



CIGNA PERFORMANCE 4-TIER PRESCRIPTION DRUG LIST

As of January 1, 2018

Together, all the way.®



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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.



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

* Drug list created: originally created 04/01/2008

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 \$\$
INFECTIONS	
acyclovir	Albenza
adefovir**	Baraclude solution**
amoxicillin	Ceftin
amoxicillin ER	Cipro
amoxicillin-clavulanate ER	Daklinza** (PA)
amoxicillin-clavulanate	Daraprim (PA)
atovaquone	E.E.S. 400
avidoxy	Eryped 400
azithromycin	Ery-Tab
cefdinir	Harvoni** (PA)
cefixime	Kitabis Pak*
cefprozil	Sovaldi** (PA)
cefuroxime	Stromectol
cephalexin	Tamiflu (QL)
ciprofloxacin	Thalomid** (PA)
clarithromycin	Uretron D-S
clarithromycin ER	Vibramycin
clindamycin	
doxycycline	

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

Oral specialty medications have a double asterisk listed next to them

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

Specialty injectable medications have an asterisk listed next to them

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

Brand name medications are **capitalized**

Generic medications are **lowercase**

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)	\$\$\$
› Tier 4 - Specialty Medications	(Highest-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, injectable specialty medications are marked with an asterisk (*) and oral specialty medications are marked with a double asterisk (**).

Injectable specialty medications are typically covered on Tier 4. These medications are listed on page 16. Some specialty medications are covered on a lower tier. In this drug list, those medications are listed alphabetically by condition. Your plan may cover oral specialty medications differently than injectable specialty medications. 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.

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

Cigna Performance 4-Tier Prescription Drug List

Injectable specialty medications covered on Tier 4 are listed on page 16.

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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ALLERGY/NASAL SPRAYS

azelastine	Astepro	EpinephrineSnap-V
cromolyn	Bactroban Nasal	
cyproheptadine		
desloratadine		
epinephrine auto-injector (QL)		
fluticasone		
hydroxyzine		
ipratropium		
mometasone (QL)		
olopatadine		
phenergan		
promethazine		

ALZHEIMER'S DISEASE

donepezil	Mestinon syrup	Mestinon tablet
donepezil ODT	Namenda	Namenda
memantine	titration pack	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)
bupirone		Trintellix (ST)
citalopram		Viibryd (ST)
clomipramine		Wellbutrin SR (ST)
duloxetine		Xanax
escitalopram		Xanax XR
fluoxetine		Zoloft (ST)
fluoxetine DR		
fluvoxamine		
fluvoxamine ER		
lorazepam		
lorazepam intensol		
paroxetine		
paroxetine CR		
paroxetine ER		
sertraline		
trazodone		
venlafaxine		
venlafaxine ER		

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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ASTHMA/COPD/RESPIRATORY

albuterol	Advair Diskus	
budesonide	Advair HFA	
fluticasone-salmeterol	Anoro Ellipta	
montelukast	Breo Ellipta	
	Combivent	
	Respimat	
	Incruse Ellipta	
	ProAir HFA	
	ProAir RespiClick	
	Pulmicort Flex-haler	
	QVAR	
	Serevent Diskus	
	Spiriva	
	Spiriva Respimat	
	Stiolto Respimat	
	Striverdi	
	Respimat	
	Symbicort	
	Ventolin HFA	

ATTENTION DEFICIT HYPERACTIVITY DISORDER

dexamethylphenidate	Vyvanse	Adderall (ST)
dexamethylphenidate ER		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

BLOOD MODIFIERS/BLEEDING DISORDERS

	Droxia	
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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	Multaq	Cardizem LA
	Nitro-Dur 0.3mg, 0.8mg	Cozaar (ST)
		Diovan (ST)

Cigna Performance 4-Tier Prescription Drug List

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
BLOOD PRESSURE/HEART MEDICATIONS (cont)		
Aspir 81+ aspirin 81mg+ aspirin EC 81mg+ Aspir-Low+ atenolol atenolol- chlorthalidone benazepril benazepril- HCTZ candesartan Cartia XT carvedilol children's aspirin+ clonidine Digitek Digox digoxin diltiazem diltiazem ER Dilt-XR dofetilide (QL) doxazosin EcPirin+ enalapril flecainide hydralazine irbesartan isosorbide isosorbide ER 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	Tekturna Tekturna HCT	Diovan HCT (ST) Ecotrin+ Edarbi (ST) Edarbyclor (ST) Exforge Exforge HCT Hemangeol Inderal LA Inderal XL Innopran XL Lotrel Micardis (ST) Nitro-Dur 0.1mg, 0.2mg, 0.4mg, 0.6mg Nitrolingual Nitromist Nitrostat Norvasc Ranexa (ST, QL) Tiazac Tikosyn (QL) Toprol XL Tribenzor

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
BLOOD PRESSURE/HEART MEDICATIONS (cont)		
Taztia XT telmisartan telmisartan- HCTZ tri-buffered aspirin+ valsartan valsartan- HCTZ verapamil verapamil ER verapamil SR		
BLOOD THINNERS/ANTI-CLOTTING		
aspirin- dipyridamole ER clopidogrel Jantoven warfarin	Brilinta Effient Eliquis Xarelto	Pradaxa Savaysa
CANCER		
anastrozole exemestane hydroxyurea letrozole mercaptopurine raloxifene+ tamoxifen+	Gleostine	Arimidex Fareston (QL) Femara Xatmep**
CHOLESTEROL MEDICATIONS		
amlodipine-atorv- astatin atorvastatin atorvastatin 10mg, 20mg+ fenofibrate fenofibric acid fluvastatin 20mg, 40mg+ fluvastatin ER 80mg+ lovastatin 20mg, 40mg+ niacin ER omega-3 acid ethyl esters pravastatin+ rosuvastatin rosuvastatin 5mg, 10mg+ simvastatin simvastatin 10mg, 20mg, 40mg+	Welchol	Crestor (ST) Korlym (PA) Livalo (ST) Vascepa Vytorin (ST) Zetia

Cigna Performance 4-Tier Prescription Drug List

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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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+		Take Action+
Azurette+		Trinessa Lo+
Balziva+		Today Contraceptive
Bekyree+		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		
estradiol		
drospirenone-eth		
estradiol		
drospirenone-		
ethinyl estradiol		
Econtra EZ+		
Elinest+		
Emoquette+		
Enpresse+		
Enskyce+		
Errin+		
Estarylla+		
ethinodiol-ethinyl		
estradiol		
Fallback Solo+		
Falmina+		
Fayosim+		
FC2 Female		
Condom+		
Femcap+		
Femynor+		
Gianvi+		

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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CONTRACEPTIVE PRODUCTS (cont)

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		
norethin-eth		
estra-ferrous+		

Cigna Performance 4-Tier Prescription Drug List

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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CONTRACEPTIVE PRODUCTS (cont)

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+		
Zenchant+		
Zenchant FE+		
Zovia+		

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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COUGH/COLD MEDICATIONS

benzonatate		Flowtuss (QL)
Bromfed DM		Hycufenix (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	Fluorabon	Clinpro 5000
Denta 5000 Plus	Fluor-a-Day	Floriva
Dentagel	Prevident 5000	Prevident
doxycycline fluoride 0.25mg, 0.5mg+		Prevident 5000 Plus
fluoride 1mg		
Fluoridex		
Fluoritab 0.5mg+		
Fluoritab 1mg		
Flura-Drops		
Ludent fluoride		
Oralene		
Paroex		
Peridex		
Periogard		
SF		
SF 5000 Plus		
sodium fluoride+ triamcinolone		

DIABETES

glimepiride	Basaglar	Cycloset
glipizide	Bydureon (QL)	Glucophage
glipizide ER	Byetta	Glucophage XR
glipizide XL	Farxiga	Riomet
metformin	Glucagen	VGo
metformin ER	HypoKit (QL)	
	Glucagon Emergency Kit (QL)	
	Humalog	
	Humulin	
	Janumet	
	Janumet XR	

Cigna Performance 4-Tier Prescription Drug List

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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DIABETES (cont)

	Januvia	
	Jardiance	
	Kombiglyze XR	
	Levemir	
	OneTouch test strips and meters	
	Onglyza	
	Soliqua	
	SymLinPen	
	Synjardy	
	Synjardy XR	
	TechLite lancets	
	Tresiba	
	Trulicity (QL)	
	Xigduo XR	

DIURETICS

acetazolamide		Aldactazide
chlorthalidone		Aldactone
eplerenone		Dyazide
furosemide		Maxzide
hydrochlorothiazide		
spironolactone		
triamterene-HCTZ		

EAR MEDICATIONS

fluocinolone oil	Cipro HC	
neomycin-polymyxin-HC	Ciprodex	

ERECTILE DYSFUNCTION

	Cialis (PA, QL)	
	Muse (PA, QL)	
	Viagra (PA, QL)	

EYE CONDITIONS

brimonidine	Alphagan P 0.1%	Acuvail
ciprofloxacin	Azasisite	Alphagan P 0.15%
dorzolamide-timolol	Azopt	Alrex
erythromycin	Betimol	Bepreve
fluorometholone	Betoptic S	Besivance
gatifloxacin	Lotemax drops,	Bromsite
latanoprost	suspension	Combigan
neomycin-polymyxin-dexameth	Moxeza	Cosopt PF
ofloxacin	Pataday	Cystaran (QL)
olopatadine	Pazeo	Durezol
	Pred Mild	Ilevro
	Restasis	Lastacaft

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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EYE CONDITIONS (cont)

polymyxin B	Simbrinza	Lotemax ointment
sul-trimethoprim	Tobradex	Lumigan
prednisolone	ointment	Nevanac
timolol	Travatan Z	Omnipred
tobramycin	Vigamox	Ozurdex
tobramycin-dexamethasone	Xiidra	Patanol
		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	Amitiza
Anucort-HC	Carafate	Carafate tablet
balsalazide	suspension	Chenodal
bisacodyl+	Creon	Colyte With Flavor
Bisa-lax+	Dexilant	Packets+
chlordiazepoxide-clidinium	GoLytely powder+	Correctol+
Clearlax+	Lialda	Diclegis
dicyclomine	Nexium (ST)	Donnatal
diphenoxylate-atropine	Pentasa	Dulcolax+
Ducodyl+	Zenpep	GoLytely solution
dronabinol		Linzess
esomeprazole		Miralax+
famotidine		Movantik (PA)
Ggavilyte-C+		Moviprep+
Gavilyte-G+		NuLytely with Flavor
Gavilyte-N+		Packs+
Gentle laxative+		Ome-PPI
Glycolax+		Osmoprep+
Healthylax+		Pancreaze
Hemmorex-HC		Pertzye
hydrocortisone		Prepopik
lansoprazole		Prevacid (ST)
lansoprazole-amoxicillin-clarithromycin (combo pak)		Procort
mesalamine		Protonix powder
		Protonix tablet (ST)
		Protonix IV
		Ravicti (PA)
		Rectiv
		Relistor (PA)

Cigna Performance 4-Tier Prescription Drug List

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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GASTROINTESTINAL/HEARTBURN (cont)

metoclopramide		Sancuso (PA, QL)
metoclopramide ODT		sfRowasa
omeprazole		Suprep+
ondansetron		Sustol (PA)
ondansetron ODT		Varubi* (PA, QL)
pantoprazole		Viberzi
peg 3350+		Viokace
peg 3350- electrolyte+		
peg 3350 with flavor packs+		
peg-prep+		
Phenadoz		
Purelax+		
promethazine		
promethegan		
rabeprazole		
ranitidine		
Smoothlax+		
sucralfate		
TriLyte with flavor packets+		
ursodiol		

HORMONAL AGENTS

Amabelz	Androderm	Activella
budesonide EC	(PA, QL)	Alora (QL)
cabergoline (QL)	AndroGel	Armour Thyroid
Covaryx	(PA, QL)	Aveed (PA)
Covaryx H.S.	Armour Thyroid	Climara
dexamethasone	Cytomel 50mcg	Climara Pro
dexamethasone intensol	Divigel	Combipatch
EEMT	Duavee	Cytomel 5mcg, 25mcg
EEMT H.S.	Estring (QL)	Deltasone
estradiol	Premarin	Depo-Testosterone
estradiol (QL)	Premphase	Elestrin
estradiol- norethindrone	Synthroid	Emflaza** (PA)
estrogen & methyltestosterone		Entocort EC
levothyroxine		Estrace
Levoxyl		Evamist
liothyronine		Femring
LoCort		Levo-T
medroxyprogester- one		Menostar (QL)
methylprednisolone		Minivelle (QL)
Millipred		Osphena
Millipred DP		Rayaldee
Mimvey		Striant (PA, QL)
		Testopel (PA)
		Tirosint

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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HORMONAL AGENTS (cont)

Mimvey LO		Triostat
Nature-Throid		Unithroid
norethindrone		Vagifem (QL)
NP Thyroid		Vivelle-Dot (QL)
prednisolone		
prednisolone ODT		
prednisone		
prednisone intensol		
progesterone		
testosterone (PA)		
testosterone cypionate		
Westhroid		
WP Thyroid		
Yuvaferm (QL)		

INFECTIONS

acyclovir	Albenza	Alinia
amoxicillin	Ceftin 125mg suspension	Bactrim
amoxicillin- clavulanate ER	Cipro	Bactrim DS
amoxicillin- clavulanate	Daraprim (PA)	Ceftin 250mg suspension
atovaquone	Tamiflu	Cleocin
atovaquone- proguanil	suspension(QL)	Clindesse
Avidoxy		Cresemba (PA)
azithromycin		Dificid (PA)
cefdinir		E.E.S. 400
cefixime		Eryped 200
cefuroxime		Ery-Tab
cephalexin		Metrogel-vaginal
ciprofloxacin		Minocin
clarithromycin		Monurol
clarithromycin ER		Noxafil
clindamycin		Nuessa
dapsone		PCE
doxy 100		Plaquenil
doxycycline		Sulfatrim
doxycycline IR-DR		Suprax
erythromycin		Tamiflu capsule (QL)
famciclovir		Uretron D-S
fluconazole		Uribel
hydroxychloroquine		Urogesic-blue
itraconazole		Uta
levofloxacin		Valtrex
linezolid (PA)		vibramycin
metronidazole		Xifaxan
minocycline		Zithromax
minocycline ER		Zmax
mondoxylene NL		

Cigna Performance 4-Tier Prescription Drug List

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INFECTIONS (cont)

Morgidox		
moxifloxacin		
nitrofurantoin		
nitrofurantoin mono-macro		
nystatin		
oseltamivir (QL)		
penicillin		
sulfamethoxazole- trimethoprim		
terbinafine		
tetracycline		
tinidazole		
tobramycin*		
valacyclovir		
valganciclovir		
vancomycin		
vandazole		
voriconazole (PA)		

INFERTILITY

clomiphene citrate ^	Crinone 8%^ Endometrin^	Makena (PA)
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MISCELLANEOUS

disulfiram		Addyi (QL)
NebuSal 3%		Ferriprox
PulmoSal		Hyper-Sal
		NebuSal 6%
		Nuedexta (QL)

NUTRITIONAL/DIETARY

B-12 compliance	CitraNatal	Auryxia (QL)
calcitriol	Fosrenol	Concept DHA
calcium	Klor-Con M15	D3-50+
cyanocobalamin injection	K-Tab ER 20meq	Decara+
D3-2000+	Mephyton	Dialyvite vitamin D+
Daily prenatal+	Nestabs DHA	Escavite+
D Drops+	OB Complete	Escavite D+
Delta D3+	Prefera OB	Fer-in-sol+
Dialyvite Vitamin D3 Max+	Prenate	Feriva 21-7
D-vi-sol+	Renvela tablet	Ferralet 90
D-vita+	Select-OB + DHA	Floriva+
FA-8+	Tristart DHA	Icar+
fer-iron+	Tri-vi-flor+	Integra Plus
folic acid+	Vitafof	Ironup+
Folixapure	vitaMedMD One	Just D+
Klor-Con M10, M20	Rx	Klor-Con 8, 10meq
Klor-Con Sprinkle	vitaPearl	Klor-Con 8
levocarnitine		K-Tab ER 8meq, 10meq
		KPN Prenatal+

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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NUTRITIONAL/DIETARY (cont)

multivitamin with fluoride+		MVC-fluoride+
multivitamin- iron-fluoride+		Maximum D3+
One Daily prenatal+		Nascobal
Optimal D3+		Novafferum+
PNV-DHA		Optimal D3 M+
polyvitamin with iron+		Perry Prenatal+
polyvitamin- fluoride+		Phoslyra
potassium chloride		Physicians EZ Use B-12
Prena1 Pearl		Poly-Vi-Flor
Prenatal+		Poly-Vi-Flor+
Prenatal Complete+		Poly-Vi-Flor FS+
Prenatal Formula+		Poly-Vi-Flor With Iron+
Prenatal Multi + DHA+		Poly-vi-sol With Iron+
Prenatal multivitamin+		Prenatal Formula- DHA+
Prenatal multivitamin-DHA+		Quflora+
Prenatal Plus		Renagel
Prenatal Vitamin+		Renvela powder
Prenatal vitamin plus low iron		Replesta+
PrePlus		Replesta NX+
Virt-PN DHA		Super Daily D3+
vitamin D2		Texavite LQ +
Vitajoy daily D+		Thera-D+
vitamins A, C, D and fluoride+		Urosex+
vitamin D+		Velphoro
vitamin D3+		
vitamin D-400+		
Wee care+		
Zatean-PN DHA		
Zavara		

OSTEOPOROSIS PRODUCTS

alendronate (QL)		Actonel (ST)
calcitonin-salmon		Atelvia (ST)
raloxifene		
risedronate		
risedronate DR		

PAIN RELIEF AND INFLAMMATORY DISEASE

acetaminophen- codeine (PA, QL)	Butrans (QL)	Abstral (PA, QL)
acitretin	Colcrys	Actiq (PA, QL)
allopurinol	Embeda (PA, QL)	Analpram HC
		Arymo ER (PA, QL)

Cigna Performance 4-Tier Prescription Drug List

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PAIN RELIEF AND INFLAMMATORY DISEASE (cont)

baclofen	Hysingla ER (PA, QL)	Buprenex
butalb- acetaminoph- codeine (PA, QL)	Nucynta (PA, QL)	Celebrex (ST, QL)
butalb-caff- acetaminoph- codeine (PA, QL)	Savella	colchicine
butalbital- acetaminophen- caff (QL)	Subsys (PA, QL)	Duragesic (PA, QL)
Capacet (QL)	Uloric	Fentora (PA, QL)
carisoprodol	Xtampza ER (PA, QL)	Fexmid
celecoxib (QL)		Flector (ST, QL)
cyclobenzaprine		Frova (QL)
DermacinRx Empricaine		Indocin
DermacinRx Prizopak		Lazanda (PA, QL)
diclofenac 0.1% gel (QL)		Lidoderm
diclofenac ER		Mitigare
diclofenac- misoprostol		Morphabond ER (PA, QL)
dihydroergotamine (QL)		Nucynta ER (PA, QL)
Endocet (PA, QL)		Onzetra Xsail (QL)
etodolac		Oxaydo (PA, QL)
etodolac ER		Parafon Forte DSC
fentanyl (PA, QL)		Pennsaid (ST)
frovatriptan (QL)		Percocet (PA, QL)
Glydo		Relpax (QL)
hydrocodone- acetaminophen (PA)		Voltaren (ST, QL)
hydromorphone (PA, QL)		Zohydro ER (PA, QL)
hydromorphone ER (PA, QL)		
ibuprofen		
indomethacin		
indomethacin ER		
ketorolac (QL)		
leflunomide		
lidocaine (QL)		
lidocaine viscous		
lidocaine-prilocaine		
Lidopril		
Lidopril XR		
Lido-Prilo Caine Pack		

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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PAIN RELIEF AND INFLAMMATORY DISEASE (cont)

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)		
Vicodin (PA, QL)		
Vicodin ES (PA, QL)		
Vicodin HP (PA, QL)		
zolmitriptan (QL)		
zolmitriptan ODT (QL)		

PARKINSON'S DISEASE

benztropine	Azilect	Mirapex
bromocriptine		Mirapex ER
carbidopa-levodopa		Neupro
carbidopa-levodopa ER		Rytary
		Sinemet
		Sinemet CR
		Tasmar

Cigna Performance 4-Tier Prescription Drug List

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PARKINSON'S DISEASE (cont)

carbidopa-
levodopa-
entacapone
pramipexole
pramipexole ER
ropinirole
ropinirole ER

SCHIZOPHRENIA/ANTI-PSYCHOTICS

aripiprazole	Abilify Maintena (QL)
aripiprazole ODT	Aristada (QL)
chlorpromazine	Invega (ST)
clozapine	Invega Sustenna (QL)
clozapine ODT	Invega Trinza (QL)
haloperidol	Latuda (ST)
olanzapine	Rexulti (ST)
olanzapine ODT	Risperdal (ST)
olanzapine- fluoxetine	Risperdal M-tab (ST)
paliperidone ER	Saphris (ST)
quetiapine	Seroquel (ST)
quetiapine ER	Seroquel XR (ST)
risperidone	Vraylar (ST)
risperidone ODT	
ziprasidone	

SEIZURE DISORDERS

carbamazepine	Keppra vial	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
lamotrigine ER		Fycompa
lamotrigine ODT		Keppra
levetiracetam		Keppra XR
levetiracetam ER		Lamictal
oxcarbazepine		Lamictal XR
Rowepra		Oxtellar XR
topiramate		Phenytek
		Qudexy XR
		Spritam
		Tegretol
		Tegretol XR
		Topamax
		topiramate ER
		Trileptal
		Trokendi XR
		Vimpat vial

TIER 1 \$	TIER 2 \$\$	TIER 3 \$\$\$
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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)	Epiduo	Avita (PA age)
Avar cleanser	Epiduo Forte	Cleocin T
Avar-E	Eucrisa	Cordran (ST)
BP 10-1	Exelderm	Desonate (ST)
calcipotriene	solution	Desowen (ST)
calcipotriene- betamethasone DP	Finacea	Drysol
calcitrene	Fluoroplex	Efudex
Claravis (QL)	Metrogel	Elidel
Clindacin ETZ	Naftin	Enstilar
Clindacin P	Tazorac	Evoclin
clindamycin		Exelderm cream
clindamycin- benzoyl peroxide		Metrocream
clobetasol		Metro lotion
Clodan		Nizoral
clotrimazole- betamethasone		Olux (ST)
Cormax		Onexton
desonide		Picato
diclofenac 0.3% gel		Retin-A (PA age)
doxepin		Retin-A Micro (PA age)
econazole		Sklice
fluocinonide		Soolantra
fluorouracil		Taclonex
hydrocortisone		Temovate (ST)
imiquimod		Tolak
ketconazole		Topicort (ST)
metronidazole		Tretin-X
mupirocin		Tridesilon (ST)
Myorisan (QL)		Veltin
Neuac gel		Xolegel
nystatin- triamcinolone		
Permethrin		
Procto-Med HC		
Procto-Pak		
Proctosol-HC		
Proctozone-HC		
Rosadan		
Rosanil		
Scalacort		
sodium sulfacetamide- sulfur		
SS 10-2		
SSS 10-5		

Cigna Performance 4-Tier Prescription Drug List

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SKIN CONDITIONS *(cont)*

SulfaCleanse 8-4		
tacrolimus		
tretinoin (PA age)		
tretinoin microsphere (PA age)		
triamcinolone		
Triderm		
Zenatane (QL)		

SLEEP DISORDERS/SEDATIVES

armodafinil (PA)	Belsomra (ST)	Zolpimist (ST)
eszopiclone	Silenor (ST)	
modafinil (PA)		
temazepam		
zolpidem		
zolpidem ER		

SMOKING CESSATION

bupropion SR	Chantix (QL)	Nicorette lozenge,
Nicoderm CQ+	Nicotrol (QL)	gum+
Nicorelief+	Nicotrol NS (QL)	Zyban
nicotine gum+		
nicotine lozenge+		
nicotine patch+		
NTS+		
Quit 2+		
Quit 4+		
stop smoking aid+		

SUBSTANCE ABUSE

buprenorphine	Bunavail	
buprenorphine- naloxone	Narcan	
naloxone	Probuphine	
naltrexone (QL)	Suboxone	
	Zubsolv	

URINARY TRACT CONDITIONS

cevimeline	Elmiron	Avodart
dutasteride	Thiola	Jalyn
finasteride		Rapaflo
oxybutynin		
oxybutynin ER		
phenazopyridine		
potassium ER		
tamsulosin		
tolterodine		
tolterodine ER		

Specialty medications

The injectable medications listed below are typically covered on Tier 4. All of these medications require approval from Cigna before they're covered by your plan.

DRUG NAME	DRUG CLASS
Actemra* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Actimmune* (PA)	CANCER
Adcirca** (PA)	ASTHMA/COPD/RESPIRATORY
adefovir**	INFECTIONS
Adempas** (PA)	ASTHMA/COPD/RESPIRATORY
Afinitor Disperz** (PA)	CANCER
Afinitor** (PA)	CANCER
Akynzeo** (PA, QL)	GASTROINTESTINAL/HEARTBURN
Alecensa** (PA)	CANCER
Amicar**	BLOOD MODIFIERS/BLEEDING DISORDERS
Ampyra** (PA)	MULTIPLE SCLEROSIS
Apokyn* (PA)	PARKINSON'S DISEASE
Aralast NP*	ASTHMA/COPD/RESPIRATORY
Aranesp* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
Astagraf XL**	TRANSPLANT MEDICATIONS
Atripla**	AIDS/HIV
Aubagio** (PA)	MULTIPLE SCLEROSIS
Avastin* (PA)	CANCER
Avonex* (PA)	MULTIPLE SCLEROSIS
azathioprine**	TRANSPLANT MEDICATIONS
Baraclude**	INFECTIONS
Bebulin* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
Benlysta* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Berinert* (PA)	BLOOD PRESSURE/HEART MEDICATIONS
Betaseron* (PA)	MULTIPLE SCLEROSIS
bexarotene**	CANCER
Bosulif** (PA)	CANCER
Botox* (PA)	MISCELLANEOUS
Cabometyx** (PA)	CANCER
capecitabine**	CANCER
Cayston*	INFECTIONS
Cellcept**	TRANSPLANT MEDICATIONS
Ceprotin*	BLOOD MODIFIERS/BLEEDING DISORDERS
Cerdelga** (PA)	MISCELLANEOUS
Cerezyme* (PA)	MISCELLANEOUS
Cholbam** (PA)	GASTROINTESTINAL/HEARTBURN
Cimzia* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Cinryze* (PA)	BLOOD PRESSURE/HEART MEDICATIONS
Cometriq* (PA)	CANCER

DRUG NAME	DRUG CLASS
Complera**	AIDS/HIV
Copaxone* (PA)	MULTIPLE SCLEROSIS
Cosentyx* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Cotellic** (PA)	CANCER
Cuprimine** (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Cystagon**	URINARY TRACT CONDITIONS
Daklinza** (PA)	INFECTIONS
Depen** (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Descovy**	AIDS/HIV
desmopressin*	HORMONAL AGENTS
Dysport*	MISCELLANEOUS
Egrifta* (PA)	HORMONAL AGENTS
Emend** (PA, QL)	GASTROINTESTINAL/HEARTBURN
Enbrel* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
enoxaparin* (QL)	BLOOD THINNERS/ANTI-CLOTTING
entecavir**	INFECTIONS
Entyvio* (PA)	GASTROINTESTINAL/HEARTBURN
Envarsus XR**	TRANSPLANT MEDICATIONS
Epclusa** (PA)	INFECTIONS
Epogen* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
Epzicom**	AIDS/HIV
Erivedge** (PA)	CANCER
Esbriet** (PA)	MISCELLANEOUS
Exjade**	MISCELLANEOUS
Extavia* (PA)	MULTIPLE SCLEROSIS
Eylea* (PA)	EYE CONDITIONS
Firazyr* (PA)	BLOOD PRESSURE/HEART MEDICATIONS
Follistim AQ* ^	INFERTILITY
fondaparinux* (QL)	BLOOD THINNERS/ANTI-CLOTTING
Forteo*	HORMONAL AGENTS
Fragmin* (QL)	BLOOD THINNERS/ANTI-CLOTTING
Ganirelix* ^	HORMONAL AGENTS
Gattex* (PA)	GASTROINTESTINAL/HEARTBURN
Gazyva* (PA)	CANCER
Gelsyn-3* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Genvoya**	AIDS/HIV
Gilenya** (PA)	MULTIPLE SCLEROSIS
Gilotrif** (PA)	CANCER
Glassia* (PA)	ASTHMA/COPD/RESPIRATORY
Glatopa* (PA)	MULTIPLE SCLEROSIS
Gleevec** (PA)	CANCER
Gonal-F* ^	INFERTILITY
Granix*	BLOOD MODIFIERS/BLEEDING DISORDERS

DRUG NAME	DRUG CLASS
H.P. Acthar* (PA)	HORMONAL AGENTS
Haegarda* (PA)	BLOOD PRESSURE/HEART MEDICATIONS
Harvoni** (PA)	INFECTIONS
Herceptin* (PA)	CANCER
Humatrope* (PA)	HORMONAL AGENTS
Humira* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
ibandronate*	OSTEOPOROSIS PRODUCTS
Ibrance** (PA)	CANCER
Iclusig** (PA)	CANCER
Ilaris* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Iluvien*	EYE CONDITIONS
imatinib** (PA)	CANCER
Imbruvica** (PA)	CANCER
Inlyta** (PA)	CANCER
Intelence**	AIDS/HIV
Intron A* (PA)	CANCER
Isentress HD**	AIDS/HIV
Isentress**	AIDS/HIV
Jadenu**	MISCELLANEOUS
Jakafi** (PA)	CANCER
Kadcyla** (PA)	CANCER
Kaletra**	AIDS/HIV
Kalydeco** (PA)	ASTHMA/COPD/RESPIRATORY
Kitabis Pak*	INFECTIONS
Kuvan** (PA)	MISCELLANEOUS
Kyleena*	CONTRACEPTION PRODUCTS
Kynamro* (PA)	CHOLESTEROL MEDICATIONS
lamivudine**	AIDS/HIV
lamivudine-zidovudine**	AIDS/HIV
Lemtrada* (PA)	MULTIPLE SCLEROSIS
Lenvima** (PA)	CANCER
Letairis** (PA)	ASTHMA/COPD/RESPIRATORY
Lonsurf** (PA)	CANCER
Lucentis* (PA)	EYE CONDITIONS
Lumizyme* (PA)	MISCELLANEOUS
Lupron Depot* (PA)	HORMONAL AGENTS
Lupron Depot-Ped* (PA)	HORMONAL AGENTS
Lynparza** (PA)	CANCER
Mekinist** (PA)	CANCER
Menopur*^	INFERTILITY
methotrexate**	CANCER
Mirena*	CONTRACEPTION PRODUCTS
Moderiba**	INFECTIONS

DRUG NAME	DRUG CLASS
Monovisc* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Myalept* (PA)	MISCELLANEOUS
mycophenolate**	TRANSPLANT MEDICATIONS
mycophenolic acid**	TRANSPLANT MEDICATIONS
Myfortic**	TRANSPLANT MEDICATIONS
Naglazyme* (PA)	MISCELLANEOUS
Natpara* (PA)	HORMONAL AGENTS
Neoral**	TRANSPLANT MEDICATIONS
Neulasta* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
Neupogen* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
nevirapine ER**	AIDS/HIV
nevirapine**	AIDS/HIV
Nexavar** (PA)	CANCER
Ninlaro** (PA)	CANCER
Northera** (PA)	BLOOD PRESSURE/HEART MEDICATIONS
Norvir**	AIDS/HIV
Nucala* (PA)	ASTHMA/COPD/RESPIRATORY
Ocrevus* (PA)	MULTIPLE SCLEROSIS
Odefsey**	AIDS/HIV
Ofev** (PA)	ASTHMA/COPD/RESPIRATORY
Opsumit** (PA)	ASTHMA/COPD/RESPIRATORY
Orencia* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Orenitram ER** (PA)	ASTHMA/COPD/RESPIRATORY
Orfadin**	MISCELLANEOUS
Orkambi** (PA)	ASTHMA/COPD/RESPIRATORY
Orthovisc* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Otezla** (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Otrexup* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
PegIntron* (PA)	INFECTIONS
Perjeta* (PA)	CANCER
Plegridy* (PA)	MULTIPLE SCLEROSIS
Pomalyst** (PA)	CANCER
Praluent* (PA)	CHOLESTEROL MEDICATIONS
Prezcobix**	AIDS/HIV
Prezista**	AIDS/HIV
Procrit* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
Procysbi** (PA)	URINARY TRACT CONDITIONS
Prograf*	TRANSPLANT MEDICATIONS
Prolia* (PA)	OSTEOPOROSIS PRODUCTS
Promacta** (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
Pulmozyme* (PA)	ASTHMA/COPD/RESPIRATORY
Purixan**	CANCER
Rasuvo** (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE

DRUG NAME	DRUG CLASS
Rebif* (PA)	MULTIPLE SCLEROSIS
Remicade* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Remodulin* (PA)	ASTHMA/COPD/RESPIRATORY
Repatha * (PA)	CHOLESTEROL MEDICATIONS
Revlimid** (PA)	CANCER
Reyataz**	AIDS/HIV
Rituxan* (PA)	CANCER
Sabril**	SEIZURE DISORDERS
Saizen-saizenprep* (PA)	HORMONAL AGENTS
Samsca**	DIURETICS
Selzentry**	AIDS/HIV
Sensipar**	GASTROINTESTINAL/HEARTBURN
Serostim* (PA)	HORMONAL AGENTS
Simponi Aria* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Simponi* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
sirolimus**	TRANSPLANT MEDICATIONS
Skyla*	CONTRACEPTION PRODUCTS
Soliris* (PA)	BLOOD MODIFIERS/BLEEDING DISORDERS
Somatuline Depot* (PA)	HORMONAL AGENTS
Somavert* (PA)	HORMONAL AGENTS
Sovaldi** (PA)	INFECTIONS
Sprycel** (PA)	CANCER
Stelara* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Stivarga** (PA)	CANCER
Strensiq* (PA)	MISCELLANEOUS
Stribild**	AIDS/HIV
Supprelin LA*	HORMONAL AGENTS
Sustiva**	AIDS/HIV
Sutent** (PA)	CANCER
Sylatron* (PA)	CANCER
Synagis* (PA)	INFECTIONS
Synvisc* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Synvisc-One* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Syprine** (PA)	MISCELLANEOUS
tacrolimus**	TRANSPLANT MEDICATIONS
Tafinlar** (PA)	CANCER
Tagrisso* * (PA)	CANCER
Taltz* (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Tarceva** (PA)	CANCER
Targretin**	CANCER
Tasigna** (PA)	CANCER
Tecentriq* (PA)	CANCER
Tecfidera** (PA)	MULTIPLE SCLEROSIS

DRUG NAME	DRUG CLASS
temozolomide** (PA)	CANCER
tetrabenazine** (PA)	MISCELLANEOUS
Thalomid** (PA)	INFECTIONS
Thyrogen*	HORMONAL AGENTS
Tivicay**	AIDS/HIV
Tobi Podhaler**	INFECTIONS
tobramycin ampule*	INFECTIONS
Tracleer** (PA)	ASTHMA/COPD/RESPIRATORY
tranexamic acid**	BLOOD MODIFIERS/BLEEDING DISORDERS
Trexall**	CANCER
Triumeq**	AIDS/HIV
Truvada**	AIDS/HIV
Tysabri* (PA)	MULTIPLE SCLEROSIS
Tyvaso* (PA)	ASTHMA/COPD/RESPIRATORY
Upravi** (PA)	ASTHMA/COPD/RESPIRATORY
Valstar*	CANCER
Varubi** (PA, QL)	GASTROINTESTINAL/HEARTBURN
Viekira Pak** (PA)	INFECTIONS
Viekira XR** (PA)	INFECTIONS
Vimizim* (PA)	MISCELLANEOUS
Viread**	AIDS/HIV
Vivitrol*	MISCELLANEOUS
Votrient** (PA)	CANCER
VPRIV* (PA)	MISCELLANEOUS
Xalkori** (PA)	CANCER
Xeljanz XR** (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Xeljanz** (PA)	PAIN RELIEF AND INFLAMMATORY DISEASE
Xenazine** (PA)	MISCELLANEOUS
Xeomin* (PA)	MISCELLANEOUS
Xgeva* (PA)	OSTEOPOROSIS PRODUCTS
Xolair* (PA)	ASTHMA/COPD/RESPIRATORY
Xtandi** (PA)	CANCER
Xyrem** (PA)	SLEEP DISORDERS/SEDATIVES
Zarxio*	BLOOD MODIFIERS/BLEEDING DISORDERS
Zavesca** (PA)	MISCELLANEOUS
Zelboraf** (PA)	CANCER
Zepatier** (PA)	INFECTIONS
Zinbryta* (PA)	MULTIPLE SCLEROSIS
Zorbitive* (PA)	HORMONAL AGENTS
Zykadia** (PA)	CANCER
Zytiga** (PA)	CANCER

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

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
ASTHMA/COPD/RESPIRATORY (<i>cont</i>)	Zyflo	zileuton ER montelukast zafirlukast
	Zyflo CR	zileuton ER
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 Titrados	isosorbide dinitrate
	Lanoxin	Digitek digoxin
BLOOD THINNERS/ANTI-CLOTTING	Yosprala	aspirin or aspirin EC with omeprazole
CANCER	Nilandron	nilutamide
CHOLESTEROL MEDICATIONS	Antara Fenoglide	fenofibrate
	Lipitor	atorvastatin
COUGH/COLD MEDICATIONS	Tussicaps	hydrocodone-chlorpheniramine ER promethazine-codeine
DENTAL PRODUCTS	Arestin	minocycline
DIABETES	Accu-Chek, Contour, Freestyle, all other test strips	OneTouch Ultra, OneTouch Verio
	Afrezza Apidra Apidra 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

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES	
DIABETES (cont)	Tanzeum Victoza	Byetta Bydureon Trulicity	
DIURETICS	Edecrin ethacrynic acid	bumetanide furosemide torsemide	
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

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES	
HORMONAL AGENTS <i>(cont)</i>	Genotropin Norditropin Nutropin AQ Omnitrope Saizen Zomacton	Humatrope (PA)	
	Hectorol	doxercalciferol	
	Rayos	prednisone prednisone intensol	
	Uceris tablet	budesonide EC	
INFECTIONS	Acticlate Doryx Minocin capsule Monodox Oracea Solodyn vibramycin capsule	Generic products (e.g., doxycycline; minocycline)	
	Augmentin/ES/XR	amoxicillin-clavulanate ER	
	Bethkis	Kitabis Pak	
	Tobi	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	

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
PAIN RELIEF AND INFLAMMATORY DISEASE <i>(cont)</i>	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
	Imitrex Sumavel DosePro Zembrace SymTouch	sumatriptan
	levorphanol	Generic products (e.g., acetaminophen-codeine, hydromorphone, oxycodone)
	Lido-K	lidocaine cream, ointment
	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	clozapine
	Versacloz	clozapine ODT
	Geodon	ziprasidone
	Zyprexa	olanzapine
	Zyprexa Zydis	olanzapine ODT
SEIZURE DISORDERS	Mysoline	primidone

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
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
	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

DRUG CLASS	MEDICATION NOT COVERED^^	GENERIC AND/OR PREFERRED BRAND ALTERNATIVES
SKIN CONDITIONS <i>(cont)</i>	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
	SLEEP DISORDERS/SEDATIVES	Ambien Ambien CR Edluar Intermezzo
Nuvigil		armodafinil
Provigil		modafinil
Restoril		temazepam
SUBSTANCE ABUSE	Evzio	Narcan
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

Prescription drug list FAQs (cont)

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](https://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 ServicesSM 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.^{SM 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](https://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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