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P.O. Box 52056 Phoenix, AZ 85072

October 11, 2019

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IMPORTANT NOTICE:
A Change to your Prescription Drug Coverage

Dear TRICARE Beneficiary:

On **November 27**, **2019**, the over the counter drug(s) listed below will move from a preferred drug status to a non-covered status. **This means that you will pay the full cost for the over the counter (OTC) drugs that are not covered.**

OMEPRAZOLE

What Should You Do?

If you are no longer taking the above drug(s), then you don't need to do anything at this time.

- 1. Review the enclosed information called "Options for You and Your Doctor to Consider."

 This document provides the OTC drug that is no longer covered, preferred prescription alternatives, and associated cost information.
- 2. Discuss this information with your doctor to see which of the following options is best for you:
 - Switch to a preferred alternative prescription drug OR
 - Continue your non-covered OTC drug by obtaining at a retail pharmacy and pay 100% of the cost of the drug.

Why the Change?

The Defense Health Agency regularly reviews the coverage of drugs. This change isn't the result of any issue with the over the counter drug(s) themselves. *You may continue to purchase the drug(s) over the counter, but you will pay the full cost.* We encourage you to consult with your doctor if you have questions about modifying any medications and supplements you take.

Who Should You Contact If You Have Questions?

If you have any questions about your pharmacy benefit or you need help, please visit <u>express-scripts.com/TRICARE</u> or call 877.363.1303.

Sincerely,

Jay Peloquin, PharmD, BCPS Director, Clinical Account Management

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Options for You and Your Doctor to Consider

On **November 27, 2019, OMEPRAZOLE**, will move to a non-covered status on the TRICARE benefit. Any prior authorization (PA) or medical necessity (MN) your drug currently has will no longer apply. You will pay 100% of the drug cost if you continue to fill your prescription of your non-covered OTC drug. The cost you pay for your non-covered OTC drug will not apply to your TRICARE catastrophic cap. Carefully read the information below to understand your options.

Switch to a preferred drug.

Preferred Drug	Military Treatment Facility	Home Delivery	Retail Network Pharmacy
		Your cost (up to a 90-day supply)	
Generic Drugs: • Prescription Omeprazole (Capsule, Delayed Release)	\$O	\$7	\$33
Prescription Pantoprazole (Tablet, Enteric Coated)			

Continue taking your current non-covered drug.

Non-Covered Drug(s)	Military Treatment Facility	Home Delivery	Retail Network Pharmacy
	Your cost		
OTC Omeprazole (Tablet, Enteric Coated) OTC Omeprazole Magnesium (Capsule, Delayed Release)	NOT AVAILABLE	NOT AVAILABLE	100% of the cost of the drug.

More Information

For more information on TRICARE-covered drugs, any restrictions, and to find forms for prior authorization and medical necessity, visit <u>express-scripts.com/tricareformulary</u>.