved medications to determine if should be covered, and if so, at what tier level. If your doctor feels a currently covered medication isn't right for you, he or she can ask Cigna to consider approving coverage of the newly approved medication.

How can I find out how much I'll pay for a specific medication?

Use the Drug Cost tool on **myCigna.com** to learn how much your medication may cost and view lower cost alternatives, if available.

How can I save money on my prescription medications?

You may be able to save money by switching to a lower-cost medication or by filling a 90-day supply, if your plan allows. Talk with your doctor to see if a lower-cost medication, or 90-day supply, may work for you.

What's the difference between brand name and generic medications?

The FDA requires generic medications to have the same quality and performance as brand name medications. A generic medication is the same as a brand name medication in dosage form, active ingredient, strength, route of administration, quality, performance characteristics and intended use. Generics typically cost much less than brand name medications – in some cases, up to 80%–85% less.[2] Just because generics cost less than brands, it doesn't mean they're lower-quality medications.

How can I get help with my specialty medication?

Cigna Specialty Pharmacy Services℠ can help you manage your health and prescription needs.[3] Our therapy management teams, made up of health advocates with nursing backgrounds and pharmacists, provide personalized, 24/7 support. They offer condition-specific education on medication therapy and side effects, help manage the approval process and offer financial assistance programs if you need help paying for your specialty medication.

Call us at **800.351.3606** if you have questions or need help transferring your prescription. You can also go to **cigna.com/specialty-pharmacy-services** to learn more.

Can I fill my prescriptions by mail?

If you take a medication every day to treat an ongoing health condition, you can order up to a 90-day supply through Cigna Home Delivery Pharmacy.℠ [3] To get started, call us at **800.835.3784** or go to **cigna.com/home-delivery-pharmacy**.

Where can I find more information about my prescription drug plan?

Use the online tools and resources on **myCigna.com** or the **myCigna app**[4] to help you better understand and manage your pharmacy benefits. You can view your drug list or search for a specific medication, use Drug Cost tool to estimate how much your medications may cost, find a pharmacy in your network and review your pharmacy claims and payment history.

Exclusions and limitations

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and be medically necessary. If your plan provides coverage for certain preventive prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, the prescription may not be covered. Certain drugs may require prior authorization, or be subject to step therapy, quantity limits or other utilization management requirements.

Plans generally do not provide coverage for the following under the pharmacy benefit, except as required by state or federal law, or by the terms of your specific plan:[5]

- over-the-counter (OTC) medications (medications that do not require a prescription) except insulin unless state or federal law requires coverage of such drugs;
- prescription drugs or supplies for which there is a non-prescription or OTC therapeutic alternative;
- physician-administered injectable medications covered under the Plan's medical benefit, unless otherwise covered under the Plan's prescription drug list or authorized by Cigna;
- implantable contraceptive devices covered under the Plan's medical benefit;
- medications that are not medically necessary;
- experimental or investigational medications, including FDA-approved drugs used for purposes other than those approved by the FDA unless the drug is recognized for the treatment of the particular indication;
- medications that are not approved by the Food & Drug Administration (FDA);
- prescription and non-prescription devices, supplies, and appliances other than those supplies specifically listed as covered;
- medications used for fertility, sexual dysfunction, cosmetic purposes, weight loss, smoking cessation, or athletic enhancement;
- prescription vitamins (other than prenatal vitamins) or dietary supplements unless state or federal law requires coverage of such drugs;
- immunization agents, biological products for allergy immunization, biological sera, blood, blood plasma and other blood products or fractions and medications used for travel prophylaxis;
- replacement of prescription drugs and related supplies due to loss or theft;
- drugs which are to be taken by or administered to a covered person while they are a patient in a licensed hospital, skilled nursing facility, rest home or similar institution which operates on its premises or allows to be operated on its premises a facility for dispensing pharmaceuticals;
- prescriptions more than one year from the date of issue; or

In addition to the plan's standard pharmacy exclusions, certain new FDA-approved drug products (including, but not limited to, medications, medical supplies or devices that are covered under standard pharmacy benefit plans) may not be covered for the first six months of market availability unless authorized by Cigna as medically necessary.

Cigna reserves the right to make changes to the Drug List without notice. Your plan may cover additional medications; please refer to your enrollment materials for details. Cigna does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna may receive payments from manufacturers of certain preferred brand medications, and in limited instances, certain non-preferred brand medications, that may or may not be shared with your plan depending on its arrangement with Cigna. Depending upon plan design, market conditions, the extent to which manufacturer payments are shared with your plan and other factors as of the date of service, the preferred brand medication may or may not represent the lowest-cost brand medication within its class for you and/or your plan.

1. State laws in Texas and Louisiana require your plan to cover your medications at your current benefit level until your plan renews. This means that if your medication is taken off the drug list, is moved to a higher cost-share tier or needs approval, your plan can't make these changes until your renewal date. To find out if these state laws apply to your plan, please call Customer Service using the number on the back of your ID card.
2. U.S. Food and Drug Administration (FDA) website, "Understanding Generic Drugs." Retrieved 08/01/2017.
3. Plans vary, so some plans may not include Cigna Specialty Pharmacy Services or Cigna Home Delivery Pharmacy. Please check your plan materials for more information on what pharmacies are covered under your plan.
4. The downloading and use of the myCigna app is subject to the terms and conditions of the app and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply.
5. Costs and complete details of the plan's prescription drug coverage are set forth in the plan documents. If there are any differences between the information provided here and the plan documents, the information in the plan documents takes complete precedence.

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