

2011 PART D FORMULARY CHANGE NOTIFICATION

Listed below are the annual notices for Part D formulary changes for 2011. The member's formulary is dependent upon the specific Part D plan in which the member is enrolled. Medica Prime Solution with the Part D Rider, Medica Advantage Solution, and Medica Complete Solution members use the Open formulary. Medica Dual Solution (MSHO) members use the Closed formulary. Medica Part D Employer Group retirees use the closed or the open formulary depending on their particular group's benefit design.

Notice of Annual Formulary Changes:

As a Part D plan sponsor, Medica can make formulary changes from one plan year to the next. The following list is a summary of the most common formulary changes (defined below) for Medica Part D in 2011. This list is subject to change. For a complete and up to date formulary list, please visit our comprehensive formulary on www.medica.com at:

<https://www.medica.com/C12/DrugFormularyPartD/default.aspx>

Formulary Removals (Negative Changes):

- removing a drug from the formulary
- moving a drug from a lower tier to a higher tier, which may result in a higher member copayment and coinsurance
- addition of Step Therapy, Prior Authorization, or Quantity Level Limits to a covered formulary drug

Formulary Additions (Positive Changes):

- adding a drug to the formulary
- moving a drug from a higher tier to a lower tier, which may result in a lower member copayment and coinsurance
- removal of Step Therapy, Prior Authorization, or Quantity Level Limits from a covered formulary drug

Member Notice and Transition of Care:

Medica will notify existing 2010 members of changes of drugs on formularies that apply to their benefits. Additionally, all Part D Medica members in 2011 will be managed through Medica's Part D Transition of Care Policy, located on www.medica.com at:

<https://member.medica.com/C17/PartDDrugFormularyChanges/default.aspx>

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2011 PART D FORMULARY CHANGE NOTIFICATION

Negative Formulary Changes January 1st, 2011:

PART D OPEN FORMULARY 2011 – NEGATIVE CHANGES		
Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
8-MOP	10 MG CAPSULE	Increased to Tier 4
ABELCET	5 MG/ML VIAL	Increased to Tier 4
ACANYA	1.2%-2.5% GEL (GM)	Increased to Tier 2
ACTEMRA	all strengths	Add Quantity Limit
ACTHAR H.P.	80 units/ml VIAL	Add Quantity Limit
AGRYLIN	0.5mg CAPSULES	Increased to Tier 4
ALDARA	5 % PACKET	Increased to Tier 3
ALKERAN	50 MG VIAL	Increased to Tier 4
ALLEGRA-D	all strengths	Increased to Tier 3
ALPHAGAN P	0.15 % DROPS	Increased to Tier 3
AMPYRA	10mg ER TABLETS	Add Quantity Limit
ANADROL-50	50 MG TABLET	Increased to Tier 4
ANDROID	10 MG CAPSULE	Increased to Tier 3
ANUSOL-HC	2.5 % CREAM (GM)	Increased to Tier 3
ANZEMET (ORAL)	all strengths	Increased to Tier 4
APEXICON	0.05% OINT. (GM)	Increased to Tier 3
APOKYN	10 MG/ML CARTRIDGE	Increased to Tier 4
APTIVUS	100 MG/ML SOLUTION	Increased to Tier 3
ARZERRA	100mg/5ml VIAL	Add Quantity Limit
ASACOL	400 MG TABLET DR	Increased to Tier 3
AVASTIN	25 MG/ML VIAL	Increased to Tier 4
BOTOX	100 & 200 UNIT VIAL	Increased to Tier 4 with QL
CAFERGOT	1MG-100MG TABLET	Increased to Tier 3
CAMPTOSAR	100 MG/5ML VIAL	Increased to Tier 4

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PART D OPEN FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
CELLCEPT	200 MG/ML SUSP RECON	Increased to Tier 4
CELLCEPT CAPSULES	all strengths	Increased to Tier 4
CHANTIX	all strengths	Increased to Tier 3 with QL
CHENODAL	250mg TABLETS	Add Quantity Limit
CHORIONIC GONADOTROPIN	10000 UNIT VIAL	Increased to Tier 3
CIMZIA	200mg/ml injection	Add Quantity Limit
CINRYZE	500 units VIAL	Add Quantity Limit
COLY-MYCIN M PARENTERAL	150 MG VIAL	Increased to Tier 4
CORVERT	0.1 MG/ML VIAL	Increased to Tier 3
COZAAR	all strengths	Increased to Tier 3
CREON	10, 20 and 5	Increased to Tier 3
CYTOVENE	500 MG VIAL	Increased to Tier 3
DACOGEN	50 MG VIAL	Increased to Tier 4
EFFEXOR XR	all strengths	Increased to Tier 3
ELIGARD	45 MG DISP SYRIN	Increased to Tier 4
ELOXATIN	50 MG/10ML VIAL	Increased to Tier 4
ENBREL	all strengths	Add Quantity Limit
ERAXIS (ALCOHOL DILUENT)	100 MG VIAL	Increased to Tier 4
EXJADE	all strengths	Increased to Tier 4
FASLODEX	250 MG/5ML DISP SYRIN	Increased to Tier 4
FENTANYL CITRATE BUCCAL	all strengths	Increased to Tier 4
FLOMAX	0.4 MG CAP. SR 24H	Increased to Tier 3
FLUDARA	50 MG VIAL	Increased to Tier 4

2011 PART D FORMULARY CHANGE NOTIFICATION

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PART D OPEN FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
FLUDARABINE PHOSPHATE	50 MG VIAL	Increased to Tier 4
FLUDARABINE PHOSPHATE	50 MG/2 ML VIAL	Increased to Tier 4
FRAGMIN	10000/ML DISP SYRIN	Increased to Tier 4
FRAGMIN	12500/0.5 DISP SYRIN	Increased to Tier 4
FRAGMIN	15000/0.6 DISP SYRIN	Increased to Tier 4
FRAGMIN	18000/0.72 DISP SYRIN	Increased to Tier 4
FRAGMIN	25000/ML VIAL	Increased to Tier 4
FURADANTIN	25 MG/5 ML ORAL SUSP	Increased to Tier 3
FUSILEV	50 MG VIAL	Increased to Tier 4
GALANTAMINE HYDROBROMIDE	all strengths	Add Quantity Limit
GEMZAR	200 MG VIAL	Increased to Tier 4
GENOTROPIN	0.6MG/0.25 DISP SYRIN	Increased to Tier 4
GENOTROPIN	0.8MG/0.25 DISP SYRIN	Increased to Tier 4
GENOTROPIN	1.2MG/0.25 DISP SYRIN	Increased to Tier 4
GENOTROPIN	1MG/0.25ML DISP SYRIN	Increased to Tier 4
HEPSERA	10 MG TABLET	Increased to Tier 4
HUMIRA	all strengths	Add Quantity Limit
HYCAMTIN	4 MG VIAL	Increased to Tier 4
HYZAAR	all strengths	Increased to Tier 3
IMIQUIMOD	5 % PACKET	Increased to Tier 4
INDOCIN I.V.	1 MG TAB DS PK	Increased to Tier 3
INNOHEP	20000/ML VIAL	Increased to Tier 4
INVEGA SUSTENNA	117MG/0.75 DISP SYRIN	Increased to Tier 4
INVEGA SUSTENNA	156 MG/ML DISP SYRIN	Increased to Tier 4

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PART D OPEN FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
INVEGA SUSTENNA	234MG/1.5 DISP SYRIN	Increased to Tier 4
IRINOTECAN HCL	40MG/2ML VIAL	Increased to Tier 4
ISENTRESS	400 MG TABLET	Increased to Tier 4
KADIAN	100 MG CAP SR PEL	Increased to Tier 4
KADIAN	200 MG CAP SR PEL	Increased to Tier 4
KALETRA	200MG-50MG TABLET	Increased to Tier 4
KALETRA	400-100/5 SOLUTION	Increased to Tier 4
LAMICTAL (GREEN)	25(84)-100 TAB DS PK	Increased to Tier 3
LAMICTAL (ORANGE)	25(42)-100 CAPSULE DR	Increased to Tier 3
LEXIVA	700 MG TABLET	Increased to Tier 4
LOTRONEX	all strengths	Increased to Tier 4
LUMIGAN	all strengths	Add Quantity Limit
LUPRON DEPOT	11.25MG KIT	Increased to Tier 4
LUPRON DEPOT	22.5 MG DISP SYRIN	Increased to Tier 4
LUPRON DEPOT	3.75 MG KIT	Increased to Tier 4
LUPRON DEPOT	30 MG KIT	Increased to Tier 4
LUPRON DEPOT-PED	all strengths	Increased to Tier 4
LYSODREN	500 MG TABLET	Increased to Tier 4
MELPHALAN HCL	50 MG VIAL	Increased to Tier 4
MEPRON	750 MG/5ML ORAL SUSP	Increased to Tier 4
MESNEX	400 MG TABLET	Increased to Tier 4
METHITEST	10 MG TABLER	Increased to Tier 3
METRO IV	500MG/0.1L PIGGYBACK	Increased to Tier 3
MIRAPEX	0.125 MG TABLET	Increased to Tier 3
MIRAPEX	0.25 MG TABLET	Increased to Tier 3
MIRAPEX	0.5 MG TABLET	Increased to Tier 3
MIRAPEX	1 MG TABLET	Increased to Tier 3

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Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
MIRAPEX	1.5 MG TABLET	Increased to Tier 3
MOTOFEN	1-0.025MG TABLET	Increased to Tier 3
MOZOBIL	20mg/ml injection	Add Quantity Limit
MYCAMINE	all strengths	Increased to Tier 4
MYFORTIC	all strengths	Increased to Tier 3
MYOBLOC	all strengths	Add Quantity Limit
TYSABRI	300/15ml injection	Add Prior Authorization
NEPTAZANE	25 MG TABLET	Increased to Tier 3
NICOTROL	10 MG CARTRIDGE	Increased to Tier 3
NICOTROL NS	10 MG/ML SPRAY	Increased to Tier 3
NIPENT	10 MG VIAL	Increased to Tier 4
NOXAFIL	200 MG/5M ORAL SUSP	Increased to Tier 4
NPLATE	250MCG VIAL	Add Quantity Limit
OXALIPLATIN	50 MG/10ML VIAL	Increased to Tier 4
OXSORALEN-ULTRA	10 MG CAPSULE	Increased to Tier 4
PANCRECARB	all strengths	Increased to Tier 3
PANRETIN	0.1% GEL	Increased to Tier 4
PATADAY	0.2 % DROPS	Increased to Tier 3
PATANOL	0.1% DROPS	Increased to Tier 3
PENTOSTATIN	10 MG VIAL	Increased to Tier 4
PROMACTA	all strengths	Add Quantity Limit
QUALAQUIN	325mg CAPSULES	Add Quantity Limit
RANEXA	all strengths	Add Quantity Limit
RAPAFLO	all strengths	Increased to Tier 3
RAPAMUNE	1 MG TABLET	Increased to Tier 4
RAPAMUNE	1 MG/ML SOLUTION	Increased to Tier 4
RAPAMUNE	2 MG TABLET	Increased to Tier 4

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PART D OPEN FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
REGONOL	5 MG/ML AMPUL	Increased to Tier 2
REGRANEX	0.01% gel	Add Quantity Limit
REVATIO	20mg TABLETS	Add Quantity Limit
REYATAZ	all strengths	Increased to Tier 4
RIBAPAK	all strengths	Increased to Tier 4
RILUTEK	50 MG TABLET	Increased to Tier 4
RITUXAN	10 MG/ML VIAL	Increased to Tier 4
ROMIDEPSIN	10mg VIAL	Add Prior Authorization
SANCUSO	3.1MG/24 HOUR PATCH	Add Quantity Limit
SELZENTRY	all strengths	Increased to Tier 4
SENSIPAR	60 MG TABLET	Increased to Tier 4
SENSIPAR	90 MG TABLET	Increased to Tier 4
SEROMYCIN	250 MG CAPSULE	Increased to Tier 3
SIMPONI	50MG/0.5ML injection	Add Quantity Limit
STELARA	all strengths	Add Quantity Limit
SYNAREL	2 MG/ML SPRAY	Increased to Tier 4
TARGRETIN	1 % GEL (GM)	Increased to Tier 4
TARGRETIN	75 MG CAPSULE	Increased to Tier 4
TAXOTERE	FNL 20MG/2 VIAL	Increased to Tier 4
TAZICEF IN DEXTROSE	1G/50ML FROZ. PIGGY	Increased to Tier 2
TAZICEF IN DEXTROSE	2G/50ML FROZ. PIGGY	Increased to Tier 2
TESTOSTERONE ENANTHATE	200MG/ML INJECTION	Add Quantity Limit
TESTRED	10 MG CAPSULE	Increased to Tier 3
TETANUS TOXOID ADSORBED	5LF/0.5ML VIAL	Increased to Tier 2
TETRABENAZINE	all strengths	Add Prior Authorization

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Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
TIMOPTIC	0.5 % DROPS	Increased to Tier 3
TIMOPTIC OCUDOSE	0.5 % DROPERETTE	Increased to Tier 3
TOCILIZUMAB	all strengths	Add Prior Authorization
TRANSDERM-SCOP	1.5MG/72HR PATCH/72H	Increased to Tier 3
TRAVATAN Z	0.004% DROPS	Add Quantity Limit
TRELSTAR	22.5 MG VIAL	Increased to Tier 4
TRELSTAR DEPOT	3.75 MG DISP SYRIN	Increased to Tier 4
TRELSTAR LA	11.25MG DISP SYRIN	Increased to Tier 4
TRETINOIN	10 MG CAPLUSE	Increased to Tier 4
TREXIMET	85MG-500MG TABLET	Increased to Tier 3
TRIDESILON	0.05% CREAM (GM)	Increased to Tier 3
TRIDESILON	0.05% OINT. (GM)	Increased to Tier 3
TYKERB	250 MG TABLET	Increased to Tier 4
TYSABRI	300MG/15ML VIAL	Add Quantity Limit
ULESFIA	5% LOTION	Add Quantity Limit
ULTRASE	250 MG CAPSULE DR	Increased to Tier 3
URIN D.S.	81.6-10.8 TABLET	Increased to Tier 3
VANCOGIN HCL	125 MG CAPSULE	Increased to Tier 4
VANCOGIN HCL	250 MG CAPSULE	Increased to Tier 4
VANCOMYCIN HCL	500MG PIGGYBACK	Increased to Tier 3
VARENICLINE	all strengths	Add Prior Authorization
VELCADE	3.5MG VIAL	Increased to Tier 4
VESICARE	all strengths	Increased to Tier 3
VFEND	200 MG TABLET	Increased to Tier 4
VFEND	200 MG/5ML ORAL SUSPENSION	Increased to Tier 4
VFEND	50 MG TABLET	Increased to Tier 4
VICTOZA	0.6MG/0.1 PEN INJCTR	Increased to Tier 3

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PART D OPEN FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
VIDAZA	100 MG VIAL	Increased to Tier 4
VIMPAT ORAL TABLETS	all strengths	Add Quantity Limit
VIVITROL	380MG SUS SR REC	Increased to Tier 4
XALATAN	0.005% DROPS	Add Quantity Limit
XENAZINE	all strengths	Add Quantity Limit
XOLAIR	150MG VIAL	Add Quantity Limit
XYLOCAINE-MPF	40 MG/ML AMPUL	Increased to Tier 3
ZANOSAR	1 G VIAL	Increased to Tier 4
ZENPEP	all strengths	Increased to Tier 3
ZODERM	8.5%-10% CREAM (ML)	Increased to Tier 3
ZOFRAN	2 MG/ML VIAL	Increased to Tier 4
ZOFRAN IR	all strengths	Increased to Tier 4
ZOFRAN ODT	all strengths	Increased to Tier 4
ZOLINZA	100 MG CAPSULE	Increased to Tier 4

PART D CLOSED FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Strengths or Dosage Forms	Description of Change(s)
ACANYA	1.2%-2.5% GEL (GM)	Increased to Tier 2
ACTEMRA	all strengths	Add Quantity Limit
ACTHAR H.P.	80 units/ml VIAL	Add Quantity Limit
ALDARA	5 % PACKET	Remove from Formulary

2011 PART D FORMULARY CHANGE NOTIFICATION

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PART D CLOSED FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Strengths or Dosage Forms	Description of Change(s)
ALLEGRA-D	all strengths	Remove from Formulary
ALPHAGAN P	0.15 % DROPS	Remove from Formulary
AMPYRA	10MG ER TABLETS	Add Quantity Limit
ANDROID	10 MG CAPSULE	Remove from Formulary
ANUSOL-HC	2.5 % CREAM (GM)	Remove from Formulary
APEXICON	0.05% OINT. (GM)	Remove from Formulary
ARZERRA	100MG/MG VIAL	Add Quantity Limit
ASACOL	400 MG TABLET DR	Remove from Formulary
BOTOX	100 & 200 UNIT VIAL	Increased to Tier 4 with QL
CAFERGOT	1MG-100MG TABLET	Remove from Formulary
CARDENE I.V	25 MG/10ML AMPUL	Remove from Formulary
CHANTIX	all strengths	Add Quantity Limit
CHENODAL	250mg TABLETS	Add Quantity Limit
CHORIONIC GONADOTROPIN	10000 UNIT VIAL	Remove from Formulary
CIMZIA	200mg/ml injection	Add Quantity Limit
CINRYZE	500 units vial	Add Quantity Limit
CORVERT	0.1 MG/ML VIAL	Remove from Formulary
COZAAR	all strengths	Remove from Formulary
CREON	10, 20 and 5 CAPSULES	Remove from Formulary
EFFEXOR XR	all strengths	Remove from Formulary
ENBREL	all strengths	Add Quantity Limit
FENTANYL CITRATE BUCCAL	all strengths	Increased to Tier 2
FLOMAX	0.4 MG CAP. SR 24H	Remove from Formulary
FLUDARABINE PHOSPHATE	50 MG VIAL	Increased to Tier 2

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PART D CLOSED FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Strengths or Dosage Forms	Description of Change(s)
FLUDARABINE PHOSPHATE	50 MG/2 ML VIAL	Increased to Tier 2
FURADANTIN	25 MG/5 ML ORAL SUSP	Remove from Formulary
GALANTAMINE HYDROBROMIDE	all strengths	Add Quantity Limit
HUMIRA	all strengths	Add Quantity Limit
HYZAAR	all strengths	Remove from Formulary
IMIQUIMOD	5 % PACKET	Increased to Tier 2
INDOCIN I.V.	1 MG TAB DS PK	Remove from Formulary
INNOHEP	20000/ML VIAL	Remove from Formulary
IRINOTECAN HCL	40MG/2ML VIAL	Increased to Tier 2
LAMICTAL (GREEN)	25(84)-100 TAB DS PK	Remove from Formulary
LAMICTAL (ORANGE)	25(42)-100 CAPSULE DR	Remove from Formulary
LUMIGAN	all strengths	Add Quantity Limit
MELPHALAN HCL	50 MG VIAL	Increased to Tier 2
METHITEST	10 MG TABLER	Remove from Formulary
METRO IV	500MG/0.1L PIGGYBACK	Remove from Formulary
MIRAPEX	0.125 MG TABLET	Remove from Formulary
MIRAPEX	0.25 MG TABLET	Remove from Formulary
MIRAPEX	0.5 MG TABLET	Remove from Formulary
MIRAPEX	1 MG TABLET	Remove from Formulary
MIRAPEX	1.5 MG TABLET	Remove from Formulary
MOTOFEN	1-0.025MG TABLET	Remove from Formulary
MOZOBIL	20mg/ml injection	Add Quantity Limit
MYOBLOC	all strengths	Add Quantity Limit
TYSABRI	300/15ml injection	Add Prior Authorization
NEPTAZANE	25 MG TABLET	Remove from Formulary

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PART D CLOSED FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Strengths or Dosage Forms	Description of Change(s)
NICOTROL NS	10 MG/ML SPRAY	Remove from Formulary
NPLATE	250MCG VIAL	Add Quantity Limit
OXALIPLATIN	50 MG/10ML VIAL	Increased to Tier 2
PANCREASE MT	all strengths	Remove from Formulary
PANCRECARB MS	all strengths	Remove from Formulary
PANCRELIPASE EC	all strengths	Remove from Formulary
PENTOSTATIN	10 MG VIAL	Increased to Tier 2
PROMACTA	all strengths	Add Quantity Limit
QUALAQUIN	325mg capsules	Add Quantity Limit
RANEXA	all strengths	Add Quantity Limit
RAPAFLO	all strengths	Remove from Formulary
REGONOL	5 MG/ML AMPUL	Increased to Tier 2
REGRANEX	all strengths	Add Quantity Limit
REVATIO	20mg tablets	Add Quantity Limit
RIBAPAK	all strengths	Increased to Tier 2
ROMIDEPSIN	10mg vial	Add Prior Authorization
SANCUSO	3.1MG/24 HOUR PATCH	Add Quantity Limit
SIMPONI	50MG/0.5ML	Add Quantity Limit
STELARA	all strengths	Add Quantity Limit
TAZICEF IN DEXTROSE	1G/50ML FROZ. PIGGY	Increased to Tier 2
TAZICEF IN DEXTROSE	2G/50ML FROZ. PIGGY	Increased to Tier 2
TESTOSTERONE ENANTHATE	200MG/ML INJECTION	Add Quantity Limit
TESTRED	10 MG CAPSULE	Remove from Formulary
TETANUS TOXOID ADSORBED	5LF/0.5ML VIAL	Increased to Tier 2
TETRABENAZINE	all strengths	Add Prior Authorization

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PART D CLOSED FORMULARY 2011 – NEGATIVE CHANGES

Name of Affected Drug	Change(s) Limited to Specific Strengths or Dosage Forms	Description of Change(s)
TIMOPTIC	0.5 % DROPS	Remove from Formulary
TIMOPTIC OCUDOSE	0.5 % DROPERETTE	Remove from Formulary
TOCILIZUMAB	all strengths	Add Prior Authorization
TRANSDERM-SCOP	1.5MG/72HR PATCH/72H	Remove from Formulary
TRAVATAN Z	0.004% DROPS	Add Quantity Limit
TRETINOIN	10 MG CAPLUSE	Increased to Tier 2
TREXIMET	85MG-500MG TABLET	Remove from Formulary
TRIDESILON	0.05% CREAM (GM)	Remove from Formulary
TRIDESILON	0.05% OINT. (GM)	Remove from Formulary
TYSABRI	300MG/15ML VIAL	Add Quantity Limit
ULESFIA	5% LOTION	Add Quantity Limit
ULTRASE	250 MG CAPSULE DR	Remove from Formulary
URIN D.S.	81.6-10.8 TABLET	Remove from Formulary
VARENICLINE	all strengths	Add Prior Authorization
VESICARE	all strengths	Remove from Formulary
VIMPAT ORAL TABLETS	all strengths	Add Quantity Limit
XALATAN	0.005% DROPS	Add Quantity Limit
XENAZINE	all strengths	Add Quantity Limit
XOLAIR	150MG VIAL	Add Quantity Limit
XYLOCAINE-MPF	40 MG/ML AMPUL	Remove from Formulary
ZENPEP	all strengths	Remove from Formulary
ZODERM	8.5%-10% CREAM (ML)	Remove from Formulary

2011 PART D FORMULARY CHANGE NOTIFICATION

Positive Formulary Changes January 1st, 2011:

PART D OPEN FORMULARY 2011 – POSITIVE CHANGES		
Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
CYCLOSPORINE OPHTHALMIC	all strengths	Remove Prior Authorization Required
ELIGARD	30 MG DISP SYRIN	Decrease to Tier 2
ELIGARD	7.5 MG DISP SYRIN	Decrease to Tier 2
FRAGMIN	2500/0.2ML DISP SYRIN	Decrease to Tier 2
FRAGMIN	5000/0.2ML DISP SYRIN	Decrease to Tier 2
FRAGMIN	7500/0.3ML DISP SYRIN	Decrease to Tier 2
INVEGA SUSTENNA	39MG/0.25 DISP SYRIN	Decrease to Tier 2
INVEGA SUSTENNA	78MG/0.5ML DISP SYRIN	Decrease to Tier 2
VALCYTE	50 MG/ML SOLN RECON	Decrease to Tier 2
VFEND IV	200 MG VIAL	Decrease to Tier 2

PART D CLOSED FORMULARY 2011 – POSITIVE CHANGES		
Name of Affected Drug	Change(s) Limited to Specific Dosage Forms	Description of Change(s)
XENAZINE	all strengths	Add to Formulary Tier 2