

# 2011 CIGNA Prescription Drug List

Georgia State Health Benefit Plan (SHBP)

## *How Your Prescription Drug Plan Works*

To help you fill your prescriptions, CIGNA prescription drug plans provide access to more than 60,000 national and independent pharmacies.

The enclosed CIGNA Prescription Drug List is designed to help you manage your out-of-pocket costs for prescription drugs. Separating drugs into Generic, Preferred Brand and Non-Preferred Brand categories will help you understand how much you'll pay for prescription medications. The list offers a wide selection of drugs in each coverage category, providing the options you need to manage your costs more effectively.

## **YOUR THREE-TIER PRESCRIPTION DRUG PLAN**

*A three-tier prescription drug plan divides medications into three categories or tiers:*

**Generic (first tier) drugs:** A Generic drug has the same active ingredients, safety, dosage, quality and strength as its brand drug counterpart and is sold under the chemical or scientific name for the drug. These medications are typically covered at the Generic copayment or coinsurance level under a three-tier plan and typically cost less than brand drugs.

**Preferred Brand (second tier) drugs:** Preferred Brand drugs are those which generally have no generic equivalent and are either more effective than other drugs in the same class or are equally effective but less costly than the other drugs. These medications are typically covered at the Preferred Brand copayment or coinsurance level under the plan.

**Non-Preferred Brand (third tier) drugs:** Non-Preferred Brand drugs are those which generally have generic equivalents and/or have one or more Preferred Brand options within the same drug class. These medications are typically covered at the highest copayment or coinsurance.

## *Tools to Help You*

On **myCIGNA.com**, you can research and compare thousands of different drugs, get actual out-of-pocket costs for your prescriptions, and learn more about your drug treatment options. You can also use the Prescription Drug Price Quote Tool on the Pharmacy page to see real-time pricing based on your pharmacy plan.

## *Minimums, Maximums and Deductibles*

Under some plans, your payments will apply to your minimum or maximum out-of-pocket amounts. Please check your Summary Plan Description (SPD) to determine your specific prescription drug coverage and exclusions.

*\* If your plan has a deductible, you will need to satisfy the deductible before your prescription drug plan copayments or coinsurance amounts apply.*

## *Specialty Injectable Medications*

Effective August 1, 2011, SHBP will require that most specialty medications be obtained through CIGNA Home Delivery Pharmacy. Our prescription drug plan enables you to conveniently order your specialty injectable medications online or over the phone for home delivery. To get specialty medication order forms, visit the "Specialty Pharmacy" page via the "Resources for Members" link on [www.cigna.com](http://www.cigna.com). To contact CIGNA Specialty Pharmacy Services directly, call us toll-free at 1.800.351.3606.



## Medications Delivered to Your Home

Beginning July 1, 2011, SHBP will add a Home Delivery Program. CIGNA Home Delivery Pharmacy is designed for people who take prescription medications on a regular basis.

The benefits of CIGNA Home Delivery Pharmacy include:

- Up to a 90-day supply of your medications
- Delivery of medications to your home at no additional charge
- Licensed pharmacists available to help 24/7
- CoachRx: a free tool that is available if you use CIGNA Home Delivery Pharmacy. It can help with reminders, coupons and information about your prescriptions. Visit [CIGNA.com/coachrx](http://CIGNA.com/coachrx) to learn more.

To get an order form, you can visit [myCIGNA.com](http://myCIGNA.com) or call the number on the back of your ID card and follow the pharmacy prompts.

SHBP participants will also have the option to have 90 day prescriptions filled through home delivery at a local retail pharmacy that participates in this special home delivery (mail order) program. For many individuals, this means cost savings and increased convenience.

## Health Care Reform

The Patient Protection Affordable Care Act (PPACA), commonly referred to as “health care reform,” was signed into law on March 23, 2010. One of the immediate changes of this legislation requires that health plans provide in-network coverage of evidence-based preventive care services at no cost to eligible members. As part of the PPACA’s *Interim Final Rules for Coverage of Preventive Services*, CIGNA has determined there are four instances in which the regulations recommend the use of a medication or an over-the-counter (OTC) medication. SHBP will cover these medications under the pharmacy benefit at no cost to eligible SHBP members.

The following four prescriptions or OTC medications impacted by the regulations will be administered under the SHBP pharmacy benefits received through CIGNA and will require a prescription:

Medication	Examples	Ages
Aspirin to prevent cardiovascular disease (OTC)	Ascriptin, Bufferin, Halfprin	Men, ages 45 - 79; Women, ages 55 - 79
Iron Supplementation (OTC) (for children at increased risk for iron-deficiency anemia)	Fer In Sol, Vitafof, ICAR, Fer-Gen-Sol	Children, ages 6-12 months
Folic Acid Supplementation (for women planning or capable of pregnancy)	Prenatal, Natalcare, Optinate Folic Acid	Women of childbearing age
Oral Fluoride Supplementation (where water source does not contain fluoride)	Poly Vi Flor, Fluor-A-Day, Luride, Fluritab	Children, ages 6 months to preschool

**Note:** Ocular topical medication for newborns is also referenced in the regulations; however, this medication is typically administered shortly after birth and covered under the medical benefit.

CIGNA expects ongoing clarification of the specific requirements of the PPACA legislation, and their policies and coverage standards will evolve accordingly. To get their most current information, you may visit [www.informedonreform.com](http://www.informedonreform.com) or [CIGNA.com](http://CIGNA.com) and click on the “Informed on Reform” link.

## Understanding the CIGNA Prescription Drug List

Every medication available on CIGNA’s prescription drug list has been approved by the U.S. Food and Drug Administration (FDA). This list represents the most commonly-prescribed medications.

If you do not see a specific medication on this list, please check [www.cigna.com](http://www.cigna.com), go to the “Resources for Members” tab, and click “Drug Lists” for the most up-to-date list of medications.

### The symbols on the list mean . . .

If your medication has one of the following symbols, your doctor may have to get an authorization for coverage of that medication. Please read to understand what they mean:

**PA: Prior Authorization** may be required for different reasons. To learn the requirement for a specific medication, give us a call and we will explain it.

**QL: Quantity Limit** means you may have coverage for a limited amount of a specific medication.

**AGE: Age Requirement** means an individual must be within a specific age group for a specific medication to be covered.

## If You Have Questions

We’re here to help. Just call us at the toll-free number on your CIGNA ID card, and we will be happy to help answer your questions.

## Tier 1 Medications

acarbose	clobetasol	granisetron (tab, solu) (QL)	nisoldipine	timolol
acetaminophen/caffeine/ butalbital	clonazepam	granisetron (vial)(PA)	(sustained-release)	tizanidine
acetohexamide	clozapine	griseofulvin	nitrofurantoin	tobramycin/ dexamethasone
acyclovir	cromolyn	haloperidol	nizatidine	tolazamide
albuterol	cyproheptadine	heparin (QL)	Nortrel	tolbutamide
alclometasone	desipramine	hydralazine/HCTZ	nortriptyline	topiramate
alendronate	desmopressin	hydrocortisone	nystatin	tramadol
allopurinol	desonide	hydroxyzine	Ocella	trandolapril
amantadine	desoximetasone	ibuprofen	ofloxacin	trazodone
amitriptyline	diclofenac	imiquimod	Ogestrel	tretinoin (AGE)
amlodipine	didanosine	indomethacin	omeprazole	Tri-Sprintec
amoxicillin	diflorasone	ipratropium solution	omeprazole/sodium bicarbonate	trimethobenzamide
amoxicillin/clavulanate	digoxin	isosorbide dinitrate	ondansetron (inj)(PA)	Trinessa
amphetamine/ dextroamphetamine	diltiazem	isosorbide mononitrate	ondansetron (QL)	Unithroid
amylase/lipase/protease	diltiazem CD	isotretinoin (QL)	oxaprozin	valproate
anastrozole	disopyramide	Jolessa	oxybutynin	venlafaxine
Apri	divalproex	Junel FE	pantoprazole	verapamil
atenolol	dorzolamide	Kariva	paroxetine	verapamil SR
Aviane	dorzolamide/timolol	ketorolac (PA, QL)	paroxetine CR	warfarin
azathioprine	doxazosin	labetalol	penicillin v potassium	zaleplon
azithromycin (QL)	doxycycline	lansoprazole	pilocarpine	zidovudine
balsalazide	dronabinol	leflunamide (PA)	pilocarpine/epinephrine	Zovia
Balziva	enalapril	leucovorin	piroxicam	
benazepril	enalapril/HCTZ	levetiracetam	pravastatin	
benazepril/amlodipine	Errin	levobunolol	prazosin	
benazepril/HCTZ	erythromycin	Levora	procainamide	
betamethasone	estradiol	levothroid	prochlorperazine	
bicalutamide	estropipate	levothyroxine	promethazine	
bisoprolol/HCTZ	etodolac	levoxyol	propranolol	
bromocriptine	famotidine	liothyronine	protriptyline	
bupropion	felodipine	lisinopril	Quasense	
bupropion SR	fenofibrate	losartan	quinapril	
butorphanol nasal (QL)	fentanyl (QL)	losartan/HCTZ	quinapril/HCTZ	
cabergoline (QL)	fentanyl citrate (lollipop)(PA)	lovastatin	quinidine	
calcipotriene	fexofenadine	loxapine	ramipril (cap only)	
calcitonin-salmon	finasteride	medroxyprogesterone	ranitidine	
calcitriol	fluconazole (QL: 150 mg only)	meloxicam	rimantadine	
Camila	flunisolide	metaproterenol	risperidone	
captopril	fluocinolone	metformin	ropinirole	
carbamazepine	fluocinonide	methamphetamine	selegiline	
carbidopa/levodopa	fluoxetine	methotrexate	sertraline	
carbidopa/levodopa SA	fluticasone	methyl dopa/HCTZ	simvastatin	
carvedilol	fluvoxamine	methylphenidate	SMX/TMP	
cefaclor ER	folic acid	metoclopramide	Solia	
cefadroxil	Fortical	metoprolol	sotalol	
cefprozil	fosinopril	metronidazole	Sotret (QL)	
cefuroxime	gabapentin	minocycline	Sprintec	
cephalexin	galantamine	mirtazapine	stavudine	
chlorpropamide	gemfibrozil	misoprostol	sucralfate	
cholestyramine powder	glimepiride	morphine SR	sulfacetamide	
cimetidine	glipizide	mycophenolate	sumatriptan (QL)	
ciprofloxacin	glipizide/metformin	nabumetone	tamoxifen citrate	
citalopram	glucagon (QL)	nadolol	terazosin	
clarithromycin	glyburide	naltrexone (QL)	tetracycline	
clemastine	glyburide/metformin	naproxen	thiothixene	
clindamycin	glyburide micronized	Necon	thyroid	
		nifedipine	ticlopidine	

## Tier 2 Medications

Accolate	Colazal	Invirase	Ovrette	Symlin/SymlinPen
ACCU-CHECK Test Strips	Combivent	lopidine	OxyContin (QL)	Synarel (PA/QL)
Actimmune (PA)	Combivir	Isentress	Oxytrol	Synthroid
Actoplus met	Concerta	Janumet	Pataday	Tamiflu (QL)
Actos	Condylox	Januvia	Patanol	Tarceva (PA)
Acular LS	Copaxone (PA)	Kadian	Paxil CR	Tazorac
Adderall XR	Coreg CR	Kaletra	Peg Intron (PA)	Tekturna
Advair, Advair HFA	Crixivan	Kenalog spray	Peg Intron Redipen (PA)	Tekturna HCT
Agenerase	Cymbalta	Keppra	Pegasys (PA)	Temodar
Aggrenox	Cytomel	Lamictal (all forms)	Pentasa	Testim
Aldara	Derma-Smoothe	Lanoxin	Plan B	Thalomid
Alomide	Detrol	Lantus	Plan B One-Step	Tikosyn
Alora	Detrol LA	Lantus SoloStar	Plavix	Tobi
Alphagan P	Dexilant	Lescol	Prandimet	Tobradex (oint.)
Altace (caps)	Diastat	Lescol XL	Prandin	Toviaz
Ambien CR	Diastat Acudial	Levaquin	Prefera-OB	Travatan Z
Anadrol-50	Differin (AGE)	Levemir	Premarin	Trexall
Androderm	Dilantin	Lexapro	Premphase	Treximet (QL)
Androgel	Diovan	Lexiva	Prempro	Trilipix
Apidra	Diovan HCT	Lialda	Prevpac	Trizivir
Apidra SoloStar	Dipentum	Lidoderm	Prezista	Truvada
Apokyn (PA)	Dovonex (cream)	Lipitor	Primsol	Tussionex
Aptivus	Duac CS	Locoid (lotion)	Pristiq	Valtrex
Aranesp (PA)	Duetact	Locoid Lipocream	ProAir HFA	Valturna
Aricept	Elmiron	Loestrin 24 FE	Procanbid	Ventolin HFA
Aricept ODT	Emend (QL)	Loprox shampoo	Procrit (PA)	Veramyst
Arixtra (QL)	Emtriva	Lotemax	Prometrium	VESIcare
Armour Thyroid	Enbrel (PA)	Lotrel	Proventil HFA	Vexol
Asacol	Enjuvia	Lovaza	Pulmicort	Vfend (PA)
Asacol HD	Epipen (QL)	Lovenox (QL)	Pulmozyme (PA)	Viagra (PA)
Asmanex	Epipen Jr. (QL)	Lupron (PA)	Qvar	Vigamox
Astelín	Epivir	Lybrel	Rebif (PA)	Viracept
Astepro	Epivir HBV	Lyrica	Remicade (PA)	Viramune
Atrovent HFA	Epzicom	Maxair	Renvela	Viread
Avandamet	Estraderm	Maxalt	Requip	Vivelle-Dot
Avandaryl	Evista	Maxalt MLT	Requip XL	Vytorin
Avandia	Exelderm	Megace ES	Rescriptor	Vyvanse
Avinza	Exforge	Menest	Restasis	Welchol
Avodart	Exforge HCT	Metrogel	Retin-A Micro (AGE)	Wellbutrin XL
Avonex (PA)	Femara	Miacalcin	Revatio (PA)	Xalatan
Azilect	Flomax	Minizide	Revlimid (PA)	Xeloda
Azmacort	Flovent, Flovent HFA	Mirapex	Reyataz	Xolair (PA)
Azopt	Focalin XR	MSIR	Ritalin LA	Yaz
Baraclude	Fortamet	Multaq	Saizen (PA)	Zemplar
BD Insulin Syringe	Forteo	Mycostatin (tab)	Savella	Zetia
Benzaclin	Fosrenol	Namenda	Seasonique	Ziagen
BenzamycinPak	Fragmin (QL)	Nasonex	Selzentry	Zolinza (PA)
Betimol	Fuzeon (PA)	Nexavar (PA)	Serevent	Zyprexa
Betoptic S	Gabitril	Niaspan	Seroquel	
Boniva	Gleevec (PA)	Noritate	Seroquel XR	
Byetta	Glucagen Hypokit	Norvir	Simcor	
Bystolic	Gris-Peg	NovoFine needles	Singulair	
Caduet	Hepsera	Novolin	Skelaxin	
Canasa	Humalog	Novolog	Somavert (PA)	
Carac	Humatrope (PA)	Nuvaring	Soriatane CK	
Celebrex (PA)	Humira (PA)	One Touch test strips	Spiriva	
Cellcept	Humulin	Onglyza	Sprycel (PA)	
Ciloxan (oint.)	Increlex (PA)	Oracea	Strattera	
Cipro HC Otic	Indocin (suppository)	Ortho Evra	Sustiva	
Ciprodex	Innohep (QL)	Ortho Tri-Cyclen LO	Sutent (PA)	
Cloderm	Innopran XL	Ovcon 50	Symbicort	

## Tier 3 Medications

Abilify	Biaxin	Flonase	Moban	Remeron
Abilify Discmelt	Biaxin XL	Floxin Otic	Mobic	Retrovir
Accupril	Capoten	Foradil	Monopril	Rhinocort AQ
Accuretic	Carbatrol	Fosamax	Monopril HCT	Risperdal
Aceon	Cardura	Fosamax Plus D	Monurol	Rocephin (PA)
Aciphex	Cardura XL	Frova (QL)	Moxatag	Ryzolt
Aclovate	Casodex	Gelnique	Naprelan	Sanctura, Sanctura XR
Actiq (PA)	Catapres, Catapres TTS	Genotropin (PA)	Nasacort AQ	Scopace
Activella	Cedax	Geodon	Nasarel	Seasonale
Actonel	Cefzil	Glucophage XR	Neurontin	Semprex-D
Adderall	Celexa	Glycron	Nexium	Serostim (PA)
Adrenaclick	Cenestin	Glyset	Nimotop	Simponi (PA)
Advicor	Ciloxan (drops)	Helidac	Nordette	Skelid
Afinitor (PA)	Cimzia (PA)	Hyzaar	Norditropin (PA)	Solodyn
Agrylin	Cipro XR	Imitrex (QL)	Norditropin Nordiflex (PA)	Soltamox
Alamast	Clarinox (all forms)	Inderal LA	Norpace	Sonata
Allegra (all forms)	Coartem (QL)	Infergen (PA)	Norpace CR	Sporanox (PA/QL)
Alocril	Cognex	Intelence	Norvasc	Starlix
Alrex	Combipatch	Intuniv	Noxafil	Stavzor
Altace (Tabs)	Comtan	Invega	Nucort	Sucraid
Altoprev	Copegus	Iquix	Nucynta	Sular
Alvesco	Coreg	Iressa (PA)	Nutropin (PA)	Suprax
Amaryl	Corgard	Keflex	Nutropin AQ (PA)	Taclonex
Ambien	Cosopt	Keftab	Nuvigil	Talwin Compound
Amerge (QL)	Covera-HS	Keppra XR	Omnaris	Tarka
Amphetamine/ Dextroamphetamine Extended-Release	Cozaar	Kineret (PA)	Omnicef	Tasigna (PA)
Angeliq	Crestor	Klaron	Omnitrope (PA)	Tasmar
Anzemet (inj)(PA)	Cutivate	Kytril (inj)(PA)	Orap	Tegretol XR
Anzemet (tab)(QL)	Daytrana	Kytril (tab, solu)(QL)	Ortho-Cept	Tev-Tropin (PA)
Aphthasol	Depakote (all forms)	Lamisil (PA/QL)	Ortho-Novum 7-7-7	Teveten
Aplenzin	Desogen	Lariam (PA/QL)	Ovace Plus	Teveten HCT
Apriso	Desowen	Levatol	Ovcon 35	Timoptic
Arava (PA)	Desoxyn	Levlen	Panretin (PA)	Tobradex (drops)
Arimidex	DHE 45 (QL)	Locoid (cream/oint./ solution)	Patanase	Tofranil
Aromasin	Ditropan, Ditropan XL	Loestrin	Penlac (PA)	Topamax
Arthrotec	Duragesic (QL)	Loestrin FE	Phoslo	Toprol XL
Atacand	Durezol	Lofibra	Pletal	Tri-Norinyl
Atralin (AGE)	Dynacirc CR	Lo/Ovral-28	Pravachol	TriCor
Atripila	Edluar	Loseasonique	Precose	Trileptal
Augmentin	Effexor XR	Lotensin	Prefest	Trilevlen
Augmentin ES-600	Effient	Lotensin HCT	Prevacid	Triphasil
Augmentin XR	Eldepryl	Luvox CR	Priftin	Trusopt
Avalide	Emadine	Luxiq	Prilosec	Tykerb (PA)
Avapro	Emsam	Malarone (PA)	Prinivil	Tyzeka
Avelox	Enablex	Marinol	Prinzide	Ultravate
Axert (QL)	Epiduo (AGE)	Marplan	Proscar (AGE)	Uniretic
Azor	Estrostep FE	Mavik	Protonix	Univasc
Banzel	Exelon	Metadate CD	Provigil	Uroxatral
Beconase AQ	Extavia (PA)	Metadate ER	Prozac	Vagifem
Benicar	Famvir	Metaglip	Ranexa	Vaseretic
Benicar HCT	Fareston	Metroloption	Rapaflo	Vasotec
Besivance	Femhrt	Mevacor	Razadyne	Vectical
Betapace AF	Femring	Micardis	Razadyne ER	Verelan
Betaseron (PA)	Fenoglide	Micardis HCT	Regranex (PA)	Vicoprofen
	Fentora (PA)	Migranal (QL)	Relenza (QL)	Videx
	Flagyl ER		Relpax (QL)	Vimpat

## Tier 3 Medications

Vivactil  
Voltaren  
Voltaren XR  
Votrient (PA)  
Xolegel  
Xolegel Corepak  
Xopenex HFA  
Xyzal  
Zantac Effertab  
Zantac Syrup  
Zegerid  
Zelapar  
Zerit  
Zestoretic  
Zestril  
Ziana  
Zithromax (QL)  
Zocor  
Zofran (tab, solu)(QL)  
Zoloft  
Zomig/Zomig ZMT (QL)  
Zonegran  
Zyclara  
Zydone  
Zyvox (PA)

*CIGNA reserves the right to make changes to this 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 prescriber or pharmacist. CIGNA may receive payments from manufacturers of certain Preferred Brand medications, and in limited instances, certain Non-Preferred Brand medications, which 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.*

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