



**OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS**

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FALLS CHURCH, VIRGINIA 22041-3206

**TRICARE
MANAGEMENT
ACTIVITY**

Dear TRICARE Beneficiary:

On May 9, 2011, TRICARE Management Activity approved the medication recommendations from the Department of Defense (DoD) Pharmacy & Therapeutics Committee. The approvals allow us to provide you new formulary-based alternatives for prescriptions that are becoming non-formulary. Our records indicate you may be taking a prescription drug that is becoming non-formulary (Tier 3). We are writing to assist you in making the best decision regarding your pharmacy needs by providing you with the enclosed list of formulary-based alternatives. We recommend you talk to your health care provider about changing to one of the covered alternatives listed in the attached table.

All of the alternatives are available through TRICARE Pharmacy Home Delivery or at a TRICARE Retail Network Pharmacy with the associated co-pay. They may also be available at Military Treatment Facility pharmacies in your area. We encourage you to consider Home Delivery as a convenient and cost-effective way to receive your prescriptions. You can learn more at www.tricare.mil/homedelivery.

Should you choose to continue with a non-formulary medication, please understand that you will be responsible for the Tier 3 (\$22) co-pay for a 30-day supply at a retail pharmacy, or a 90-day supply through Home Delivery. If a generic equivalent is available, you must have prior authorization approval before receiving the brand name medication. The non-formulary co-pay may be reduced if "medical necessity" can be established by your physician with an Express Scripts, Inc. review. Express Scripts, Inc. is contracted by DoD to fill prescriptions for TRICARE beneficiaries at retail pharmacies and Home Delivery. For more information on formulary, non-formulary and "medical necessity," please go to www.tricare.mil/pharmacy. For questions or additional information, you or your provider may contact the TRICARE Pharmacy Program at (877) 363-1303.

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

Sincerely,

C. S. Hunter
RADM, MC, USN
Deputy Director

Enclosure:
As stated

Formulary Alternatives for Non-formulary Medications

Co-pay Changes Effective July 13, 2011

Non-Formulary (Tier 3) Medications	Formulary Medications (Tier 1 & Tier 2)
Renin-Angiotensin Agents (RAAs)*	
Co-pay = \$22 † Tekamlo® (aliskiren/amlodipine) - tablet Tribenzor® (olmisartan/amlodipine/hctz) - tablet	Co-pay = \$3 amlodipine (generics) - tablet losartan , losartan HCT (generics) - tablet Co-pay = \$9 † Diovan®, Diovan® HCT - tablet Exforge® (amlodipine/valsartan) - tablet Exforge HCT® (amlodipine/valsartan/hctz) - tablet Micardis®, Micardis HCT® (telmisartan+-hctz) - tablet Twynsta®, (amlodipine/telmisartan) Tekturna®, Tekturna HCT® (aliskiren+-hctz) - tablet Valturna®, (aliskiren/vlasartan) - tablet Amturnide® (aliskiren/amlodipine/hctz) - tablet
Alzheimers Agents	
Co-pay = \$22 † Aricept-23® (donepezil) - tablet	Co-pay = \$3 donepezil (generics) - tablet galantamine (generics) - tablet Co-pay = \$9 † Aricept 5mg, 10mg® (donepezil) - tablet Aricept ODT® (donepezil) - tablet Exelon® (rivastigmine) - tablet Razadyne® (galantamine) - tablet Razadyne ER® (galantamine) - tablet Namenda® (memantine) - tablet
Antiemetics	
Co-pay = \$22 † Zuplenz® (ondansetron) - soluble film	Co-pay = \$3 ondansetron (generics) - tablet ondansetron ODT (generics) - tablet granisetron (generics) - tablet Co-pay = \$9 † Zofran® - tablet Zofran ODT® - tablet
Diabetic Test Strips	
Copay = \$22 † Nova Max®, Advocate Redi-code®, EasyMax®, EZ Smart Plus®, Fifty 50®, Microdot®, Rightest GS100®, Rightest GS300®, Liberty®, Ultratrak Ultimate®, Wavesense Jazz® Wavesense Presto®, Blood Sugar Diagnostic®,	Copay = \$9 Accu-Chek Aviva®, Accutrend® Assure platinum, Contour® Clever Choice Autocode®, Embrace®, ForaD10®, D15G®, G20®, V10®, Freestyle Lite®, OptumEZ®, Pharmacist Choice Autocode®, Precision QID®, Precision Xtra®, Solo V2®, Truetest®

* Prior authorization criteria apply to some medications in this class

† 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