

# FAQs

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## Why are some drugs not included in coverage?

Drugs are excluded from coverage based on a number of factors. In these instances, there are covered alternatives that have proven to be effective and are typically less expensive.

## What if I still want to take the non-covered drug?

You have the option to continue taking the non-covered medication, however, you will most likely be required to pay full price.

## What do I need to do to switch to the covered alternative?

- 1) Contact your doctor
- 2) Request a prescription for one of the covered alternatives

*In some cases, your pharmacy will contact your doctor for you.*

## What if I have questions?

If you have any questions, please contact a MedTrak Pharmacy Benefit Advisor at 800.771.4648.

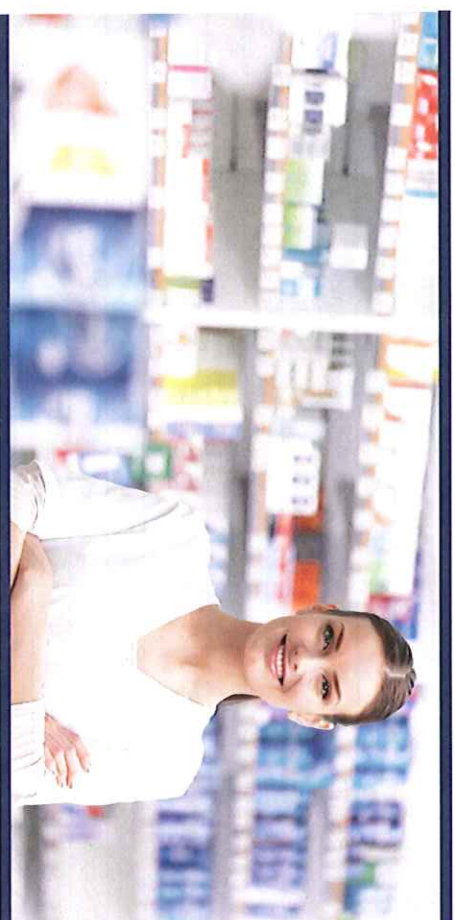
## If I have diabetes and my test strips aren't covered, what should I do?

One Touch® test strips are covered under your plan. You can order a FREE One Touch® system by calling 1.800.243.7361 and providing code 568SHD001.



# MEDTRAK

Your Prescription for Service



## 2015 Non-Covered Medications & Covered Alternatives

### MedTrak Services

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# Non-Covered Drugs & their Covered Alternatives

If you are currently taking one of the medications listed below, you will need to switch to a covered alternative listed in the right hand column.

Excluded Medications	Covered Alternative(s)
ABSTRAL	fentanyl citrate lozenges, LAZANDA
ACCU-CHEK METERS/STRIPS	ONETOUCH METERS/STRIPS
ALVESCO	ASMANEX, PULMICORT FLEXHALER, QVAR
APIDRA	HUMALOG
ARANESP	PROCRIT
AXERT	rizatriptan, sumatriptan, zolmitriptan
BECONASE AQ	flunisolide, fluticasone, triamcinolone acetamide
BENZAFLIN GEL PUMP	clindamycin phosphate/benzoyl peroxide, ACANYA
BETASERON	AVONEX, EXTAVIA, REBIF
BRAVELLE	GONAL-F, GONAL-F RFF
BREEZE, CONTOUR METERS/STRIPS	ONETOUCH METERS/STRIPS
BREO ELLIPTA	DULERA, SYMBICORT
CETRAXAL	ciprofloxacin ear solution, CIPRODEX
CIMZIA	ENBREL, HUMIRA, STELARA
DUEXIS	ibuprofen + famotidine
EDARBI/EDARBYCLOR	candesartan/hctz, irbesartan/hctz, losartan/hctz, telmisartan/hctz, valsartan/hctz
EPOGEN	PROCRIT
EUFLEXXA	MONOVISC, ORTHOVISC, SYNVISIC, SYNVISIC-ONE
FENTORA	fentanyl citrate lozenges, LAZANDA
FLOVENT DISKUS/HFA	ASMANEX, PULMICORT FLEXHALER, QVAR
FOLLISTIM AQ	GONAL-F, GONAL-F RFF
FORTESTA	ANDROGEL, AXIRON
FREESTYLE, PRECISION METERS/STRIPS	ONETOUCH METERS/STRIPS
FROVA	rizatriptan, sumatriptan, zolmitriptan
GEL-ONE	MONOVISC, ORTHOVISC, SYNVISIC, SYNVISIC-ONE
HYALGAN	MONOVISC, ORTHOVISC, SYNVISIC, SYNVISIC-ONE
INCIVEK	OLYSIO
JENTADUETO	JANUMET, JANUMET XR, KOMBIGLYZE XR
KADIAN	morphine sulfate ext-release, hydromorphone ext-release, oxycodone ext-release, NUCYNTA ER, OPANA ER, OXYCONTIN
KAZANO	JANUMET, JANUMET XR, KOMBIGLYZE XR
LEVITRA	CIALIS, VIAGRA
NESINA	JANUVIA, ONGLYZA

Excluded Medications	Covered Alternative(s)
NOVOLIN	HUMULIN
NOVOLOG	HUMALOG
NUTROPIN/NUTROPIN AQ	NORDITROPIN
OMNARIS	flunisolide, fluticasone, triamcinolone acetamide
OMNITROPE	NORDITROPIN
PANCREAZE	pancrelipase delayed-release, CREON, ZENPEP
PEGINTRON	PEGASYS
PERTZYE	pancrelipase delayed-release, CREON, ZENPEP
PROVENTIL HFA	PROAIR HFA, VENTOLIN HFA
SAZEN	NORDITROPIN
SIMPONI	ENBREL, HUMIRA, STELARA
STAXYN	CIALIS, VIAGRA
STENDRA	CIALIS, VIAGRA
SUBSYS	fentanyl citrate lozenges, LAZANDA
SUPARTZ	MONOVISC, ORTHOVISC, SYNVISIC, SYNVISIC-ONE
TANZELUM	BYDUREON, BYETTA
TESTIM	ANDROGEL, AXIRON
TESTOSTERONE GEL	ANDROGEL, AXIRON
TEVETEN HCT	candesartan/hctz, irbesartan/hctz, losartan/hctz, telmisartan/hctz, valsartan/hctz
TEV-TROPIN	NORDITROPIN
TRADJENTA	JANUVIA, ONGLYZA
TRUETEST, TRUETRACK METERS/STRIPS	ONETOUCH METERS/STRIPS
ULTRESA	pancrelipase delayed-release, CREON, ZENPEP
VELTIN	clindamycin phosphate + tretinoin, ACANYA
VERAMYST	flunisolide, fluticasone, triamcinolone acetamide
VICTOZA	BYDUREON, BYETTA
VIMOVO	omeprazole delayed-release + naproxen sodium
VOGELXO	ANDROGEL, AXIRON
XELJANZ	ENBREL, HUMIRA
XOPENEX HFA	PROAIR HFA, VENTOLIN HFA
ZETONNA	flunisolide, fluticasone, triamcinolone acetamide
ZIOPATAN	latanoprost, travoprost, LUMIGAN, TRAVATAN Z
ZOHYDRO ER	morphine sulfate ext-release, hydromorphone ext-release, oxycodone ext-release, NUCYNTA ER, OPANA ER, OXYCONTIN