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July 16, 2020

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## IMPORTANT NOTICE: A Change to Your Prescription Drug Coverage

Dear TRICARE Beneficiary:

On August 26, 2020, the prescription drug you're taking below moves from preferred to non-preferred drug status. This means you'll pay a higher cost for your drug(s) unless you switch to the preferred alternative.

### KETOPROFEN

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

### If you are taking this drug, what should you do?

- Review the enclosed information called "Options for You and Your Doctor to Consider."  
*This document provides a list of drugs that are no longer preferred, that are preferred alternatives, and associated cost information.*
- Discuss this information with your doctor to see which of the following options is best for you:
  - Switch your prescription to a preferred alternative drug, which will cost you less.
  - Continue filling your current prescription and pay a higher cost.

### Why the Change?

The Defense Health Agency regularly reviews the list of TRICARE-covered prescription drugs to see if there are other drugs that are just as effective and cost less. After a recent clinical review with patients' health and wellness in mind, the Defense Health Agency recommends an alternative drug.

### Who Should You Contact If You Have Questions?

If you have any questions about your pharmacy benefit or you need help, please visit [express-scripts.com/TRICARE](http://express-scripts.com/TRICARE) or call 877.363.1303.

Sincerely,

Jay Peloquin, PharmD, BCPS  
Director, Clinical Account Management  
Express Scripts

- Download the Express Scripts™ mobile app for free today! Our easy-to-use mobile app puts your TRICARE® prescription benefit in the palm of your hand.
- Follow us on social media! Add MilitaryRx on [Facebook](#) and [Twitter](#) for health tips, plan info and updates about your pharmacy benefit.

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## Options for You and Your Doctor to Consider

On August 26, 2020, the cost you will pay for the drug below will change. Carefully read the information below to understand your options.

### KETOPROFEN

#### Switch to a preferred drug.

Preferred Drug(s)	Military Treatment Facility	Home Delivery	Retail Network Pharmacy
	<u>Your cost</u> (up to a 90-day supply)		
<b>Generic Drugs:</b> <ul style="list-style-type: none"> <li>• Celecoxib (Capsule)</li> <li>• Diclofenac Potassium (Tablet)</li> <li>• Diclofenac Sodium (Tablet, Extended Release)</li> <li>• Diflunisal (Tablet)</li> <li>• Etodolac (Capsule, Tablet)</li> <li>• Flurbiprofen</li> <li>• Ibuprofen 400mg, 600mg, 800mg (Tablet)</li> <li>• Indomethacin ER (Capsule)</li> <li>• Indomethacin IR 25mg, 50mg (Capsule)</li> <li>• Ketorolac (Tablet)</li> <li>• Mefenamic Acid (Capsule)</li> <li>• Meloxicam (Tablet)</li> <li>• Nabumetone (Tablet)</li> <li>• Naproxen 250mg, 375mg, 500mg (Tablet)</li> <li>• Oxaprozin (Tablet)</li> <li>• Piroxicam (Capsule)</li> <li>• Sulindac (Tablet)</li> </ul>	\$0	\$10	\$39

#### Continue taking your current non-preferred drug.

Non-Preferred Drug(s)	Military Treatment Facility	Home Delivery	Retail Network Pharmacy
	<u>Your cost</u> (up to a 90-day supply)		
<ul style="list-style-type: none"> <li>• Fenoprofen (Tablet)</li> <li>• Indocin (Oral Suspension)</li> <li>• Indomethacin (Oral Suspension)</li> <li>• Ketoprofen (Capsule, Capsule Extended Release Pellets))</li> <li>• Meclofenamate (Capsule)</li> <li>• Nalfon (Tablets)</li> <li>• Tolmetin (Tablet, Capsule)</li> </ul>	\$0  Note: May not be available. Contact your Military Treatment Facility to verify they carry the drug.	\$60	\$180

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## How to Contact your Military Treatment Facility's Pharmacy

Visit [Tricare.mil/FindDoctor/mtf](https://www.tricare.mil/FindDoctor/mtf) and type in your ZIP Code or Facility/Installation Name. After clicking on the name, the pharmacy's information, including phone number and hours of operation, will be displayed on the far right side of the web page.

## Prior Authorization (PA)

Prior authorization (PA) is a routine review process to ensure that the requested drug is safe, cost effective, and medically required. Without an approved PA, you will pay the full cost of the drug through Home Delivery and at Retail Network pharmacies. The drug may not be available at the Military Treatment Facility. The PA remains valid until it expires or a change is made to its criteria requirements by the Department of Defense (DoD) Pharmacy and Therapeutics (P&T) Committee.

For drugs that require a PA, ask your doctor to submit the request(s) electronically through a simple process called Electronic Prior Authorization (ePA). The doctor's office can learn more about ePA at <https://providerportal.surescripts.net/ProviderPortal/dod> or [covermymeds.com/epa/express-scripts](https://covermymeds.com/epa/express-scripts) or by calling the Express Scripts doctor line at 866.684.4488 for assistance.

## Medical Necessity (MN)

If you continue to take a non-preferred drug, your doctor may also submit a Medical Necessity (MN) request. Medical necessity is a set of criteria established by the DoD Pharmacy and Therapeutics (P&T) Committee for each non-formulary drug. If you meet the criteria and your MN request is approved, the non-preferred drug will be dispensed to you at the preferred drug cost share at Home Delivery and Retail Network pharmacies. A MN request must be completed from a Military Treatment Facility provider to obtain a non-preferred medication from a Military Treatment Facility pharmacy.

## More Information

For more information on TRICARE-covered drugs, any restrictions, and to find forms for prior authorization and medical necessity, visit [express-scripts.com/tricareformulary](https://www.express-scripts.com/tricareformulary).



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