

Prescription Drug List Changes

Starting January 1, 2016

Please read the following information carefully. It describes important information about your prescription drug coverage.*

What's changing?

Beginning January 1, 2016*, the following medications will be considered non-preferred brand or not covered, and/or will be subject to additional requirements such as Prior Authorization, Quantity Limits, Age Requirements and/or Step Therapy.

Cigna National (Standard) and Performance Prescription Drug Lists

Non-preferred brand medication	Generic and/or preferred brand alternatives	Condition/Drug class/Common use
Bydureon, Byetta	Trulicity, Victoza	Diabetes (non-insulin)
Fentora	Subsys	Pain Relief and Inflammatory Disease (Transmucosal Fentanyl)
Medication not covered [^]	Generic and/or preferred brand alternatives	Condition/Drug class/Common use
Acticlate	doxycycline	Antibiotics for Acne/Rosacea
Adoxa	doxycycline	
Doryx	doxycycline	
Minocin (oral)	minocycline	
Monodox	doxycycline	
Oracea	doxycycline	
Solodyn	minocycline	
Vibramycin (capsule)	doxycycline	
Cymbalta	duloxetine	Brands with Generics Available
Glumetza	metformin, metformin XR	
Lexapro	escitalopram	
Lipitor	atorvastatin	
Prevacid Solutab	lansoprazole	
Wellbutrin XL	bupropion XL	
Toujeo	Lantus, Levemir	Diabetes (insulin)
Afrezza, Apidra	Humalog, Humulin, Novolin, Novolog	
Glyxambi, Jentadueto, Kazano, Nesina, Oseni, Tradjenta	Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza	Diabetes (non-insulin)
AccuChek, Contour, Freestyle, all other test strips	OneTouch Ultra, OneTouch Verio	Diabetes (test strips)
Genotropin, Norditropin, Nutropin, Omnitrope, Zomacton	Humatrope, Saizen	Growth Hormones
Bravelle, Gonal-F	Follistim AQ	Infertility
Betaseron	Extavia	Multiple Sclerosis (beta 1b interferons)
Duexis, Vimovo	celecoxib, meloxicam, generic versions of ibuprofen+famotidine and naproxen+esomeprazole	Pain Relief and Inflammatory Disease (anti-inflammatory combination products)
Axiron, Fortesta, Natesto, Testim, Vogelxo	Androgel, testosterone gel (generic)	Testosterone Replacement

Value and Advantage Prescription Drug Lists

Medication not covered^	Generic and/or preferred brand alternatives	Condition/Drug class/Common use
Vyvanse	Generic extended release stimulants, Adderall XR	ADD/ADHD and Stimulants
Acticlate	doxycycline	Antibiotics for Acne/Rosacea
Adoxa	doxycycline	
Doryx	doxycycline	
Minocin (oral)	minocycline	
Monodox	doxycycline	
Oracea	doxycycline	
Solodyn	minocycline	
Vibramycin (capsule)	doxycycline	
Dulera, Symbicort	Advair, Breo Ellipta	Asthma and Respiratory (inhalers)
Proventil, Ventolin, Xopenex	ProAir	
Arcapta, Serevent	Foradil	
Beconase AQ, Dymista, Nasonex, Omnaris, QNASL, Veramyst, Zetonna	Generic nasal steroids (e.g. fluticasone)	Asthma and Respiratory (nasal sprays)
Toviaz	Generics (e.g. oxybutynin), VESIcare	Bladder Problems (overactive bladder)
Cymbalta	duloxetine	Brands with Generics Available
Glumetza	metformin, metformin XR	
Lexapro	escitalopram	
Lipitor	atorvastatin	
Prevacid Solutab	lansoprazole	
Wellbutrin XL	bupropion XL	
Pradaxa	warfarin, Xarelto	Cardiovascular (anti-clotting)
Diovan, Diovan HCT, Edarbi, Edarbyclor	Generic ACE (e.g. Lisinopril) or generic ARB (e.g. losartan, valsartan), Benicar/HCT	Cardiovascular (high blood pressure)
Vytorin	Generic statins (e.g simvastatin, atorvastatin), Crestor, Zetia	Cholesterol Lowering
Pristiq ER	venlafaxine ER, duloxetine, bupropion SR/XL, all generic SSRIs	Depression
Afrezza, Apidra, Novolin, Novolog	Humalog, Humulin	Diabetes (insulin)
Levemir, Toujeo	Lantus	
Farxiga, Jardiance, Xigduo XR	Invokamet, Invokana	Diabetes (non-insulin)
Bydureon, Byetta, Tanzeum, Victoza	Trulicity	
Glyxambi, Jentaduetto, Kazano, Nesina, Oseni, Tradjenta	Janumet, Janumet XR, Januvia, Kombiglyze XR, Onglyza	
AccuChek, Contour, Freestyle, all other test strips	OneTouch Ultra, OneTouch Verio	Diabetes (test strips)
Lumigan	Generics, latanoprost, Travatan Z	Eye Conditions
Genotropin, Norditropin, Nutropin, Omnitrope, Zomacton	Humatrope, Saizen	Growth Hormones
Bravelle, Gonal- F	Follistim AQ	Infertility
Betaseron	Extavia	Multiple Sclerosis (beta 1b interferons)
Enbrel, Kineret, Simponi	Cimzia, Humira	Pain Relief and Inflammatory Disease (anti-inflammatory)

Medication not covered [^]	Generic and/or preferred brand alternatives	Condition/Drug class/Common use
Duexis, Vimovo	Generics (e.g. celecoxib, meloxicam)	Pain Relief and Inflammatory Disease (anti-inflammatory combination products)
Axiron, Fortesta, Natesto, Testim, Vogelxo	Androgel, testosterone gel (generic)	Testosterone Replacement

[^] This drug is not covered on your plan. Please talk to your doctor about switching to an alternative. Your prescription drug plan requires approval by Cigna to have this medication covered.

Please note: Not all changes apply to all drug lists. Please check your plan materials or call Customer Service to see how these changes apply to your specific drug list.

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



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