UC SHIP Premium Formulary

Effective September 1, 2016
Formulary

A formulary identifies the drugs available for certain conditions and organizes them into cost levels, also known as tiers. An important part of the Formulary is providing choices so you and your doctor can choose the best course of treatment.

Go to [http://www.ucop.edu/ucship/](http://www.ucop.edu/ucship/) or [optumrx.com/mycatamaranrx](http://optumrx.com/mycatamaranrx) for complete and up-to-date drug information

Since the Formulary may change, we encourage you to visit one of the websites above or you reach a representative 24/7 by calling (844) 265-1879. The website is the best source for up-to-date information about all of the medications your pharmacy benefit covers, possible lower-cost options and cost comparisons.
How to use a Formulary?

When choosing a medication, you and your doctor should consult the Formulary. It will help you and your doctor choose the most cost-effective prescription drugs.

What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, which is determined by your plan sponsor. This is how much you will pay when you fill a prescription. Tier 1 medications are your lowest-cost options. If your medication is placed in Tier 2 or 3, check to see if there is a Tier 1 option available. Discuss these options with your doctor.

Check your benefit plan documents to find out your specific pharmacy plan costs.

<table>
<thead>
<tr>
<th>$</th>
<th>Drug Tier</th>
<th>Includes</th>
<th>Helpful Tips</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Tier 1 Lowest Cost</td>
<td>Lower-cost, commonly used generic drugs. Some low-cost brands may be included.</td>
<td>Use Tier 1 drugs for the lowest out-of-pocket costs.</td>
</tr>
<tr>
<td></td>
<td>Tier 2 Mid-range Cost</td>
<td>Many common brand-name drugs, called preferred brands.</td>
<td>Use Tier 2 drugs, instead of Tier 3, to help reduce your out-of-pocket costs.</td>
</tr>
<tr>
<td></td>
<td>Tier 3 Highest Cost</td>
<td>Mostly higher-cost brand drugs, also known as non-preferred brands.</td>
<td>Many Tier 3 drugs have lower-cost options in Tier 1 or 2. Ask your doctor if they could work for you.</td>
</tr>
</tbody>
</table>

When does the Formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when its generic becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 or July 1 of each year.

When a medication changes tiers, you may have to pay a different amount for that medication.
Programs and Limits

Some medications have a program or limit. Your benefit plan determines how these medications may be covered for you.

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PA</td>
<td><strong>Prior Authorization</strong> – Your doctor is required to provide additional information to determine coverage.</td>
</tr>
<tr>
<td>ST</td>
<td><strong>Step Therapy</strong> – Trial of lower cost medication(s) is required before a higher-cost medication is covered.</td>
</tr>
<tr>
<td>QL</td>
<td><strong>Quantity Limits</strong> – Amount of medication covered per copayment or in a specific time period.</td>
</tr>
<tr>
<td>AR</td>
<td><strong>Age Restrictions</strong> – Some restrictions may apply based on patient age.</td>
</tr>
<tr>
<td>SP</td>
<td><strong>Specialty Medication</strong> – Medication is designated as a specialty pharmacy drug.</td>
</tr>
<tr>
<td>GR</td>
<td><strong>Gender Restrictions</strong> – Some restrictions may apply based on gender.</td>
</tr>
<tr>
<td>E</td>
<td><strong>Excluded</strong> – May be excluded from coverage or subject to prior authorization. Lower-cost options are available and covered.</td>
</tr>
</tbody>
</table>

**Why are some medications excluded from coverage?**

Medications may be excluded from coverage under your pharmacy benefit when they work the same as or similar to another prescription medication or an over-the-counter (OTC) medication. There may be other medication options available.

**What is the difference between brand-name and generic medications?**

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent of a brand-name medication ends, the FDA can approve a generic version with the same active ingredients. These types of medications are known as generic medications. Sometimes the same company that makes a brand-name medication also makes the generic version.

**What if my doctor writes a brand-name prescription?**

The next time your doctor gives you a prescription for a brand-name medication, ask if a generic equivalent or lower-cost option is available and if it might be right for you. Generic medications are usually your lowest-cost option, but not always.
**Specialty Medications**

Specialty medications treat rare or complex conditions and are typically higher cost medications. Please note, not all specialty medications are listed in the Formulary.

**We are here to help!**

Since the Formulary may change during your plan year, we encourage you to visit [http://www.ucop.edu/ucship/](http://www.ucop.edu/ucship/) or [optumrx.com/mycatamaranrx](http://optumrx.com/mycatamaranrx) for complete and up-to-date drug information. You can also reach a representative 24/7 by calling (844) 265-1879.

When you register at [optumrx.com/mycatamaranrx](http://optumrx.com/mycatamaranrx) and open an account, you can use the website’s helpful tools and features to:

- Look up the price of drugs covered by your plan
- Find lower-cost options
- View your claims history
- Sign up for text reminders to take and refill your medicine
- View your benefits in real time