



PHARMACY BENEFIT SUMMARY

01/01/2020

Prepared For:



Welcome...

Effective: 01/01/2020

to EHIM's Prescription Benefit Program!

We are excited to serve you and would like to introduce you to our program before your benefits begin.

EHIM has a national pharmacy network, therefore, you can receive your medications through any local retail pharmacy of your choosing. If you ever encounter a pharmacy not in our network, please call the pharmacy help desk and we will enroll the pharmacy into the network.

You will be receiving an ID Card to use at the pharmacy. The ID card will have the employee's name on every card. All of the ID cards are interchangeable between family members. All members who are 18 or older will receive a card. If an additional ID card is required, please notify your HR Director or call the EHIM Pharmacy Help Desk at 800-311-3446 to request additional cards.

Summary of Copayments

Copayments are the dollar amount which will be collected at the pharmacy every time you receive a prescription. Generally, your copayment will be lowest for generic prescriptions and highest for medications that are considered Non-Preferred under your plan design. Below highlights your plan's copay levels:

HSA Plan

50% after deductible	Copayment on any generic medication
50% after deductible	Copayment on any Preferred Brand Medication
50% after deductible	Copayment on any Non-Preferred Brand Medication
50% after deductible	Copayment on any Multi-Source Brand Medication (Brand Name Drugs that are dispensed when an exact generic is available) The <i>physician</i> will indicate "DAW" or "Dispense as Written" on the prescription.
50% after deductible	Copayment plus the difference in cost between the brand & generic on any Multi-Source Brand Prescription (Brand Name Drugs that are dispensed when an exact generic is available) The <i>patient</i> indicates the brand to be dispensed. DAW penalty does not count towards the OOP Max
50% after deductible	Copayment on all Specialty Medications (Example: Oncology, Multiple Sclerosis, Organ Transplant) Please contact EHIM at 800-311-3446
Generic 50% after deductible Brand 50% after deductible NP Brand 50% after deductible	Standard Copayment for all eligible maintenance medication filled in a three month supply. Brand & Generic eligible maintenance medications can be filled through the Local Retail Pharmacy or through Mail Order in order to obtain them in a 3 month supply.
Single \$6,350 Family \$12,700	Out of Pocket Maximum: Once a member/contract spends the maximum in medical spend and pharmacy copays that member/contract will have a \$0 copay on all covered medications for the rest of the plan year. One person in a 2-person/Family contract will be capped at the single amount and the rest of the members under that contract will have to meet the other single max combined.

Customer Service

800-311-3446

EHIM's primary mission is to provide our members with the best customer service possible. If you are experiencing a problem **filling a retail or mail order prescription**, contact EHIM's Pharmacy Help Desk.

For your convenience, our help desk has a representative available **24 hours a day, 7 days a week, 365 days a year**.

Our toll free number is **printed on the front of your ID card** for easy reference.

Summary of Deductibles

- Members must meet the deductible from combined medical & pharmacy spend.
- Once the deductible has been satisfied, members will pay the applicable copayment on all prescription medications for the rest of the plan year until the out-of-pocket maximum is met.

\$5,000 / \$10,000 (Single/Family)

Deductible (In Network)

Quantity Limits for Certain Medications

Certain medications under your program may be subject to quantity limits. Medications that are subject to quantity limits are to help ensure these medications are not utilized inappropriately or recommended maximum dosages are not exceeded. EHIM's Quantity Limitations are based on FDA-approved dosing recommendations, pharmaceutical guidelines and have been reviewed and approved by our licensed, clinical staff.

EHIM Maintenance List (Three Month Supplies)

EHIM has a list of commonly used medications that are eligible to be filled in higher quantities (three month supplies) This list of medications approved to be filled in three month supplies is known as EHIM's Maintenance List. This list is extensive, yet does NOT include every single medication. Types of medications found on the maintenance list are: Insulin, Blood Pressure medications, Heart medications, Cholesterol medications, and Thyroid medications. Your physician must write for a three month supply of medication to be dispensed at one time. You may pick up your three month supply at any participating retail pharmacy. To determine whether or not your medication is on the Maintenance List, please contact our Pharmacy Help Desk at 800-311-3446.

AllianceRx Walgreens Prime Mail Order

EHIM offers a mail order program through AllianceRx Walgreens Prime Mail Order which allows you to receive a three month supply (61-90 days maximum) for the plan's designated number of copays. The program includes maintenance medications covered under the Prescription Plan. Prescriptions can be ordered through the AllianceRx Walgreens Prime website (www.alliancerxwp.com) or by completing a hard copy prescription order form. You must complete a registration form for AllianceRx Walgreens Prime prior to your prescription being filled. Included in the mail order brochure are step by step instructions on how to fill your first prescription. You may contact EHIM at 800-311-3446 for assistance with registering with AllianceRx Walgreens Prime, or you may contact AllianceRx Walgreens Prime directly at 800-345-1985.

Non-Preferred Drug List (50% after deductible Copay)

Some medications under this program are classified as "Non-Preferred". This means there are alternative medications which are therapeutically equivalent. If your physician writes for a medication that is part of our Non-Preferred List, you may want to discuss alternative medications that are just as effective.

EHIM Pharmacy Network

EHIM has over 62,000 participating pharmacies across the country including all of the major chain pharmacies, regional pharmacies and most independent pharmacies. You may visit our website at www.ehimrx.com for our National Pharmacy Directory and Pharmacy Locator tool.

EHIM Pharmacy Help Desk

EHIM's Pharmacy Help Desk is available for your convenience 24 hours a day, 7 days per week, 365 days per year. Our toll free number is (800) 311-3446 and will be printed on the back of your ID card and on all of our communication pieces. If you have any questions regarding your benefits or just need help finding a participating pharmacy, please contact our Pharmacy Help Desk. You may also contact our helpdesk through our website at www.ehimrx.com.

In an effort to support the wellness of our employees, we are pleased to announce that we are offering a Smoking Cessation program! The smoking cessation benefits will include the following:

Both over the counter (OTC) medications and prescription medications are covered!

SAMPLE OF OVER-THE-COUNTER (OTC) MEDICATIONS INCLUDED:

• Commit 2mg Lozenges	\$0	• Nicotine 21/24 Hr. TD Patch	\$0
• Commit 4mg Lozenges	\$0	• Nicotine Polacrilex 2mg (Nicotine Gum)	\$0
• Nicotine 7/24 Hr. TD Patch	\$0	• Nicotine Polacrilex 4mg (Nicotine Gum)	\$0
• Nicotine 14/24 Hr. TD Patch	\$0		

SAMPLE OF PRESCRIPTION MEDICATIONS INCLUDED:

• bupropion hcl 150mg SA	\$0	• Nicotine Cartridge Inhaler	\$0
• Chantix Continuing Pack	\$0	• Nicotine Nasal Inhaler	\$0
• Chantix Starting Pack	\$0		

Talk to your physician about which treatment may be right for you!

How to Use the Smoking Cessation Program:

1. Talk to your doctor about which anti-smoking treatment may be right for you.
2. Obtain a prescription for either the over the counter (OTC) medication or the prescription strength medication.
3. Present that prescription to the pharmacist.
4. Pharmacist will bill the prescription to EHIM.
5. You will receive the medication for a \$0.00 copay.





Pharmacy Benefits. Managed.

Patient Protection & Affordable Care Act (PPACA) Formulary

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List of Preventive Care Drugs - Covered for \$0.00 copayment

With preventive care services under the Affordable Care Act, several therapeutic classes of medications must have therapies available to members without any member cost-share. In short, the following list of medications are available to members for a \$0 copayment. If a member opts to use a medication within these therapy classes and the medication is NOT listed below, the member will have a cost-share based on the plan design (**50% after deductible Copay on Alternative**). However, in the case of the contraceptives, this list is merely a guide and not all-inclusive. Members are encouraged to speak to their providers regarding the treatment that best fits their needs.

Rx Name	Drug Type	Rx Name	Drug Type
Contraceptives - Oral (\$0.00 Copay)		Contraceptives - Oral (\$0.00 Copay)	
apri	Generic	necon 1/50-28	Generic
aranelle	Generic	necon 10/11-28	Generic
aviane	Generic	necon 7/7/7	Generic
azurette	Generic	nora-BE	Generic
balziva	Generic	norinyl	Generic
camila	Generic	nortrel 0.5/35 (28)	Generic
caziant	Generic	nortrel 1/35 (21)	Generic
cesia	Generic	nortrel 1/35 (28)	Generic
cryselle-28	Generic	nortrel 7/7/7	Generic
enpresse-28	Generic	ocella	Generic
errin	Generic	ogestrel	Generic
gianvi	Generic	orsythia	Generic
gildess FE 1/20	Generic	portia	Generic
gildess FE 1.5/30	Generic	quasense	Generic
heather	Generic	reclipsen	Generic
jolivette	Generic	solia	Generic
jolessa	Generic	sprintec-28	Generic
junel 1/20	Generic	sronyx	Generic
junel FE 1/20	Generic	tilia FE	Generic
junel 1.5/30	Generic	tri-legest FE	Generic
junel FE 1.5/30	Generic	trinessa	Generic
kariva	Generic	tri-sprintec	Generic
kelnor 1/30	Generic	tri-lo-sprintec	Generic
leena	Generic	trivora-28	Generic
levora	Generic	velivet	Generic
low-orgestrel	Generic	zenchent	Generic
lutera	Generic	zenchent FE	Generic
microgestin 1/20	Generic	zovia 1/35E	Generic
microgestin 1.5/30	Generic	zovia 1/50E	Generic
microgestin FE	Generic	Contraceptives - Patch (\$0.00 Copay)	
microgestin FE 1.5/30	Generic	Ortho Evra	Brand
mononessa	Generic	Contraceptives - Ring (\$0.00 Copay)	
necon 0.5/35-28	Generic	Nuvaring	Brand
necon 1/35-28	Generic		

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Rx Name	Drug Type	Rx Name	Drug Type
Contraceptives - Diaphragm (\$0.00 Copay)		Statins (\$0.00 Copay, Men & Women Age 40-75)	
Femcap	Brand	atorvastatin 10mg, 20mg	Generic
Ortho All Flex	Brand	fluvastatin 20mg, 40mg	Generic
Ortho-Diaphragm	Brand	fluvastatin ER 80 mg	Generic
Contraceptives - Emergency (\$0.00 Copay)		lovastatin 10mg, 20mg, 40mg	Generic
levonorgestrel, next choice	Generic	pravastatin 10mg, 20mg, 40mg, 80mg	Generic
Contraceptives - Implantable (\$0.00 Copay)		rosuvastatin 5mg, 10mg, 20mg, 40mg	Generic
Paraguard	Brand	simvastatin 5mg, 10mg, 20mg, 40mg	Generic
Nexplanon	Brand	Preventive Medications (\$0.00 Copay)	
Contraceptives - Injectable (\$0.00 Copay)		aspirin 81mg (males 45-79 yrs, females 55-79 yrs)	Generic
medroxyprogesterone	Generic	folic acid .4mg - .8mg (females 18-45 yrs)	Generic
Smoking Cessation - Oral (\$0.00 Copay)		iron supplement (6mos - 1yr)	Generic
bupropion SR 150 (Zyban)	Generic	oral fluoride (under 5yrs old)	Generic
Chantix Starting Pack	Brand	vitamin D (65 years or older)	Generic
Chantix Continuing Pack	Brand	tamoxifen	Generic
Smoking Cessation - Inhaler (\$0.00 Copay)		Bowel Prep Agents (Men & Women Age 50-75)	
Nicotrol	Brand	gavilyte	Generic
Smoking Cessation - Gum (\$0.00 Copay)		gavilyte N/flavor pack	Generic
Nicotine Gum	OTC	gavilyte-G	Generic
Smoking Cessation - Lozenge (\$0.00 Copay)		PEG 3350/electrolytes	Generic
Nicotine Lozenge	OTC	PEG 3350NACL/NA	Generic
Smoking Cessation - Patch (\$0.00 Copay)		bicarbonate/KCL	Generic
Nicotine Patch	OTC	trilyte	Generic



Medication	Strength	Quantity Limits / 30 Days
Analgesics (Pain)		
Abstral	All strengths	128 tablets
Actiq	All strengths	120 lozenges
Avinza	All strengths	60 capsules
Butrans	All strengths	4 patches
Duragesic	All strengths	20 patches
Embeda	All strengths	60 capsules
Exalgo	All strengths	60 capsules
Fentora	All strengths	120 tablets
Flector	All strengths	60 patches
MS Contin	All strengths	120 tablets
Kadian	All strengths	120 capsules
Nucynta	All strengths	120 tablets
Nucynta ER	All strengths	60 tablets
Onsolis	All strengths	120 films
Opana	All strengths	100 tablets
Opana ER	All strengths	60 tablets
Oramorph	All strengths	120 tablets
Oxycontin	All strengths	120 tablets
Oxecta	All strengths	120 tablets
Oxycodone IR	All strengths	240 capsules
Pennsaid	All strengths	2 (150 ml) btl
Rybix ODT	All strengths	90 tablets
Ryzolt	All strengths	30 tablets
Sprix	All strengths	5 (1.7 g) btl
Ultram	All strengths	240 tablets
Ultram ER	All strengths	30 tablets
Voltaren Gel	All strengths	10 (100 g) tubes
Anticonvulsants (Seizures)		
Lamictal	All strengths	60 tablets
Lamictal XR	All strengths	30 tablets
Migraine Headaches		
Alsuma	6 mg/0.5 ml	4 injector (2 bx)
Amerge	All strengths	9 tablets
Axert	All strengths	9 tablets
Frova	2.5 mg	9 tablets
Imitrex	All strengths	9 tablets
Imitrex Injection	6 mg/0.5 ml	5 vials (1 bx)
Imitrex Kits/Refills	All strengths	2 kits
Imitrex Nasal	All strengths	6 dispensers
Maxalt/Maxalt MLT	All strengths	9 tablets
Migranal	4 mg/ml	1 pk (8 x1 mL btl)

Medication	Strength	Quantity Limits / 30 Days
Relpax	All strengths	9 tablets
Stadol Nasal	All strengths	1 bottle
Sumavel	6 mg/0.5 ml	6 vials (1 bx)
Treximet	85 mg/500 mg	9 tablets
Zomig Nasal	All strengths	1 package (6 btl)
Zomig/Zomig ZMT	All strengths	6 tablets
AntiNausea		
Anzemet	All strengths	10 tablets
Emend	80 mg	4 tablets
Emend	125 mg	2 tablets
Kytril	All strengths	28 tablets
Sancuso	3.1 mg	2 patches
Zofran Solution	4 mg/5 ml	50 ml
Zuplenz	All strengths	20 films
Antipsychotics		
Abilify/ Abilify ODT	All strengths	30 tablets
Fanapt	All strengths	60 tablets
Geodon	All strengths	60 capsules
Invega	All strengths	30 capsules
Latuda	All strengths	30 tablets
Saphris	All strengths	60 tablets
Seroquel	<300 mg	90 tablets
Seroquel	≥300 mg	60 tablets
Seroquel XR	All strengths	60 tablets
Symbyax	All strengths	30 tablets
Zyprexa	All strengths	30 tablets
Zyprexa Zydis	All strengths	30 tablets
Anti-Ulcer Agents (Acid Reflux)		
Aciphex	All strengths	30 tablets
Dexilant	All strengths	30 capsules
Nexium	All strengths	30 capsules
Prevacid	All strengths	30 capsules
Zegerid	All strengths	30 capsules
Bisphosphonates/Anti-Resorptive Agents		
Actonel	35 mg	4 tablets
Actonel	75 mg	2 tablets
Actonel	150 mg	1 tablet
Actonel	5 mg, 30 mg	30 tablets
Actonel/Cal	35 mg/1250 mg	28 tablets
Atelvia	All strengths	4 tablets
Boniva	150 mg	1 tablet
Fosamax	5/10/40 mg	30 tablets
Fosamax	35 mg, 70 mg	4 tablets





Pharmacy Benefits. Managed.

Quantity Limits

Medication	Strength	Quantity Limits / 30 Days
Fosamax/Vitamin D	All strengths	4 tablets
Forteo	All strengths	1 pen
Bronchodilators (Asthma/Breathing)		
Accuneb Neb	All strengths	375 ml
Advair Diskus/HFA	All strengths	1 inh
Albuterol Neb	0.083%	375 ml
Albuterol Neb	0.5%	60 ml
Alvesco	All strengths	1 inh
Arcapta	All strengths	1 box (30 caps)
Asmanex	All strengths	1 inh
Atrovent	All strengths	1 inh
Atrovent Neb	All strengths	300 ml
Azmacort	All strengths	1 inh
Brovana Neb	All strengths	60 vials (120 ml)
Combivent	All strengths	1 inh
Dulera	All strengths	1 inh
Foradil Aerolizer	All strengths	1 inh
Flovent Diskus		
HFA/Rotadisk	All strengths	1 inh
Maxair	All strengths	1 inh
Perforomist	All strengths	60 vials (120 ml)
Pro-Air HFA	All strengths	2 inhs
Proventil HFA	All strengths	2 inhs
Pulmicort Respules	All strengths	60 vials (120 ml)
Pulmicort Turbohaler	All strengths	1 inh
QVAR	All strengths	1 inh
Servent Diskus	All strengths	1 inh
Spiriva	All strengths	1 box
Symbicort	All strengths	1 inh
Ventolin HFA	All strengths	2 inhs
Xopenex HFA	All strengths	2 inhs
Xopenex Neb	All strengths	72 vials (3 bx)
Nasal Antihistamines/Corticosteroids		
Astelin	All strengths	1 inh (30 ml)
Astepro	All strengths	1 inh (30 ml)
Atrovent	All strengths	1 inh (30 ml)
Beconase AQ	All strengths	1 inh (25 g)
Flonase	All Strengths	1 inh (16 g)
Nasacort AQ	All strengths	1 inh (16.5 g)
Nasarel	All strengths	1 inh (25 ml)
Nasonex	All strengths	1 inh (17 g)
Omnaris	All strengths	1 inh (12.5 g)
Patanase	All strengths	1 inh (30.5 g)

Medication	Strength	Quantity Limits / 30 Days
Rhinocort AQ	All strengths	1 inh (8.6 g)
Veramyst	All strengths	1 inh (10 g)
Sleep Aids		
Ambien/ Ambien CR	All strengths	30 tablets
Doral	All strengths	30 capsules
Edluar	All strengths	30 tablets
Intermezzo	All strengths	30 tablets
Lunesta	All strengths	30 tablets
Rozerem	All strengths	30 tablets
Silenor	All strengths	30 capsules
Sonata	All strengths	30 capsules
Zolpimist	5 mg	7.7 ml
Topical		
Taclonex	All strengths	240 gm
Anaphylaxis (Allergic Reaction)		
Epinephrine Auto-Injector	All strengths	4 pen injectors
Epinephrine Auto-Injector Jr.	All strengths	4 pen injectors

- The EHIM Quantity Limit list is a comprehensive universal list which includes medications that may be excluded from your specific pharmacy plan. Please contact the EHIM Pharmacy Call Center at 800-311-3446 to inquire about coverage.
- Affects Brand & Generic equivalent when available.
- Limits represent a 1 month supply of medication. If medication is available in a 3 month supply, the limits are tripled.
- This formulary can change at any time without notice.



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10/23/2019

Prescriptions that deliver in every way.

Alliance Rx Walgreens Prime

As a member of EHIM, you are eligible to enroll in Alliance Rx Walgreens Prime, offering you convenient delivery of your ongoing maintenance medications from Walgreens to the location of your choice.

It's easy to register and order prescriptions, just have the following ready:

- **Member ID Number** (Located on ID Card)
- **Group Number**
- **Payment Information**

Select the option that works for you and follow the steps to get started.

	Online	Fax	Mail	Phone
<p>1 REGISTER</p>	Register or Sign In at Walgreens.com/MailService. Follow the prompts to complete enrollment.	Not available	Send completed <i>Registration and Prescription Order Form</i> to: Alliance Rx Walgreens Prime P.O. Box 29061 Phoenix, AZ 85038	Call 800-345-1985 and ask to be registered for Walgreens mail service. Please have your insurance information handy.
<p>2 ORDER your first prescription.</p>	Ask your doctor if he or she can prescribe your medications electronically. If he or she is unable, select an alternative option.	Have your doctor complete and fax the Prescriber Fax Form to: 800-332-9581*	Send completed <i>Registration and Prescription Order Form</i> along with your original prescription to: Alliance Rx Walgreens Prime P.O. Box 29061 Phoenix, AZ 85038	Call 800-345-1985 and request that Walgreens reach out to your doctor for a new prescription.†
<p>3 REFILL‡</p>	Prescriptions eligible for refills are listed in your member profile at Walgreens.com/MailService.	Not available	Send completed <i>Preprinted Refill Order Form</i> enclosed with your last order to: Alliance Rx Walgreens Prime P.O. Box 29061 Phoenix, AZ 85038	Call 800-345-1985 and select “refill a prescription” or ask to speak with a customer service representative.

*By law, prescriber fax forms and e-prescriptions are valid only if sent from a prescriber's office.

†You will need to provide your doctor's contact information as well as the name and dosage of your medication. Walgreens will notify you if your doctor doesn't respond.

‡To automatically receive refills of your medications, select the “Auto Refill” option in your online profile or on the Registration and Prescription Order Form.

§Scripts that cannot be transferred and require a new written prescription include: expired prescriptions, no refills remaining, controlled substances & compound medications.

2019

Drug Name	Generic Name	Usage	Released
LYRICA	Pregabalin	Neuropathy	July 2019
ULORIC	Febuxostat	Gout	July 2019
DICLEGIS	Doxylamine Succ/Pyridoxine	Morning Sickness	June 2019
TARGADOX	Doxycycline Hyclate	Acne	May 2019
TARCEVA	Erlotinib	Lung Cancer	May 2019
DELZICOL	Mesalamine	Colitis	May 2019
LETAIRIS	Ambrisentan	Pulmonary Hypertension	April 2019
TEKTURNA	Aliskiren	Hypertension	April 2019
VESICARE	Solifenacin	Overactive Bladder	April 2019
ACANYA GEL	Clindamycin/BPO	Acne	Mar 2019
ADVAIR	Fluticasone-Salmeterol	Asthma/COPD	Mar 2019
AMRIX	Cyclobenzaprine ER	Muscle Spasms	Mar 2019
RANEXA	Ranolazine	Angina	Mar 2019
SENSIPAR	Cinacalcet	Chronic Kidney Disease	Mar 2019
SUBOXONE FILMTAB	Buprenorphine/Naloxone	Antinarcotic Therapy	Feb 2019
ZOVIRAX CREAM	Acyclovir	Viral Infection	Feb 2019
ELIDEL	Pimcrolimus	Eczema	Feb 2019
AMPYRA	Dafampridine	Multiple Sclerosis	Dec 2018
CANASA	Mesalamine	Colitis/Crohn's Disease	Dec 2018
FINACEA GEL	Azelaic Acid	Rosacea	Dec 2018
RAPAFLO	Silodosin	Prostate Disease	Dec 2018

Utilizing generic medications or other therapeutically equivalent, cost-effective medications may be one of the easiest ways to help you reduce your out-of-pocket expense. If you take any of these medications or other medications in these therapeutic classes, ask your doctor or pharmacist how you can start saving money by taking the equivalent generic form. You can also contact EHIM's Pharmacy Help Desk at (800) 311-3446 to learn more.



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Sample Maintenance Medications List

The EHIM maintenance list includes certain medications in the following drug classes:

The maintenance list below is a **sample** list containing the primary maintenance medications across all of the EHIM plans. The maintenance list does vary by plan. For specific questions regarding your plan's maintenance list, please call EHIM at (800) 311-3446.

Antiarthritics, NSAIDs:

Brand	Generic
Anaprox	naproxen sodium
Ansaid	flurbiprofen
Cataflam	diclofenac potassium
Feldene	prioxicam
Indocin	indomethacin
Lodine, Lodine XL	etodalac
Motrin	ibuprofen
Naprosyn	naproxen
Voltaren	diclofenac sodium
Piroxicam	feldene

Available for a 30 day supply only!

Celebrex	celecoxib
Mobic	meloxicam

Cholesterol Lowering Medications, Lipotropics:

Brand	Generic
Antara	fenofibrate micronized
Crestor	rosuvastatin
Lipitor	atorvastatin
LoFibra	fenofibrate
Lopid	gemfibrozil
Mevacor	lovastatin
Pravachol	pravastatin
Tricor	fenofibrate nanocrystallized
Vytorin	exetimibe-simvastatin
Welchol	<i>no generic equivalent</i>
Zetia	exetimibe
Zocor	simvastatin

Anti-Ulcer, Gastric Acid Reducer:

Brand	Generic
Aciphex	rabeprazole
Pepcid	famotidine
Prevacid	lansoprazole
Prilosec 10mg, 40mg	omeprazole
Prilosec 20mg	omeprazole
Protonix	pantoprazole
Tagamet	cimetidine
Zantac	ranitidine hcl

Available for a 30 day supply only!

Nexium	esomeprazole magnesium
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Diabetic Medications, Hypoglycemics:

Brand	Generic
Actos	pioglitazone
Avandia	<i>no generic equivalent</i>
Diabeta/Micronase	glyburide
Glucophage	metformin hcl
Glucotrol	glipizide
Glucovance	glyburide/metformin
MetaGlip	glipizide/metformin
Prandin	repaglinide

The maintenance list is updated regularly and subject to change. For specific questions regarding your plan's maintenance list, please call EHIM at (800) 311-3446.



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Diuretics, "Water Pills":

Brand	Generic
Bumex	bumetanide
Dyazide/Maxide	triameterene/HCTZ
Hydrodiuril	hydrochlorothiazide
Lasix	furosemide

Insulins:

All brands are covered

Osteoporosis:

Brand	Generic
Fosamax	alendronate

Hormone Medications:

Brand	Generic
Activella	estradiol & norethindrone
Climara	estradiol
Estrace	estradiol
Estraderm	estradiol
Ogen	estropipate
Provera	medroxyprogesterone

Thyroid Medications:

Brand	Generic
Armour Thyroid	thyroid
Cytomel	liothyronine sodium
Lexoxyl	levothyroxine
Synthroid	levothyroxine

Antidepressants: ONLY GENERICS WILL BE AVAILABLE FOR 3 MONTH SUPPLY

Brand	Generic
Celexa	citalopram HBR
Desyrel	trazodone hcl
Effexor	venlafaxine
Elavil	amitriptyline hcl
Limbitrol DS	amitriptyline/chlordiazepoxi
Ludiomil	maprotiline hcl
Luvox	fluvoxamine maleate
Pamelor	nortriptyline hcl
Paxil	paroxetine hcl
Prozac	Fluoxetine hcl
Remeron	mirtazapine
Sinequan	doxepine
Tofranil PM	Imipramine pamoate
Triavil	amitriptyline/perphenazine
Wellbutrin	bupropion hcl
Zoloft	sertraline hcl

Available for a 30 day supply only!

Cymbalta	duloxetine hcl
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Heart Medication, Cardiovascular:

Brand	Generic
Cardizem CD	diltiazem hcl
Imdur	isosorbide MN
Lanoxin	digoxin
Lopressor	metoprolol tartrate
Monoket	isosorbide DN
Norvasc	amlodipine besylate
Plendil	felodipine
Tenormin	atenolol
Toprol XL	metoprolol succinate ER
Vasotec	enalapril

Hypotensives, ACE Inhibitors:

Brand	Generic
Altace	ramipril
Avapro	<i>no generic equivalent</i>
Cozaar	losartan potassium
Diovan	valsartan/HCTZ
Diovan HCT	<i>no generic equivalent</i>
Hyzaar	losartan HCTZ
Lotensin	benazepril hcl
Lotensin HCT	benazepril/HCTZ
Lotrel	amlodipine besylate & benazepril hcl
Prinivil, Zestril	lisinopril
Vasotec	enalapril

Contraceptives: ONLY GENERICS WILL BE AVAILABLE FOR 3 MONTH SUPPLY

Brand	Generic
Alesse	All generics
Cyclessa	All generics
Demulen 1/35	All generics
Desogen	All generics
Loestrin 21	All generics
Loestrin 28 Fe	All generics
Lo-Ovral	All generics
Mircette	All generics
Nordette	All generics
Norinyl 1 + 35	All generics
Ortho Tri-Cyclen	All generics
Ortho Cyclen	All generics
Ortho Micronor	All generics
Ovral	All generics
Tri-Norinyl	All generics
Tri-Phasil	All generics



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10/23/2019

Frequently Asked Questions

What is a generic drug?

A generic drug is a lower cost version of a brand-name medication. They are **just as safe and effective as the brand-name**, but they are more affordable.

How are generic drugs different from brand-name drugs?

The biggest difference between a generic and brand-name drug is the price. **Most generics cost 70-90% less than the brand-name version.** Generics drugs may also have a different shape, color or package. But these differences only affect how the medicine looks, not how it works.

How many people use generic drugs?

Millions of people use generic drugs every day. In fact, about 2 out of 3 prescriptions are for generic drugs. But there are still many people taking expensive brand-name drugs who could save a lot of money by switching to the generic version.

Are generics really the same as the brand-name?

Yes. Generic drugs have the same medicine as the brand-name, and the FDA will not approve them unless they are just as safe and effective as the brand-name drug. There are a few special medical conditions where a generic drug might have a small difference in how it works, but that is very rare.

Why are generic drugs so much cheaper than brand-name drugs?

Most drugs cost pennies to make. Brand-name drugs are more expensive because they don't have any competition to drive the price down. Also the companies that make brand-name drugs spend billions on advertising and must make a profit to succeed as a company and justify their spending.

Why did my doctor prescribe a generic drug?

Doctors know that generic drugs are just as effective as brand-name medicines and a lot more affordable. Doctors know that generics have a longer safety record, and therefore prescribe generics because they want their patient to have a drug that is safe, effective, and affordable.

If generic drugs are so good, why are brand-name drugs still prescribed?

Several reasons exist. For newer medicines, brand-names are prescribed because generic equivalents are not available yet. Generic drugs cannot be sold until the brand-name drug's patent ends, which may be 10 years or more. Some people insist on using expensive brand-name drugs because they do not understand that generics are just as safe and effective.



They think that “you get what you pay for” so a brand-name drug must be “better” because they cost more. However, this is not true – generics have the same medicine as the brand-name, and the reason generics cost less is because they only cost pennies to make. Advertising is another reason why people continue to use brand-name drugs over a more affordable generic. Brand-name drug companies spend billions on advertising every year to convince patients and doctors that their drugs are “better” than more affordable generic drugs. Generic drugs are not advertised, which helps keep their prices low.

Why should I take a generic drug if my doctor offers me free samples of brand name drugs?

Generic drugs are usually the most affordable option in the long-run. Some doctors offer free samples to patients to let them try a new medicine. Nonetheless, doctors can usually give free samples for a short period of time. It is usually better to start on a generic drug, which are often available for as little as \$4 a month, than to start on a brand-name and later have to pay a much higher price.

Do generic drugs cause more side effects than brand-name drugs?

No. Brand-name drugs and a generic drug have the same rates of side effects. Each medication can affect each person in a different way. If your medicine is causing side effects that you are worried about, call your doctor.

Why should I take generic drugs?

Because they are safe, effective, and affordable. If your medications cost too much, it is likely because of brand-name drugs. Many patients skip important medications rather than pay these high prices, putting their health at risk. With generic drugs, you can get the same health benefits at a lower cost.

What can I do to make sure that I get a generic drug?

- ↳ When your doctor talks to you about your medications, tell your doctor that you prefer generic drugs if they are available.
- ↳ If no generic exists for your particular drug, ask your doctor if there is another drug that is available as a generic that treats the same condition. Often, many drugs do the same thing – such as lowering cholesterol or preventing heart burn – but some will have generics while others will not.
- ↳ Ask your pharmacist whether generic drugs are available for your medicines. The pharmacist can check with your doctor, if necessary.



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