



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS

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

TRICARE
MANAGEMENT
ACTIVITY

January 2013

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JOHN Q PUBLIC
123 STREET NAME
CITY, ST 99999

Dear TRICARE Beneficiary:

Our records indicate you may be taking one or more prescription drugs that will be moving to non-formulary (Tier 3) or require 'prior authorization' as recommended by the Department of Defense Pharmacy and Therapeutics Committee (DoD P&T). The DoD P&T oversees the TRICARE Management Activity drug formulary.

The affected drug(s) and alternatives are listed on the attachment to assist you in making the best decision regarding your pharmacy needs. We recommend you talk to your health care provider about the options prior to the effective date listed on the attachment.

All of the preferred products on the attachment are available through the TRICARE Home Delivery pharmacy, or at a retail network pharmacy with the associated cost share. They may also be available at Military Treatment Facility (MTF) pharmacies in your area. We encourage you to consider TRICARE Home Delivery as a convenient and cost-effective way to receive your regular prescriptions if an MTF is not an option. Learn more about home delivery at www.tricare.mil/homedelivery; and find your nearest participating TRICARE pharmacies at www.express-scripts.com/TRICARE/pharmacy.

Please keep in mind, you will be responsible for the full cost if you do not have an approved prior authorization for a medication that requires prior authorization. The request for prior authorization can be submitted by your physician with a review by Express Scripts.

Express Scripts is contracted by DoD to process retail pharmacy claims and fill TRICARE Home Delivery prescriptions for TRICARE beneficiaries.

For more information on formulary, non-formulary, prior authorization, or additional questions, you or your provider can go to www.tricare.mil/pharmacy or contact the TRICARE Pharmacy Program at (877) 363-1303.

We at TRICARE are proud to serve our nation's military heroes and their families and are committed to providing the best possible health care.

Sincerely,

Mary Kaye Justis
Assistant Deputy Director

Attachment: Formulary Alternatives for Non-formulary or Prior Authorization Medications

Formulary Alternatives for Non-formulary Medications

Cost Share Changes Effective 9 January, 2013

Non-Formulary (Tier 3) Medications	Formulary Medications (Tier 1 & Tier 2)
Non-Steroidal Anti-Inflammatory Agents (NSAIDs) - Combination/Gastroprotective	
Cost share = \$25 † Duexis® (ibuprofen/famotidine)	Cost share = \$12 at Retail for a 30 day supply; \$9 through Home Delivery for a 90 day supply † Arthrotec® (diclofenac/misoprostol) Vimovo® (naproxen/esomeprazole) Celebrex® (celecoxib)
Non-Steroidal Anti-Inflammatory Agents (NSAIDs)	
Cost share = \$25 † Sprix® (ketorolac nasal spray)	Cost share = \$5 at Retail for a 30 day supply; \$0 through Home Delivery for a 90 day supply † ibuprofen (generics) – tablet indomethacin (generics) – capsule meloxicam (generics) – tablet naproxen (generics) – tablet diclofenac sodium (generics) – tablet diclofenac potassium (generics) – tablet diflunisal (generics) – tablet etodolac (generics) – tablet fenoprofen (generics) – tablet flurbiprofen (generics) – tablet ketoprofen (generics) – tablet ketorolac (generics) – tablet nabumetone (generics) – tablet oxaprozin (generics) – tablet piroxicam (generics) – capsule sulindac (generics) – tablet tolmetin (generics) – tablet meclofenamate (generics) – capsule
Targeted Immunomodulatory Biologics for Rheumatoid Arthritis (RA)	
Cost share = \$25 Orencia® (abatacept, 125 mg/mL solution) – subcutaneous injection	Cost share = \$12 at Retail for 4 syringes/28 days supply; \$9 through Home Delivery for 8 syringes/56 days supply Humira® (adalimumab)

Glaucoma Agents	
Cost share = \$25 † Zioptan® (tafluprost) – ophthalmic	Cost share = \$5 at Retail for a 30 day supply; \$0 through Home Delivery for a 90 day supply † latanoprost (generic) – ophthalmic Cost share = \$12 at Retail for a 30 day supply; \$9 through Home Delivery for a 90 day supply Lumigan® (brand) – ophthalmic

† Mandatory generic substitution required when generics available

Has your permanent address changed?
If so, please contact DEERS at (800) 538-9552, or www.tricare.mil/deers