



PO Box 52056
Phoenix, AZ 85072-2056

DEFENSE
HEALTH AGENCY

June 23, 2016
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John Q. Public
100 Any Street
Any St. Apartments
7th Floor
Any City, MO 55555-4444



A change to your pharmacy benefit

Dear TRICARE member:

I am writing today to inform you about changes to TRICARE's list of covered prescription medications and to help you lower your out-of-pocket costs.

We regularly review our list of TRICARE covered prescription medicines to ensure that it is current. We update this list when equally effective, FDA-approved drugs become available at lower cost. We recently updated this list and you may be affected by these changes. Let me explain what has changed and options for you and your physician to consider.

On August 10th, 2016 a prescription drug you take will no longer be on our list of preferred drugs. If you continue to request this medication, we will still share in paying for some of the cost, but you will pay more than you currently do.

But you do have a choice.

You can ask your doctor to change your prescription to a drug with the same medical effect as your current drug, but at a lower cost to you. We have enclosed a table showing your options and cost information. Take this table to your provider, and discuss your options and what drug will work best for you.

There are more useful details in the Frequently Asked Questions section of the TRICARE Pharmacy web site managed by our business partner, Express Script, Inc. at www.Express-Scripts.com/TRICARE. If you have questions, you can always call Express Scripts at (877) 363-1303.

We are proud to serve you and will continue to ensure you have timely, cost-effective access to prescription medications.

R.C. BONO
VADM, MC, USN
Director

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Options for You and Your Doctor to Consider

Starting on August 10th, 2016, you have the two options below. Take this information to your doctor to discuss which option is best for you.

Option 1: Talk with your doctor about switching to a preferred alternative drug.

Your Current Medication (Switch from this...)	Preferred Alternatives (To one of these...)	Your cost for a 90-day supply (Of the Preferred Alternative):	
		Retail Pharmacy	Home Delivery
Non-Basal Insulins			
Afrezza (Inhalation)	<i>Brand:</i> • Apidra (Injection) • Humalog (Injection) • Novolog (Injection)	\$72.00	\$20.00
Non-Steroidal Anti-Inflammatory Agents (NSAIDs)			
Tivorbex (Capsule)	<i>Generic:</i> • Indomethacin (Capsule) • Ibuprofen (Tablet) • Meloxicam (Tablet) • Naproxen (Tablet) • Diclofenac (Capsules and Tablets) • Any other generic NSAID (Tablet) • Celecoxib (Capsules)	\$30.00	\$0.00
Ophthalmic-1: Antihistamines/Mast Cell Stabilizers			
Pazeo (Eye Drops)	<i>Generic:</i> • Olopatadine (Eye Drops) • Azelastine (Eye Drops) • Epinastine (Eye Drops)	\$30.00	\$0.00
	<i>Brand:</i> • Bepreve (Eye Drops) • Pataday (Eye Drops)	\$72.00	\$20.00
Contraceptive Agents			
Ministran 24 FE (Chewable) Generess FE (Chewable)	<i>Generic:</i> • Norethindrone acetate-Ethinyl Estradiol/with or without Ferrous Fumarate (Chewable; Tablet) • Levonorgestrel-Ethinyl Estradiol (Tablet) • Drospirinone-Ethinyl Estradiol (Tablet) • Norgestrel-Ethinyl Estradiol (Tablet) • Desogestrel-Ethinyl Estradiol (Tablet)	\$30.00	\$0.00
Antifungals: Topical Lacquers			
Jublia (Topical Solution) Kerydin (Topical Solution)	<i>Generic:</i> • Ciclopirox (Topical Solution)	\$30.00	\$0.00

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Option 2: Continue taking your current drug that is no longer preferred by TRICARE. To get approval to continue taking your current drug at the current copay, your doctor must send proof of Medical Necessity. Otherwise, you will pay the amount listed below. Drugs marked with an asterisk (*) require your doctor to also request a Prior Authorization. Without Prior Authorization, you will have to pay the full cost of the drug.

How Does Your Doctor Send in Proof of Medical Necessity and/or Prior Authorization? Have your doctor submit the Medical Necessity and/or Prior Authorization electronically or by calling the Express Scripts doctor line at (866) 684-4488.

Drug Names	90-day Supply at Retail Pharmacy	90-day Supply at Home Delivery
Non-Basal Insulins *		
Afrezza (Inhalation)	\$150.00	\$49.00
Non-Steroidal Anti-Inflammatory Agents (NSAIDs)		
Tivorbex (Capsule)	\$150.00	\$49.00
Ophthalmic-1: Antihistamines/Mast Cell Stabilizers		
Pazeo (Eye Drops)	\$150.00	\$49.00
Contraceptive Agents		
Ministran 24 FE (Chewable) Generess FE (Chewable)	\$150.00	\$49.00
Antifungals: Topical Lacquers *		
Jublia (Topical Solution) Kerydin (Topical Solution)	\$150.00	\$49.00

For more information, search for your drug on the Formulary Search Tool located online at www.express-scripts.com/TRICAREformulary.

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