

P.O. Box 52056 Phoenix, AZ 85072

April 7, 2022
2022060774 - 1
John Q. Public
100 Any Street
Any St. Apartments
7th Floor
Any City, MO 55555-4444





# IMPORTANT NOTICE: A Change to your Prescription Drug Coverage

### Dear TRICARE Beneficiary:

On May 18, 2022, **Clemastine 0.5mg/5ml (Syrup)**, a prescription drug(s) you're taking, will no longer be covered by TRICARE in the same way it has in the past. Your doctor will be required to submit a prior authorization (PA) on or after May 18, 2022 or you will have to pay 100% of the cost of the drug(s).

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, a list of drugs that are preferred alternatives and associated cost information.
- 2. 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.
  - Talk to your doctor about requesting a prior authorization. If the criteria requirements have been met, your prior authorization may be approved.
  - Continue filling your current prescription without a prior authorization and pay 100% of the cost of the drug.

#### Why the change?

The Defense Health Agency regularly reviews drugs and has determined your drug now requires a prior authorization. A prior authorization is a routine process that ensures requested drugs are safe, cost effective, and medically required.

please see other side

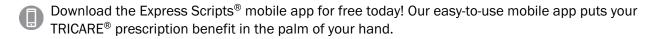
# Who should you contact if you have questions?

If you have any questions about your pharmacy benefit or you need help, please visit militaryrx.express-scripts.com or call 877.363.1303.

Sincerely,



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





Express Scripts manages your TRICARE prescription benefit.



# Options for You and Your Doctor to Consider

On May 18, 2022, your doctor will be required to submit a prior authorization (PA) for Clemastine 0.5mg/5ml (Syrup). Any PA approval your drug currently has will no longer apply. Without a new PA you will pay 100% of the drug cost. If the PA is approved, you will pay the applicable cost. Carefully read the information below to understand your options.

# Switch to the alternative drug.

	Military Treatment Facility	Home Delivery	Retail Network Pharmacy
		Your cost (up to a 90-day supply)	
Generic Preferred Drugs	4.0		
Cetirizine (Tablet)	\$0	\$12	\$42
Clemastine (Tablet)			
Cyproheptadine (Syrup, Tablet))			
• Fexofenadine (Tablet)			
Loratadine (Tablet)			

# Continue taking your current drug if new PA is approved.

Non-Preferred Drug(s) PA Required	Military Treatment Facility	Home Delivery	Retail Network Pharmacy	
	<u>Your cost</u>			
	(up to a 90 day supply)			
	\$0	\$12	\$42	
Clemastine 0.5mg/5ml     (Syrup)				
(Syrup)	Note: May not be	OR	OR	
	available. Contact your Military Treatment Facility to verify they carry the drug.	100% of the cost of the drug without an approved prior authorization.	100% of the cost of the drug without an approved prior authorization.	

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

Visit <u>Tricare.mil/FindDoctor/mtf</u> 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 <a href="https://providerportal.surescripts.net/ProviderPortal/dod">https://providerportal.surescripts.net/ProviderPortal/dod</a> or <a href="mailto:covermymeds.com/epa/express-scripts">covermymeds.com/epa/express-scripts</a> or by calling the Express Scripts doctor line at 866.684.4488 for assistance.

#### **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.

