

## **Medicare Part D Formulary changes 2014 to 2015**

### **Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

The 2015 Medicare Part D annual Open Enrollment Period (OEP) began October 15, 2014 and ended on December 7, 2014. On August 8, 2014 the 2015 Blue Cross MedicareRx<sup>SM</sup> / Blue Cross Medicare Advantage<sup>SM</sup> (BlueCross BlueShield of Illinois, Montana, New Mexico, Oklahoma, and Texas) Medicare Part D's Value and Ideal formularies were granted 'conditional approval' by the Centers for Medicare and Medicaid Services (CMS) and as with all Medicare Part D drug plans you can expect a number of formulary and utilization management changes for 2015. Some of the changes were mandated by CMS (safety concerns, drugs that no longer meet CMS' definition of a 'Part D medication', etc.) but others were a result of dynamic changes in the pharmaceutical marketplace. The Blue Cross MedicareRx / Blue Cross Medicare Advantage 2015 Part D formulary changes include addition of some new drug therapies as well as the migration to some important generic equivalents (e.g. DETROL LA, EVISTA, CYMBALTA, ACTONEL, MICARDIS, AVELOX, etc.) that have and/or will become available in 2015.

A copy of 2014 to 2015 formulary changes (i.e. drug removals and new Prior Authorization and Step Therapy utilization management programs) were included in the Annual Notice of Change (ANOC) that was sent to all current members of Blue Cross MedicareRx / Blue Cross Medicare Advantage Medicare Part D plans. In addition, individual member letters were mailed in late-November 2014, alerting them of important 2015 formulary changes (removals, tier changes, new utilization management programs, etc.) affecting them. Finally, a copy of the 2015 formulary is already available on the Blue Cross MedicareRx / Blue Cross Medicare Advantage website in time for the start of the Medicare Part D OEP. The BCBSIL MAPD and PDP websites are as follows: (MAPD = [www.getbluenm.com/dsnp](http://www.getbluenm.com/dsnp), [www.getblueil.com/mapd](http://www.getblueil.com/mapd), [www.getbluemt.com/mapd](http://www.getbluemt.com/mapd), [www.getbluenm.com/mapd](http://www.getbluenm.com/mapd), [www.getblueok.com/mapd](http://www.getblueok.com/mapd), [www.getbluetx.com/mapd](http://www.getbluetx.com/mapd)) (PDP websites = [www.getblueil.com/pdp](http://www.getblueil.com/pdp), [www.getbluenm.com/pdp](http://www.getbluenm.com/pdp), [www.getblueok.com/pdp](http://www.getblueok.com/pdp), [www.getbluetx.com/pdp](http://www.getbluetx.com/pdp)). Please refer to our list below for a handy reference to the Top 30 medications that will be impacted by a change to the 2015 Blue Cross MedicareRx / Blue Cross Medicare Advantage Value and Ideal formularies and therefore, have the most potential to affect current members. Please note that the shaded fields below reflect changes to the VALUE FORMULARY ONLY! All other changes reflect changes to both Value and Ideal formularies. Requests for coverage determinations, when applicable, can be submitted by the prescribing physician after December 1, 2014 with an effective date of January 1, 2015.

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

**Blue Cross MedicareRx / Blue Cross Medicare Advantage - Top 30 Formulary Changes from 2014 into 2015**

Affected Drug(s)	Description of Change	Formulary Alternative, if Applicable
ACTONEL tabs, 150 mg	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	risedronate
ACTONEL tabs, 5 mg, 30 mg, 35 mg	Is not covered on our 2015 Formulary	alendronate, ibandronate, Atelvia
AVELOX tabs	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	moxifloxacin

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

BONIVA inj	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	ibandronate inj
BYSTOLIC tabs	Is not covered on our 2015 Value formulary	Atenolol, metoprolol, and metoprolol ER
Cyclobenzaprine tabs, 7.5mg	Is not covered on our 2015 Value formulary	Baclofen, tizanidine
CYMBALTA caps	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	duloxetine
cypheptadine tabs	Is not covered on our 2015 formulary	Please check with your doctor

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

DETROL LA caps	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	tolterodine ER
EVISTA tabs	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	raloxifene
GAMMAGARD inj	Is not covered on our 2015 formulary	Gammaflex, Gamunex-C *Please note, these alternatives require prior authorization
GAMMAGARD SD inj	Is not covered on our 2015 Value formulary	Gammaflex, Gamunex-C *Please note, these alternatives require prior authorization
griseofulvin microsize tabs	Is not covered on our 2015 formulary	griseofulvin ultra 250mg
INTUNIV tabs	Is not covered on our 2015 formulary	clonidine ER

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

ISOSORBIDE DINITRATE tabs, 30mg	Is not covered on our 2015 Value formulary	Isosorbide mononitrate ER
JUVISYNC tabs	Is not covered on our 2015 Value formulary	Januvia taken in combination with simvastatin
lidocaine patch 5%	Is on our formulary, but requires prior authorization before we will continue coverage for this drug	Please work with your doctor to obtain approval for your medicine
LIDODERM patch 5%	Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.  When you choose generic drugs, you get prescription medications that are: <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	lidocaine patch *Please note, this alternative requires prior authorization
methadone tabs	Is on our formulary; however quantity limits may apply	Please work with your doctor to determine an appropriate quantity of your medicine
METIPRANOLOL ophth soln	Is not covered on our 2015 Formulary	Betoptic S, betaxolol, carteolol, levobunolol, timolol, Isatolol, and timolol gel

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

<p align="center">METROGEL gel, 1%</p>	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	<p align="center">metronidazole</p>
<p align="center">MICARDIS HCT tabs</p>	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	<p align="center">telmisartan/hydrochlorothiazide</p>
<p align="center">MICARDIS tabs</p>	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	<p align="center">telmisartan</p>

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

MOVIPREP soln	Is not covered on our 2015 formulary	Suprep, PEG-3350, Gavilyte-C, Gavilyte-G, Gavilyte-N, Trilyte
MYFORTIC tabs	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	mycophenolate
NEUPOGEN inj	Is not covered on our 2015 formulary	Granix, Neulasta
NIASPAN ER tabs	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	niacin ER

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

NITROLINGUAL spray	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	nitroglycerin spray
PRANDIN tabs	<p>Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	repaglinide
PROTOPIC oint	Is not covered on our 2015 formulary	Elidel *Please note, this alternative is subject to Step Therapy
RAPAMUNE tab, 0.5mg	<p>Is not covered on our 2015 Value formulary as there are generic equivalents and/or generic alternatives available.</p> <p>When you choose generic drugs, you get prescription medications that are:</p> <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	Sirolimus



**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**

RAPAMUNE tabs, 1 mg, 2 mg	Is not covered on our 2015 formulary	sirolimus 0.5mg, tacrolimus
Risedronate tabs	Is not covered on our 2015 Value formulary	Alendronate, ibandronate
SORIATANE caps	Is not covered on our 2015 Value formulary as there are generic equivalents and/or generic alternatives available.  When you choose generic drugs, you get prescription medications that are: <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	acitretin
STALEVO tabs	Is not covered on our 2015 formulary	carbidopa/levodopa/entacapone
VIMOVO tabs	Is not covered on our 2015 formulary	diclofenac/misoprostol
XYREM oral soln	Is on our formulary but requires prior authorization before we will continue coverage for this drug	Please work with your doctor to obtain approval for your medicine
ZEMPLAR caps	Is not covered on our 2015 formulary as there are generic equivalents and/or generic alternatives available.  When you choose generic drugs, you get prescription medications that are: <ul style="list-style-type: none"> <li>• FDA approved and regulated</li> <li>• Equal to brand-name drugs in terms of safety and effectiveness</li> <li>• Less expensive</li> </ul>	paricalcitol

**Medicare Part D Formulary changes 2014 to 2015**  
**Blue Cross MedicareRx (PDP)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO-  
POS)<sup>SM</sup> / Blue Cross Medicare Advantage (HMO SNP)<sup>SM</sup> / Blue Cross Medicare Advantage (PPO)<sup>SM</sup>**