



DEFENSE
HEALTH AGENCY

OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS

7700 ARLINGTON BOULEVARD, SUITE 5101
FALLS CHURCH, VIRGINIA 22042-5101

May 2014

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JOHN Q PUBLIC
123 ANY ST
ANYCITY, ST 12345

Dear TRICARE Beneficiary:

Recently the Department of Defense Pharmacy and Therapeutics Committee recommended changes to the list of drugs covered under the TRICARE Pharmacy benefit. The Committee meets on a quarterly basis to ensure TRICARE continues to encourage the use of the most clinically and cost effective medications. As new drugs come on the market, or a manufacturer changes its prices, the Committee recommends formulary changes based on this new information.

Our records indicate you may be taking prescription drug(s) that will be moving to the non-preferred tier (Tier 3 non-formulary) or may require a prior authorization. The attachment lists all drug(s) affected by this change, as well as the date the change will occur. The attachment also has other preferred drug options for you and your doctor to consider. We recommend you talk to your doctor about the options before the effective date listed on the attachment.

The attachment shows all preferred drugs with their cost shares (the amount you will pay). These are available through TRICARE Pharmacy Home Delivery or at a retail network pharmacy. They may also be available at a military pharmacy in your area. To find a local military pharmacy, visit www.tricare.mil/mtf. We encourage you to consider TRICARE Pharmacy Home Delivery as a convenient and cost-effective way to receive your regular prescriptions if a military pharmacy is not an option. Learn more about home delivery at www.tricare.mil/homedelivery and find your nearest TRICARE pharmacies at www.express-scripts.com/TRICARE/pharmacy.

Please keep in mind, if you do not have an approval from Express Scripts for a drug requiring prior authorization, you will pay 100% of the cost. Your doctor can submit a prior authorization request to Express Scripts, the TRICARE Pharmacy contractor by calling 1-866-684-4488.

If you have questions, call the TRICARE Pharmacy Program at 1-877-363-1303. We at TRICARE are proud to serve our Nation's military heroes and their families and are committed to providing them the best possible health care.

Sincerely,

Douglas J. Robb, DO, MPH
Lieutenant General, USAF, MC, CFS
Director

Attachment:
As stated



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Formulary Options for Your Doctor to Consider

You are now taking a drug in the non-preferred column.

Cost Share Change Effective August 6, 2014

Non-Preferred Drugs Non-Formulary (Tier 3)	Preferred Drugs Formulary (Tier 1 & Tier 2) <i>These are drugs your provider may write for or pharmacist may use (depending on how your prescription is written) in place of your now Tier 3 medication.</i>
<p>Notes: ** Listed retail cost shares (the amount you will pay) are for up to a 30 day supply; Home Delivery are for up to a 90 day supply † Mandatory generic substitution required when generics are available</p>	
<p>Antidepressant Agents</p>	
<p>Cost share** = \$44 at retail, \$43 through Home delivery Khedezla® (desvenlafaxine ER) – tabs Forfivo® (bupropion 450mg XL) – tabs Fetzima® (levomilnacipran) – caps Brintellix (vortioxetine) – tabs</p>	<p>Cost share** = \$5 at Retail; \$0 through Home Delivery venlafaxine IR (generics) – tabs and caps venlafaxine ER (generics) – tabs and caps bupropion (generics) - tabs bupropion SR (generics) – tabs bupropion XL (generics) – tabs citalopram (generics) – tabs escitalopram (generics) – tabs fluoxetine (generics) – tabs/caps sertraline (generics) – tabs paroxetine (generics) – tabs mirtazapine (generics) – tabs trazodone (generics) - tabs</p> <p>Cost share** = \$17 at Retail; \$13 through Home Delivery Pexeva® (paroxetine mesylate) – tabs</p>
<p>Gastrointestinal Agents</p>	
<p>Cost share** = \$44 at retail, \$43 through Home delivery Asacol HD® (mesalamine) – tabs Pentasa® (mesalamine) – caps Giazol® (basalaside) – tabs</p>	<p>Cost share** = \$5 at Retail; \$0 through Home Delivery sulfasalazine (generics) – tabs balsalaside 750mg (generics) – caps</p> <p>Cost share** = \$17 at Retail; \$13 through Home Delivery Dipentum® (olsalazine) – caps Delzicol® (mesalamine) – caps Lialda® (mesalamine) – tabs Apriso® (mesalamine) – caps</p>
<p>Pancreatic Enzyme Products</p>	
<p>Cost share** = \$44 at retail, \$43 through Home delivery Pertyze® (pancreatic enzymes) – tabs Ultresa® (pancreatic enzymes) – caps</p>	<p>Cost share** = \$17 at Retail; \$13 through Home Delivery Creon® (pancreatic enzymes) – caps Pancreaze® (pancreatic enzymes) – caps Zenpep® (pancreatic enzymes) – caps Viokace® (pancreatic enzymes) – tabs</p>



Formulary Options for Your Doctor to Consider

You are now taking a drug in the non-preferred column.

Cost Share Change Effective July 9, 2014	
Non-Formulary (Tier 3)	Formulary (Tier 1 & Tier 2) <i>These are drugs your provider may write for or pharmacist may use (depending on how your prescription is written) in place of your now Tier 3 medication.</i>
<p><i>Notes:</i> ** Listed retail cost shares (the amount you will pay) are for up to a 30 day supply; Home Delivery are for up to a 90 day supply † Mandatory generic substitution required when generics are available</p>	
Asthma/COPD Agents (Quantity limits apply in this class)	
Cost share** = \$44 at retail, \$43 through Home delivery Symbicort® (budesonide/formoterol) – inhaler Dulera® (mometasone/formoterol) – inhaler Breo Ellipta® (fluticasone/vilanterol) - inhaler	Cost share** = \$17 at Retail; \$13 through Home Delivery Advair HFA®, Advair Diskus® (fluticasone/salmeterol) – inhaler

Has your permanent address changed?

If so, please contact DEERS at (800) 538-9552, or www.tricare.mil/deers