

# MEDICATION COVERAGE CHANGES



Cigna Pharmacy Management®

July-December 2021

These are the medication coverage changes Cigna is making. Medications are listed alphabetically by drug list name. Some medications are covered under the pharmacy benefit, some under the medical benefit, and others are covered under both benefits. Typically, medications that you take yourself and fill at a retail pharmacy or through home delivery are covered under the pharmacy benefit. Medications that are injected or infused and are given to you at a doctor's office, an infusion center, or at home are typically covered under the medical benefit.

**If you have Cigna-administered pharmacy and/or medical benefits and you're affected by one of these changes, we'll send you a letter with specific information on next steps.**

## CIGNA STANDARD PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Azstarys ( <i>Attention Deficit Hyperactivity Disorder</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: methylphenidate ER/CD/LA; dexamethylphenidate ER</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Brexafemme ( <i>Infections</i> )	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	Consider these covered options which are used to treat the same condition: fluconazole	Pharmacy
	Truseltiq ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

Together, all the way.®



## CIGNA STANDARD PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Welireg (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
November 15 <sup>th</sup>	Empaveli (Miscellaneous)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
November 1 <sup>st</sup>	Bystolic (Blood pressure/Heart medications)	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	Consider these covered options which are used to treat the same condition: nebivolol	Pharmacy
	Chantix (Smoking Cessation)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: varenicline</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Exservan (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	Consider these covered options which are used to treat the same condition: riluzole, Tiglutik	Pharmacy
	Lumakra (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Myfembree (Hormonal Agents)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 15 <sup>th</sup>	Nextstellis (Contraception Products)	Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Generic oral contraceptives (e.g. drospirenone-ethinyl estradiol)	Pharmacy
	Qelbree (Attention Deficit Hyperactivity Disorder)	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	Consider these covered options which are used to treat the same condition: atomoxetine, clonidine ER, guanfacine ER	Pharmacy
	Zegalogue (Diabetes)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 7 <sup>th</sup>	ivermectin (Infections)	Will be available on the Cigna Standard Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA STANDARD PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 7 <sup>th</sup>	Stromectol (Infections)	Will be available on the Cigna Standard Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
October 1 <sup>st</sup>	Aubagio (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Elepsia XR (Seizure Disorders)	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	Consider these covered options which are used to treat the same condition: levetiracetam ER	Pharmacy
	Fortivda (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
	Ingrezza (Miscellaneous)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Ponvory (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Roszet (Cholesterol Medications)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: atorvastatin, ezetimibe, ezetimibe-simvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin tablet</li> </ul>	Pharmacy
	Somatuline Depot (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
September 15 <sup>th</sup>	Prolate solution (Pain Relief and Inflammatory Disease)	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	Consider these covered options which are used to treat the same condition: oxycodone w/ acetaminophen	Pharmacy
September 1 <sup>st</sup>	Kloxxado (Substance Abuse)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
August 15 <sup>th</sup>	Wegovy (Weight Management)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy

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## CIGNA STANDARD PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 20 <sup>th</sup>	Heparin Sod 5,000 Unit/ML syringe ( <i>Blood Thinners/ Anti-clotting</i> )	Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
	Bronchitol ( <i>Asthma/COPD/Respiratory</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Nebusal 3%, Pulmosal, Pulmozyme, sodium chloride inhalation</li> </ul>	Pharmacy
	Ukoniq ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Dupixent ( <i>Pain Relief and Inflammatory Disease</i> )	Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin 2,000 Unit/2 ML Vial ( <i>Blood Thinners/ Anti-Clotting</i> )	Will move to a lower tier (generic) on the Cigna Standard Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin 5,000 Unit/ML Carpujct ( <i>Blood Thinners/ Anti-Clotting</i> )	Will move to a lower tier (generic) on the Cigna Standard Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 12 <sup>th</sup>	Wegovy ( <i>Weight Management</i> )	Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 6 <sup>th</sup>	Lupkynis ( <i>Transplant Medications</i> )	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Tepmetko ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Verquvo ( <i>Blood Pressure/Heart medications</i> )	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	Consider these covered options which are used to treat the same condition: Talk to your doctor about other alternatives.	Pharmacy

## CIGNA STANDARD PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Avsola <i>(Pain Relief and Inflammatory Disease)</i>	Will be available on the Cigna Standard Prescription Drug list, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	<ul style="list-style-type: none"> <li>▶ Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Cimzia syringe <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Cystaran <i>(Eye Conditions)</i>	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Standard Prescription Drug List. <sup>3</sup>	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you.</li> <li>▶ For new prescriptions as of July 1<sup>st</sup>, your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter <i>(Diabetes - CGMs)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Eligard <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Fasenra pen (auto-injector) <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Fensolvi <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Firmagon <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	FreeStyle Sensor 10,14, 2 <i>(Diabetes - CGMs)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Fulphila <i>(Blood Modifiers/Bleeding Disorders)</i>	Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical

## CIGNA STANDARD PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Granix (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List <u>and</u></li> <li>Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nivestym, Zarxio.	Pharmacy
		Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Inflectra (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.</li> </ul>	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.	Medical
	Ingrezza <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	If you're currently taking this medication, this change won't affect you. Consider this covered option which is used to treat the same condition: Austedo.	Pharmacy
	Kuvan Tablet & Packets <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Standard Prescription Drug List.	<ul style="list-style-type: none"> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>. However, you're automatically approved for coverage of the generics.</li> <li>Consider these covered options which are used to treat the same condition: sapropterin tablet and powder packet.</li> </ul>	Pharmacy
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg), Lupron Depot-PED (30mg) (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Nivestym (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Standard Prescription Drug List <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> </ul>	Pharmacy
	Nivestym (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>Will be a preferred medication under the medical benefit <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>	<ul style="list-style-type: none"> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical
	Nucala syringe, Nucala auto-injector (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
Ogivri (Cancer)	Will no longer be a preferred medication under the medical benefit.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical	

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## CIGNA STANDARD PRESCRIPTION DRUG LIST (cont)

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July 1 <sup>st</sup>	Orencia syringe, Orencia clickjet (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Remicade (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List <u>and</u></li> <li>▶ Will have a change to its approval requirements ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>▶ If you currently have approval for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> <li>▶ If Cigna approves coverage of Remicade, it may cost you more to fill.<sup>4</sup></li> <li>▶ Consider these preferred medications which are used to treat the same condition and may cost you less: Inflectra, Avsola.</li> </ul>	Pharmacy
	Remicade (Pain Relief and Inflammatory Disease)	Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>▶ Remicade will no longer be a preferred medication under the Cigna medical benefit.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>▶ If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical
	Trelstar (Hormonal Agents)	Will be available on the Cigna Standard Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Valtoco (Seizure Disorders)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Ziextenzo (Blood Modifiers/Bleeding Disorders)	Will be available on the Cigna Standard Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Zoladex (Hormonal Agents)	Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA VALUE PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Azstarys ( <i>Attention Deficit Hyperactivity Disorder</i> )	Will no longer be covered because it's being taken off the Cigna Prescription Value Drug List.	Consider these covered options which are used to treat the same condition: methylphenidate ER/CD/LA; dexamethylphenidate ER	Pharmacy
	Brexafemme ( <i>Infections</i> )	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: fluconazole	Pharmacy
	Truseltiq ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Welireg ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
November 15 <sup>th</sup>	Empaveli ( <i>Miscellaneous</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
November 1 <sup>st</sup>	Chantix ( <i>Smoking Cessation</i> )	▶ Will need approval from Cigna before it can be covered ("prior authorization")	▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Exservan ( <i>Miscellaneous</i> )	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: riluzole, Tiglutik	Pharmacy
	Lumakra ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Standard Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Myfembree ( <i>Hormonal Agents</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 15 <sup>th</sup>	Nextstellis ( <i>Contraception Products</i> )	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: Generic oral contraceptives (e.g. drospirenone-ethinyl estradiol)	Pharmacy
	Qelbree ( <i>Attention Deficit Hyperactivity Disorder</i> )	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: atomoxetine, clonidine ER, guanfacine ER	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.



## CIGNA VALUE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 15 <sup>th</sup>	Zegalogue (Diabetes)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 7 <sup>th</sup>	ivermectin (Infections)	Will be available on the Cigna Value Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Stromectol (Infections)	Will be available on the Cigna Value Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
October 1 <sup>st</sup>	Aubagio (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Elepsia XR (Seizure Disorders)	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: levetiracetam ER	Pharmacy
	Fortivda (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
	Ingrezza (Miscellaneous)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Linzess (Gastrointestinal/Heartburn)	Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Ponvory (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Roszet (Cholesterol Medications)	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: atorvastatin, ezetimibe, ezetimibe-simvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin tablet	Pharmacy
	Somatuline Depot (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA VALUE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
September 15 <sup>th</sup>	Prolate solution (Pain Relief and Inflammatory Disease)	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: oxycodone w/ acetaminophen	Pharmacy
September 1 <sup>st</sup>	Kloxxado (Substance Abuse)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List and</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
August 15 <sup>th</sup>	Wegovy (Weight Management)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
July 20 <sup>th</sup>	Bronchitol (Asthma/COPD/Respiratory)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Nebusal 3%, Pulmosal, Pulmozyme, sodium chloride inhalation</li> </ul>	Pharmacy
	Ukoniq (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Dupixent (Pain Relief and Inflammatory Disease)	Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin 2,000 Unit/2 ML Vial (Blood Thinners/ Anti-Clotting)	Will move to a lower tier (generic) on the Cigna Value Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin 5,000 Unit/ML Carpujct (Blood Thinners/ Anti-Clotting)	Will move to a lower tier (generic) on the Cigna Value Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin Sod 5,000 Unit/ML syringe (Blood Thinners/ Anti-Clotting)	Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
July 12 <sup>th</sup>	Wegovy (Weight Management)	Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 6 <sup>th</sup>	Lupkynis (Transplant Medications)	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: Benylsta, tacrolimus	Pharmacy

## CIGNA VALUE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 6 <sup>th</sup>	Tepmetko (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Verquvo (Blood Pressure/Heart Medications)	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	Consider these covered options which are used to treat the same condition: Talk to your doctor about other alternatives.	Pharmacy
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Avsola (Pain Relief and Inflammatory Disease)	Will be available on the Cigna Value Prescription Drug list, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Cimzia syringe (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Cystaran (Eye Conditions)	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Value Prescription Drug List. <sup>3</sup>	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you.</li> <li>▶ For new prescriptions as of July 1<sup>st</sup>, your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter (Diabetes)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Eligard (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Fasenra pen (auto-injector) (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Fensolvi (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
Firmagon (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical	
FreeStyle Sensor 10,14, 2 (Diabetes)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA VALUE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Fulphila (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Granix (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List <u>and</u></li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nivestym, Zarxio.	Pharmacy
		Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Inflectra (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.	Medical
	Ingrezza <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	If you're currently taking this medication, this change won't affect you. Consider this covered option which is used to treat the same condition: Austedo.	Pharmacy
	Kuvan Tablet & Packets <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Value Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>. However, you're automatically approved for coverage of the generics.</li> <li>▶ Consider these covered options which are used to treat the same condition: sapropterin tablet and powder packet.</li> </ul>	Pharmacy
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg), Lupron Depot-PED (30mg) (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Nivestym (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Value Prescription Drug List <u>and</u></li> <li>▶ Will no longer need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your doctor's office no longer has to request coverage approval from Cigna.</li> </ul>	Pharmacy
<ul style="list-style-type: none"> <li>▶ Will be a preferred medication under the medical benefit <u>and</u></li> <li>▶ Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>		<ul style="list-style-type: none"> <li>▶ Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>▶ If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical	

## CIGNA VALUE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Nucala syringe, Nucala auto-injector <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Ogivri <i>(Cancer)</i>	Will no longer be a preferred medication under the medical benefit.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical
	Orencia syringe, Orencia clickjet <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Remicade <i>(Pain Relief and Inflammatory Disease)</i>	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List <u>and</u></li> <li>Will have a change to its approval requirements ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>If you currently have approval for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> <li>If Cigna approves coverage of Remicade, it may cost you more to fill.<sup>4</sup></li> <li>Consider these preferred medications which are used to treat the same condition and may cost you less: Inflectra, Avsola.</li> </ul>	Pharmacy
	Remicade <i>(Pain Relief and Inflammatory Disease)</i>	Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>Remicade will no longer be a preferred medication under the Cigna medical benefit.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical
	Trelstar <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Valtoco <i>(Seizure Disorders)</i>	Will be available on the Cigna Value Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Ziextenzo <i>(Blood Modifiers/Bleeding Disorders)</i>	Will move to a higher tier (non-preferred brand) on the Cigna Value Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
Zoladex <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA PERFORMANCE PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Azstarys ( <i>Attention Deficit Hyperactivity Disorder</i> )	<ul style="list-style-type: none"> <li>› Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.</li> <li>› Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>› Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>› This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: methylphenidate ER/CD/LA; dexmethylphenidate ER</li> <li>› Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>› Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Brexafemme ( <i>Infections</i> )	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: fluconazole	Pharmacy
	Truseltiq ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>› Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.</li> <li>› Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>› Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>› This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>› Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>› Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Welireg ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>› Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.</li> <li>› Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>› Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>› This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>› Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>› Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
November 15 <sup>th</sup>	Empaveli ( <i>Miscellaneous</i> )	<ul style="list-style-type: none"> <li>› Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List.</li> <li>› Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>› This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>› Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy

## CIGNA PERFORMANCE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
November 1 <sup>st</sup>	Bystolic (Blood pressure/Heart medications)	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: nebivolol	Pharmacy
	Chantix (Smoking Cessation)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: varenicline</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Exservan (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: riluzole, Tiglutik	Pharmacy
	Lumakra (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Myfembree (Hormonal Agents)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (non-preferred brand) on the Cigna performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
October 15 <sup>th</sup>	Nextstellis (Contraception Products)	Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Generic oral contraceptives (e.g. drospirenone-ethinyl estradiol)	Pharmacy
	Qelbree (Attention Deficit Hyperactivity Disorder)	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: atomoxetine, clonidine ER, guanfacine ER	Pharmacy
	Zegalogue (Diabetes)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 7 <sup>th</sup>	ivermectin (Infections)	Will be available on the Cigna Performance Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Stromectol (Infections)	Will be available on the Cigna Performance Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy

## CIGNA PERFORMANCE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 1 <sup>st</sup>	Aubagio ( <i>Multiple Sclerosis</i> )	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Elepsia XR ( <i>Seizure Disorders</i> )	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: levetiracetam ER	Pharmacy
	Fortivda ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
	Ingrezza ( <i>Miscellaneous</i> )	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Ponvory ( <i>Multiple Sclerosis</i> )	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
October 1 <sup>st</sup>	Roszet ( <i>Cholesterol Medications</i> )	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: atorvastatin, ezetimibe, ezetimibe-simvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin tablet</li> </ul>	Pharmacy
	Somatuline Depot ( <i>Hormonal Agents</i> )	Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
September 15 <sup>th</sup>	Prolate solution ( <i>Pain Relief and Inflammatory Disease</i> )	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: oxycodone w/ acetaminophen	Pharmacy
September 1 <sup>st</sup>	Kloxxado ( <i>Substance Abuse</i> )	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List and</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
August 15 <sup>th</sup>	Wegovy ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy



## CIGNA PERFORMANCE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 20 <sup>th</sup>	Bronchitol (Asthma/COPD/Respiratory)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Nebusal 3%, Pulmosal, Pulmozyme, sodium chloride inhalation</li> </ul>	Pharmacy
	Ukoniq (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Dupixent (Pain Relief and Inflammatory Disease)	Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 12 <sup>th</sup>	Tepmetko (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Verquvo (Blood Pressure/Heart Medications)	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: Talk to your doctor about other alternatives.	Pharmacy
	Wegovy (Weight Management)	Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 6 <sup>th</sup>	Lupkynis (Transplant Medications)	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	Consider these covered options which are used to treat the same condition: Benylsta, tacrolimus	Pharmacy
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical

## CIGNA PERFORMANCE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Avsola (Pain Relief and Inflammatory Disease)	Will be available on the Cigna Performance Prescription Drug list, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Cimzia syringe (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Cystaran (Eye Conditions)	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Performance Prescription Drug List. <sup>3</sup>	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you.</li> <li>▶ For new prescriptions as of July 1<sup>st</sup>, your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Eligard (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Fasenra pen (auto-injector) (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Fensolvi (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Firmagon (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	FreeStyle Sensor 10,14, 2 (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Fulphila (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Granix (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List <u>and</u></li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nivestym, Zarxio.	Pharmacy
		Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical

## CIGNA PERFORMANCE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Herceptin, Herceptin Hylecta (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Kanjinti, Trazimera.	Pharmacy
	Inflectra (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.</li> </ul>	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.	Medical
	Ingrezza <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	If you're currently taking this medication, this change won't affect you. Consider this covered option which is used to treat the same condition: Austedo.	Pharmacy
	Kuvan Tablet & Packets <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List.	<ul style="list-style-type: none"> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>. However, you're automatically approved for coverage of the generics.</li> <li>Consider these covered options which are used to treat the same condition: sapropterin tablet and power packet.</li> </ul>	Pharmacy
	Lupron Depot-PED (30mg) (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg), Lupron Depot-PED (30mg) (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Nivestym (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Performance Prescription Drug List <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> </ul>	Pharmacy
		<ul style="list-style-type: none"> <li>Will be a preferred medication under the medical benefit <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>	<ul style="list-style-type: none"> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical
	Nucala syringe, Nucala auto-injector (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Ogivri (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Kanjinti, Trazimera.	Pharmacy
		Will no longer be a preferred medication under the medical benefit.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA PERFORMANCE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1st	Orencia syringe, Orencia clickjet (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Remicade (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>Will no longer be covered because it's being taken off the Cigna Performance Prescription Drug List <u>and</u></li> <li>Will have a change to its approval requirements ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>If you currently have approval for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> <li>If Cigna approves coverage of Remicade, it may cost you more to fill.<sup>4</sup></li> <li>Consider these covered options which are used to treat the same condition: Inflectra, Avsola.</li> </ul>	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>Remicade will no longer be a preferred medication under the Cigna medical benefit.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical
	Trelstar (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Valtoco (Seizure Disorders)	Will be available on the Cigna Performance Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Ziextenzo (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Performance Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Zoladex (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA ADVANTAGE PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Azstarys ( <i>Attention Deficit Hyperactivity Disorder</i> )	Will no longer be covered because it's being taken off the Cigna Prescription Advantage Drug List.	Consider these covered options which are used to treat the same condition: methylphenidate ER/CD/LA; dexmethylphenidate ER	Pharmacy
	Brexafemme ( <i>Infections</i> )	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: fluconazole	Pharmacy
	Truseltiq ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Welireg ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
November 15 <sup>th</sup>	Empaveli ( <i>Miscellaneous</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
November 1 <sup>st</sup>	Exservan ( <i>Miscellaneous</i> )	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: riluzole, Tiglutik	Pharmacy
	Lumakra ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Myfembree ( <i>Hormonal Agents</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 15 <sup>th</sup>	Nextstellis ( <i>Contraception Products</i> )	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: Generic oral contraceptives (e.g. drospirenone-ethinyl estradiol)	Pharmacy
	Qelbree ( <i>Attention Deficit Hyperactivity Disorder</i> )	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: atomoxetine, clonidine ER, guanfacine ER	Pharmacy
	Zegalogue ( <i>Diabetes</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA ADVANTAGE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 7 <sup>th</sup>	ivermectin (Infections)	Will be available on the Cigna Advantage Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Stromectol (Infections)	Will be available on the Cigna Advantage Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
October 1 <sup>st</sup>	Aubagio (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Elepsia XR (Seizure Disorders)	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: levetiracetam ER	Pharmacy
	Fortivda (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
	Ingrezza (Gastrointestinal/Heartburn)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Linzess (Miscellaneous)	Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Ponvory (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Roszet (Cholesterol Medications)	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: atorvastatin, ezetimibe, ezetimibe-simvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin tablet	Pharmacy
	Somatuline Depot (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
September 15 <sup>th</sup>	Prolate solution (Pain Relief and Inflammatory Disease)	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: oxycodone w/ acetaminophen	Pharmacy
September 1 <sup>st</sup>	Kloxxado (Substance Abuse)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List and</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
August 15 <sup>th</sup>	Wegovy (Weight Management)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA ADVANTAGE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 20 <sup>th</sup>	Bronchitol (Asthma/COPD/Respiratory)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Nebusal 3%, Pulmosal, Pulmozyme, sodium chloride inhalatio</li> </ul>	Pharmacy
	Ukoniq (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Dupixent (Pain Relief and Inflammatory Disease)	Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 12 <sup>th</sup>	Wegovy (Weight Management)	Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 6 <sup>th</sup>	Lupkynis (Transplant Medications)	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: Benylsta, tacrolimus	Pharmacy
	Tepmetko (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Verquvo (Blood Pressure/Heart Medications)	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	Consider these covered options which are used to treat the same condition: Talk to your doctor about other alternatives.	Pharmacy
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Avsola (Pain Relief and Inflammatory Disease)	Will be available on the Cigna Advantage Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Cimzia syringe (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA ADVANTAGE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Cystaran (Eye Conditions)	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Advantage Prescription Drug List. <sup>3</sup>	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you.</li> <li>▶ For new prescriptions as of July 1<sup>st</sup>, your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Eligard (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Fasenra pen (auto-injector) (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Fensolvi (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Firmagon (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	FreeStyle Sensor 10,14, 2 (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Fulphila (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Granix (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List <u>and</u></li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nivestym, Zarxio.	Pharmacy
		Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Herceptin, Herceptin Hylecta (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Kanjinti, Trazimera.	Pharmacy
	Inflectra (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.</li> </ul>	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.	Medical
Ingrezza <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	If you're currently taking this medication, this change won't affect you. Consider this covered option which is used to treat the same condition: Austedo.	Pharmacy	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.



## CIGNA ADVANTAGE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER	
July 1 <sup>st</sup>	Kuvan Tablet & Packets <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>. However, you're automatically approved for coverage of the generics.</li> <li>▶ Consider these covered options which are used to treat the same condition: sapropterin tablet and power packet.</li> </ul>	Pharmacy	
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg) (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy	
	Lupron Depot-PED (30mg) (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy	
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg), Lupron Depot-PED (30mg) (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical	
	Nivestym (Blood Modifiers/Bleeding Disorders)		<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Advantage Prescription Drug List <u>and</u></li> <li>▶ Will no longer need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your doctor's office no longer has to request coverage approval from Cigna.</li> </ul>	Pharmacy
			<ul style="list-style-type: none"> <li>▶ Will be a preferred medication under the medical benefit <u>and</u></li> <li>▶ Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>	<ul style="list-style-type: none"> <li>▶ Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>▶ If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical
	Nucala syringe, Nucala auto-injector (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical	
	Ogivri (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Kanjinti, Trazimera.	Pharmacy	
Will no longer be a preferred medication under the medical benefit.		<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical		
Orencia syringe, Orencia clickjet (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical		

## CIGNA ADVANTAGE PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1st	Remicade (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>Will no longer be covered because it's being taken off the Cigna Advantage Prescription Drug List and</li> <li>Will have a change to its approval requirements ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>If you currently have approval for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> <li>If Cigna approves coverage of Remicade, it may cost you more to fill.<sup>4</sup></li> <li>Consider these covered options which are used to treat the same condition: Inflectra, Avsola.</li> </ul>	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>Remicade will no longer be a preferred medication under the Cigna medical benefit.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical
	Trelstar (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Valtoco (Seizure Disorders)	Will be available on the Cigna Advantage Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Ziextenzo (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Advantage Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
Zoladex (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (STANDARD) PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Azstarys ( <i>Attention Deficit Hyperactivity Disorder</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: methylphenidate ER/CD/LA; dexamethylphenidate ER</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Brexafemme ( <i>Infections</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: fluconazole</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Truseltiq ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Welireg ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
November 15 <sup>th</sup>	Empaveli ( <i>Miscellaneous</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
November 1 <sup>st</sup>	Bystolic ( <i>Blood pressure/Heart medications</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: nebivolol</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Chantix ( <i>Smoking Cessation</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: varenicline</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Exservan ( <i>Miscellaneous</i> )	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Legacy (Standard) Prescription Drug List.	Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Lumakra ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (STANDARD) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
November 1 <sup>st</sup>	Myfembree ( <i>Hormonal Agents</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 15 <sup>th</sup>	Nextstellis ( <i>Contraception Products</i> )	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Generic oral contraceptives (e.g. drospirenone-ethinyl estradiol)	Pharmacy
	Qelbree ( <i>Attention Deficit Hyperactivity Disorder</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Zegalogue ( <i>Diabetes</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 7 <sup>th</sup>	ivermectin ( <i>Infections</i> )	Will be available on the Cigna Legacy (Standard) Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Stromectol ( <i>Infections</i> )	Will be available on the Cigna Legacy (Standard) Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
October 1 <sup>st</sup>	Aubagio ( <i>Multiple Sclerosis</i> )	Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Elepsia XR ( <i>Seizure Disorders</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
	Fortivda ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (STANDARD) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 1 <sup>st</sup>	Ingrezza (Miscellaneous)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Ponvory (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Roszet (Cholesterol Medications)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: atorvastatin, ezetimibe, ezetimibe-simvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin tablet</li> </ul>	Pharmacy
	Somatuline Depot (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
September 15 <sup>th</sup>	Prolate solution (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
September 1 <sup>st</sup>	Kloxxado (Substance Abuse)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
August 15 <sup>th</sup>	Wegovy (Weight Management)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
July 20 <sup>th</sup>	Bronchitol (Asthma/COPD/Respiratory)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Nebusal 3%, Pulmosal, Pulmozyme, sodium chloride inhalation</li> </ul>	Pharmacy
	Ukoniq (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Dupixent (Pain Relief and Inflammatory Disease)	Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (STANDARD) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 15 <sup>th</sup>	Heparin 2,000 Unit/2 ML Vial ( <i>Blood Thinners/Anti-Clotting</i> )	Will move to a lower tier (generic) on the Cigna Legacy (Standard) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin 5,000 Unit/ML Carpujct ( <i>Blood Thinners/Anti-Clotting</i> )	Will move to a lower tier (generic) on the Cigna Legacy (Standard) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin Sod 5,000 Unit/ML syringe ( <i>Blood Thinners/Anti-Clotting</i> )	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
July 12 <sup>th</sup>	Wegovy ( <i>Weight Management</i> )	Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 6 <sup>th</sup>	Lupkynis ( <i>Transplant Medications</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Tepmetko ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Verquvo ( <i>Blood Pressure/Heart Medications</i> )	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen ( <i>Pain Relief and Inflammatory Disease</i> )	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Avsola ( <i>Pain Relief and Inflammatory Disease</i> )	Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
Cimzia syringe ( <i>Pain Relief and Inflammatory Disease</i> )	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (STANDARD) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Cystaran (Eye Conditions)	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Legacy (Standard) Prescription Drug List. <sup>3</sup>	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you.</li> <li>▶ For new prescriptions as of July 1<sup>st</sup>, your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Eligard (Hormonal agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Fasenra pen (auto-injector) (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Fensolvi (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Firmagon (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	FreeStyle Sensor 10,14, 2 (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Fulphila (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Granix (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List <u>and</u></li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nivestym, Zarxio.	Pharmacy
Will need approval from Cigna before it can be covered ("precertification").		Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical	
Infectra (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy	
	Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Infectra.	Medical	
Kuvan Tablet & Packets (Miscellaneous)	Will have a change to its approval requirements ("prior authorization") on the Cigna Legacy (Standard) Prescription Drug List. <sup>3</sup>	If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30 <sup>th</sup> .	Pharmacy	

## CIGNA LEGACY (STANDARD) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg), Lupron Depot-PED (30mg) <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Nivestym <i>(Blood Modifiers/Bleeding Disorders)</i>	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Legacy (Standard) Prescription Drug List <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> </ul>	Pharmacy
		<ul style="list-style-type: none"> <li>Will be a preferred medication under the medical benefit <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>	<ul style="list-style-type: none"> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical
	Nucala syringe, Nucala auto-injector <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Ogivri <i>(Cancer)</i>	Will no longer be a preferred medication under the medical benefit.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical
	Orencia syringe, Orencia clickjet <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Remicade <i>(Pain Relief and Inflammatory Disease)</i>	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List <u>and</u></li> <li>Will have a change to its approval requirements ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>If you currently have approval for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> <li>If Cigna approves coverage of Remicade, it may cost you more to fill.<sup>4</sup></li> <li>Consider these preferred medications which are used to treat the same condition and may cost you less: Inflectra, Avsola.</li> </ul>	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>Remicade will no longer be a preferred medication under the Cigna medical benefit.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.



## CIGNA LEGACY (STANDARD) PRESCRIPTION DRUG LIST *(cont)*

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Talicia <i>(Gastrointestinal/Heartburn)</i>	Will be available on the Cigna Legacy (Standard) Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Trelstar <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Ziextenzo <i>(Blood Modifiers/Bleeding Disorders)</i>	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Standard) Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
Zoladex <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (PERFORMANCE) PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Azstarys <i>(Attention Deficit Hyperactivity Disorder)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: methylphenidate ER/CD/LA; dexamethylphenidate ER</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Brexafemme <i>(Infections)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: fluconazole</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Truseltiq <i>(Cancer)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Welireg <i>(Cancer)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
November 15 <sup>th</sup>	Empaveli <i>(Miscellaneous)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
November 1 <sup>st</sup>	Bystolic <i>(Blood pressure/Heart medications)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: nebivolol</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Chantix <i>(Smoking Cessation)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: varenicline</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Exservan <i>(Miscellaneous)</i>	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Legacy (Performance) Prescription Drug List.	Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy

## CIGNA LEGACY (PERFORMANCE) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
November 1 <sup>st</sup>	Lumakra (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy Performance Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Myfembree (Hormonal Agents)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 15 <sup>th</sup>	Nextstellis (Contraception Products)	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Generic oral contraceptives (e.g. drospirenone-ethinyl estradiol)	Pharmacy
	Qelbree (Attention Deficit Hyperactivity Disorder)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Zegalogue (Diabetes)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 7 <sup>th</sup>	ivermectin (Infections)	Will be available on the Cigna Legacy (Performance) Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Stromectol (Infections)	Will be available on the Cigna Legacy (Performance) Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
October 1 <sup>st</sup>	Aubagio (Multiple Sclerosis)	Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Elepsia XR (Seizure Disorders)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy

## CIGNA LEGACY (PERFORMANCE) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 1 <sup>st</sup>	Fortivda (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
	Ingrezza (Miscellaneous)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Ponvory (Multiple Sclerosis)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Roszet (Cholesterol Medications)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: atorvastatin, ezetimibe, ezetimibe-simvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin tablet</li> </ul>	Pharmacy
	Somatuline Depot (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
September 15 <sup>th</sup>	Prolate solution (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
September 1 <sup>st</sup>	Kloxxado (Substance Abuse)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
August 15 <sup>th</sup>	Wegovy (Weight Management)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (PERFORMANCE) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 20 <sup>th</sup>	Bronchitol (Asthma/COPD/Respiratory)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Nebusal 3%, Pulmosal, Pulmozyme, sodium chloride inhalation</li> </ul>	Pharmacy
	Ukoniq (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Dupixent (Pain Relief and Inflammatory Disease)	Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 12 <sup>th</sup>	Wegovy (Weight Management)	Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 6 <sup>th</sup>	Lupkynis (Transplant Medications)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Tepmetko (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Verquvo (Blood Pressure/Heart Medications)	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (PERFORMANCE) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Avsola <i>(Pain Relief and Inflammatory Disease)</i>	Will be available on the Cigna Legacy (Performance) Prescription Drug list, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Cimzia syringe <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Cystaran <i>(Eye Conditions)</i>	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Legacy (Performance) Prescription Drug List. <sup>3</sup>	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you.</li> <li>▶ For new prescriptions as of July 1<sup>st</sup>, your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter <i>(Diabetes - CGMs)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Eligard <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Fasenra pen (auto-injector) <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Fensolvi <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Firmagon <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	FreeStyle Sensor 10,14, 2 <i>(Diabetes - CGMs)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Fulphila <i>(Blood Modifiers/Bleeding Disorders)</i>	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Granix <i>(Blood Modifiers/Bleeding Disorders)</i>	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List <u>and</u></li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nivestym, Zarxio.	Pharmacy
		Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (PERFORMANCE) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1st	Herceptin, Herceptin Hylecta (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Kanjinti, Trazimera.	Pharmacy
	Inflectra (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.</li> <li>Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.</li> </ul>	Pharmacy
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.	Medical
	Kuvan Tablet & Packets (Miscellaneous)	Will have a change to its approval requirements ("prior authorization") on the Cigna Legacy (Performance) Prescription Drug List. <sup>3</sup>	If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30 <sup>th</sup> .	Pharmacy
	Lupron Depot-PED (30mg) (Hormonal Agents)	Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg), Lupron Depot-PED (30mg) (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Nivestym (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna Legacy (Performance) Prescription Drug List <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> </ul>	Pharmacy
		<ul style="list-style-type: none"> <li>Will be a preferred medication under the medical benefit <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>	<ul style="list-style-type: none"> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical
	Nucala syringe, Nucala auto-injector (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Ogivri (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Kanjinti, Trazimera.	Pharmacy
		Will no longer be a preferred medication under the medical benefit.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical
	Orencia syringe, Orencia clickjet (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA LEGACY (PERFORMANCE) PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Remicade (Pain Relief and Inflammatory Disease)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List <u>and</u></li> <li>Will have a change to its approval requirements ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>If you currently have approval for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> <li>If Cigna approves coverage of Remicade, it may cost you more to fill.<sup>4</sup></li> <li>Consider these preferred medications which are used to treat the same condition and may cost you less: Inflectra, Avsola.</li> </ul>	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>Remicade will no longer be a preferred medication under the Cigna medical benefit.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical
	Talicia (Gastrointestinal/Heartburn)	Will be available on the Cigna Legacy (Performance) Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Trelstar (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Ziextenzo (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Legacy (Performance) Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Nyvepria, Udenyca, Neulasta.	Pharmacy
		Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Zoladex (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.



## CIGNA TOTAL SAVINGS PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
December 1 <sup>st</sup>	Azstarys ( <i>Attention Deficit Hyperactivity Disorder</i> )	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Value Drug List.	Consider these covered options which are used to treat the same condition: methylphenidate ER/CD/LA; dexmethylphenidate ER	Pharmacy
	Brexafemme ( <i>Infections</i> )	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: fluconazole	Pharmacy
	Truseltiq ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Welireg ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
November 15 <sup>th</sup>	Empaveli ( <i>Miscellaneous</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Total Savings Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
November 1 <sup>st</sup>	Chantix ( <i>Smoking Cessation</i> )	<ul style="list-style-type: none"> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Exservan ( <i>Miscellaneous</i> )	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: riluzole, Tiglutik	Pharmacy
	Lumakra ( <i>Cancer</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.</li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Myfembree ( <i>Hormonal Agents</i> )	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Total Savings Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 15 <sup>th</sup>	Nextstellis ( <i>Contraception Products</i> )	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: Generic oral contraceptives (e.g. drospirenone-ethinyl estradiol)	Pharmacy
	Qelbree ( <i>Attention Deficit Hyperactivity Disorder</i> )	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: atomoxetine, clonidine ER, guanfacine ER	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA TOTAL SAVINGS PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 15 <sup>th</sup>	Zegalogue (Diabetes)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Total Savings Prescription Drug List.</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
October 7 <sup>th</sup>	ivermectin (Infections)	Will be available on the Cigna Total Savings Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Stromectol (Infections)	Will be available on the Cigna Total Savings Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
October 1 <sup>st</sup>	Elepsia XR (Seizure Disorders)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: levetiracetam ER	Pharmacy
	Estrace cream (Hormonal Agents)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: estradiol vaginal cream/tablet, Imvexxy, yuvafem	Pharmacy
	Estring (Hormonal Agents)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: estradiol vaginal cream/tablet, Imvexxy, yuvafem	Pharmacy
	Fortivda (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
	Ingrezza (Miscellaneous)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Linzess (Gastrointestinal/Heartburn)	Will move to a lower tier (preferred brand) on the Cigna Total Savings Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Osphena (Hormonal Agents)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: estradiol vaginal cream/tablet, Imvexxy, yuvafem	Pharmacy
	Ponvory (Multiple Sclerosis)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: dimethyl fumarate	Pharmacy
Premarin vaginal cream (Hormonal Agents)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: estradiol vaginal cream/tablet, Imvexxy, yuvafem	Pharmacy	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA TOTAL SAVINGS PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
October 1 <sup>st</sup>	Roszet (Cholesterol Medications)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: atorvastatin, ezetimibe, ezetimibe-simvastatin, lovastatin, pravastatin, rosuvastatin, simvastatin tablet	Pharmacy
	Vagifem (Hormonal Agents)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: estradiol vaginal cream/tablet, Imvexxy, yuvafem	Pharmacy
September 15 <sup>th</sup>	Prolate solution (Pain Relief and Inflammatory Disease)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: oxycodone w/ acetaminophen	Pharmacy
September 1 <sup>st</sup>	Kloxxado (Substance Abuse)	<ul style="list-style-type: none"> <li>▶ Will move to a lower tier (preferred brand) on the Cigna Total Savings Prescription Drug List and</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
August 15 <sup>th</sup>	Wegovy (Weight Management)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
July 20 <sup>th</sup>	Bronchitol (Asthma/COPD/Respiratory)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List and</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Nebusal 3%, Pulmosal, Pulmozyme, sodium chloride inhalation</li> </ul>	Pharmacy
	Ukoniq (Cancer)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List.</li> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization")</li> <li>▶ Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> <li>▶ Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Heparin 2,000 Unit/2 ML Vial (Blood Thinners/ Anti-Clotting)	Will move to a lower tier (generic) on the Cigna Total Savings Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin 5,000 Unit/ML Carpujct (Blood Thinners/ Anti-Clotting)	Will move to a lower tier (generic) on the Cigna Total Savings Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	Heparin Sod 5,000 Unit/ML syringe (Blood Thinners/ Anti-Clotting)	Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
July 12 <sup>th</sup>	Wegovy (Weight Management)	Will move to a lower tier (preferred brand) on the Cigna Total Savings Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
July 6 <sup>th</sup>	Lupkynis (Transplant Medications)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: tacrolimus, Benlysta.	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA TOTAL SAVINGS PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 6 <sup>th</sup>	Teqmetko (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List <a href="#">and</a></li> <li>Will need approval from Cigna before it can be covered ("prior authorization").</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: no preferred formulary alternatives available.</li> <li>Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
	Verquvo (Blood Pressure/Heart Medications)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	Consider these covered options which are used to treat the same condition: talk to your doctor about other alternatives.	Pharmacy
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Avsola (Pain Relief and Inflammatory Disease)	Will have a change to its coverage policy.	This is now a preferred medication under the medical benefit.	Medical
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Cimzia syringe (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Cystaran (Eye Conditions)	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna Total Savings Prescription Drug List. <sup>3</sup>	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you.</li> <li>For new prescriptions as of July 1<sup>st</sup>, your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Eligard (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Fasenra pen (auto-injector) (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Fensolvi (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Firmagon (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	FreeStyle Sensor 10,14, 2 (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
Fulphila (Blood Modifiers/Bleeding Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List.	Consider these preferred medications which are used to treat the same condition and may cost you less: Neulasta, Nivepria, Udenyca.	Pharmacy	
Granix (Blood Modifiers/ Bleeding Disorders)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical	

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA TOTAL SAVINGS PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Inflectra (Blood Modifiers/Bleeding Disorders)	Will move to a lower tier (preferred brand) on the Cigna Total Savings Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Medical
		Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.	Medical
	Ingrezza <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	If you're currently taking this medication, this change won't affect you. Consider these covered options which are used to treat the same condition: Austedo.	Pharmacy
	Kuvan Tablet & Packets <sup>5</sup> (Miscellaneous)	Will no longer be covered because it's being taken off the Cigna Total Savings Prescription Drug List.	<ul style="list-style-type: none"> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>. However, you're automatically approved for coverage of the generics.</li> <li>Consider these covered options which are used to treat the same condition: sapropterin tablet and power packet.</li> </ul>	Pharmacy
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg), Lupron Depot-PED (30mg) (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Nivestym (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>Will be a preferred medication under the medical benefit <u>and</u></li> <li>Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>	<ul style="list-style-type: none"> <li>Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical
	Nucala syringe, Nucala auto-injector (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Ogivri (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Kanjinti, Trazimera.	Pharmacy
		Will no longer be a preferred medication under the medical benefit.	<ul style="list-style-type: none"> <li>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical
Orencia syringe, Orencia clickjet (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical	
Remicade (Pain Relief and Inflammatory Disease)	Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</li> <li>Remicade will no longer be a preferred medication under the Cigna medical benefit.</li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>. If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical	

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## CIGNA TOTAL SAVINGS PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Trelstar <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Valtoco <i>(Seizure Disorders)</i>	Will be available on the Cigna Total Savings Prescription Drug List, but will need approval from Cigna before it can be covered ("prior authorization"). <sup>3</sup>	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Ziextenzo <i>(Blood Modifiers/Bleeding disorders)</i>	Will move to a higher tier (non-preferred brand) on the Cigna Total Savings Prescription Drug List	Consider these preferred medications which are used to treat the same condition and may cost you less: Neulasta, Nyvepia, Udencya.	Pharmacy
	Zoladex <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical

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## CIGNA NATIONAL PRESCRIPTION DRUG LIST

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
November 15 <sup>st</sup>	insulin glargine U100 pen <i>(Diabetes Agents)</i>	Will no longer be covered because it's being taken off the Cigna National Prescription Drug List.	Consider these covered options which are used to treat the same condition: LANTUS SOLOSTAR, LEVEMIR FLEXTOUCH, TOUJEO SOLOSTAR, TRESIBA FLEXTOUCH U-100	Pharmacy
	insuling glargine U100 syringe <i>(Diabetes Agents)</i>	Will no longer be covered because it's being taken off the Cigna National Prescription Drug List.	Consider these covered options which are used to treat the same condition: LANTUS SOLOSTAR, LEVEMIR FLEXTOUCH, TOUJEO SOLOSTAR, TRESIBA FLEXTOUCH U-100	Pharmacy
	WYNZORA 0.005%-0.064% CREAM <i>(Hormonal Agents)</i>	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: betamethasone dipropionate, calcipotriene (generic), calcipotriene-betamethasone dipropionate, clobetasol propionate, diflorasone diacetate, ENSTILAR	Pharmacy
October 15 <sup>th</sup>	Bynfezia Pen <i>(Hormonal Agents)</i>	<ul style="list-style-type: none"> <li>➤ Will no longer be covered until you try at least one alternative medication first<sup>3,5</sup> and</li> <li>➤ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>➤ Your doctor's office has to request coverage approval from Cigna.</li> <li>➤ Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Sandostatin <i>(Hormonal Agents)</i>	<ul style="list-style-type: none"> <li>➤ Will no longer be covered until you try at least one alternative medication first<sup>3,5</sup> and</li> <li>➤ Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>➤ Your doctor's office has to request coverage approval from Cigna.</li> <li>➤ Consider these options which are used to treat the same condition and may cost you less: Austedo</li> </ul>	Pharmacy
	Somatuline Depot <i>(Hormonal Agents)</i>	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna National Prescription Drug List.	Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Xeloda <i>(Cancer)</i>	Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna National Prescription Drug List.	Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
October 8 <sup>th</sup>	KERENDIA 10 MG TABLET KERENDIA 20 MG TABLET <i>(Diuretics)</i>	This medication will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill	Pharmacy
	SAPHNELO 300 MG/2 ML VIAL <i>(Pain relief and Inflammatory disease)</i>	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: BENLYSTA	Pharmacy
October 1 <sup>st</sup>	AZSTARYS 26.1 MG-5.2 MG CAP AZSTARYS 39.2 MG-7.8 MG CAP AZSTARYS 52.3 MG-10.4 MG CAP <i>(Attention Deficit Hyperactivity Disorder)</i>	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: dexamethylphenidate hcl er, methylphenidate hcl cd, methlyphenidate er, methylphenidate la, QUILLICHEW ER, QUILLIVANT XR	Pharmacy

## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
September 24 <sup>th</sup>	Feraheme vial ( <i>Nutritional/Dietary</i> )	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: ferumoxytol	Pharmacy
	Nexvazyme vial ( <i>Miscellaneous</i> )	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
	Rezurock tablet ( <i>Miscellaneous</i> )	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
	Rylaze vial ( <i>Cancer</i> )	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
	Sutent Capsule ( <i>Cancer</i> )	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: sunitinib	Pharmacy
	Welireg 40mg tablet ( <i>Cancer</i> )	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
September 15 <sup>th</sup>	Adipex-P 37.5 mg tablets, capsules ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Ayvakit ( <i>Cancer</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	benzphetamine ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Contrave ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Diethylpropion 25 mg tablets ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Diethylpropion ER 75 mg tablets ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Lomaira ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	phendimetrazine ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	phendimetrazine ER ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Qsymia ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Regimex ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Saxenda prefilled pens ( <i>Weight Management</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Trikafta ( <i>Asthma/COP/Respiratory</i> )	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy

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## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
September 15 <sup>th</sup>	Xenical (Weight Management)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
September 7 <sup>th</sup>	Ivermectin (Infections)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
September 3 <sup>rd</sup>	Accrufer 30 mg capsule (Nutritional/Dietary)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: ferrous fumarate (generic) etc, ferrous gluconate etc	Pharmacy
	Exservan 50mg film (Miscellaneous)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: riluzole	Pharmacy
	Myrbetriq ER 8 mg/ml susp (Urinary Tract Conditions)	Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy
August 20 <sup>th</sup>	Elespia XR 1,000mg, 1500mg tablet (Seizure Disorders)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: levetiracetam (er tablet)	Pharmacy
	Pemazyre 4.5mg, 9mg, 14.5mg tablet (Cancer)	Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy
August 16 <sup>th</sup>	Afinitor (Cancer)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Afinitor Disperz (Cancer)	Will have a quantity limit. <sup>3</sup>	Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
August 10 <sup>th</sup>	Apo-Varenicline 0.5mg, 1mg tab (Smoking Cessation)	Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy
	Clenia Plus 9%-4.25% susp (Skin Conditions)	Will no longer be covered because it's being taken off the Cigna National Prescription Drug List.	Consider these covered options which are used to treat the same condition: sodium sulfacetamide sulfur	Pharmacy
	Orgovyx 120mg tab (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. <sup>4</sup> Consider these options which are used to treat the same condition and may cost you less: Eligard, Firmagon	Pharmacy
	Naloxone 2mg Autoinj (Substance Abuse)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: naloxone (syr), Kloxxado, Narcan	Pharmacy
	Nextstellis 3-14.2mg tab (Contraception Products)	Will no longer be covered because it's being taken off the Cigna National Prescription Drug List.	Consider these covered options which are used to treat the same condition: aurovela fe, blisovi fe, drospirinone-ee, estarylla, junel fe, tri-sprintec, sprintec	Pharmacy
	Tavalisse 100mg, 150mg tab (Blood Modifiers/Bleeding Disorders)	Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy
August 6 <sup>th</sup>	Empaveli vial (Miscellaneous)	Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy
	Kloxxado 8mg nasal spray (Substance Abuse)	Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List.	This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.	Pharmacy

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## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
August 6 <sup>th</sup>	Lumakras tablet (Cancer)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.	Pharmacy
	Myfembree 40mg-1mg-0.5mg tab (Hormonal Agents)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization").</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your doctor's office has to request coverage approval from Cigna.</li> </ul>	Pharmacy
	Rybrevent 350mg/7ml vial (Cancer)	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List and</li> <li>Will need approval from Cigna before it can be covered ("prior authorization").<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.<sup>4</sup></li> <li>Consider these options which are used to treat the same condition and may cost you less: Talk to your doctor about other alternatives.</li> </ul>	Pharmacy
August 2 <sup>nd</sup>	Xywav (Sleep Disorders/Sedatives)	Will no longer require the trying of different medications ("step therapy")	Your doctor's office no longer has to request coverage approval from Cigna.	Pharmacy
July 23 <sup>rd</sup>	Qelbree ER 100mg, 150mg, 200mg cap (Attention Deficit Hyperactivity Disorder)	Will no longer be covered because it's being taken off the Cigna National Prescription Drug List.	Consider these covered options which are used to treat the same condition: atomoxetine, clonidine er, guanfacine er	Pharmacy
	Intelence 100mg, 200mg tablet (AIDS/HIV)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: etravirine	Pharmacy
	Kaletra 100-25mg, 200-50mg tablet (AIDS/HIV)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: lopinavir-ritonavir	Pharmacy
	Roszet 5-10mg, 10-10mg, 20-10mg, 40-10mg tablet (Cholesterol Medications)	Will move to a higher tier (non-preferred brand) on the Cigna National Prescription Drug List.	This medication may cost you more to fill. Consider these options which are used to treat the same condition and may cost you less: ezetimibe, atorvastatin, rosuvastatin	Pharmacy
	Zegalogue 0.6mg/0.6ml autoinj (Diabetes)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna National Prescription Drug List and</li> <li>Will have a quantity limit.<sup>3</sup></li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> <li>Your plan will only cover up to a certain amount of medication at one time.</li> </ul>	Pharmacy
July 16 <sup>th</sup>	Fotivda 0.89mg, 1.34mg cap (Cancer)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>Consider these covered options which are used to treat the same condition: everolimus, Cabometyx, Inlyta, Lenvima, Nexavar, Sutent, Votrient.</li> </ul>	Pharmacy
	Prolate 10mg-300mg/5ml soln (Pain Relief and Inflammatory Disease)	Will no longer be covered because it's being taken off the Cigna National Prescription Drug List.	Consider these covered options which are used to treat the same condition: oxycodone w/ acetaminophen (tabs).	Pharmacy
	Qelbree ER 100, 150mg 200mg cap (Attention Deficit Hyperactivity Disorder)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>Consider these covered options which are used to treat the same condition: atomoxetine, clonidine er, guanfaciner er.</li> </ul>	Pharmacy
July 15 <sup>th</sup>	Alkindi (Hormonal Agents)	Will no longer be covered because it's being taken off the Cigna National Prescription Drug List.	Consider these covered options which are used to treat the same condition: generic hydrocortisone tablets.	Pharmacy

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## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 15 <sup>th</sup>	Aubagio 7, 14mg tablets (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Bafiertam 95mg caps (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Condylox 0.5% gel (Skin Conditions)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	▶ Consider these covered options which are used to treat the same condition: generic podofilox 0.5% solution.	Pharmacy
	Dificid 70mg/ml oral suspension (Infections)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Gilenya 0.5mg capsules (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Hemady (Hormonal Agents)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	▶ Consider these covered options which are used to treat the same condition: generic desamethasone tablets.	Pharmacy
	Kesimpta 20mg/0.4ml prefilled syringe and sensoready pen (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Ponvory starter pack, 20mg tablets (Multiple Sclerosis)	▶ Will no longer be covered until you try at least one alternative medication first. <sup>3,5</sup> ▶ Will have a quantity limit. <sup>3</sup>	▶ Consider these covered options which are used to treat the same condition: generic glatiramer injection, generic dimethyl fumarate delayed-release capsules. ▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Revlimid 2.5, 5, 10, 15, 20, 25mg capsules (Cancer)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Tecfidera starter pack, 120, 240mg capsules (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Thalomid 50, 100, 150, 200mg capsules (Infections)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Tysabri 300mg/15ml vial (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Vumerity starter pack, 231mg capsules (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
	Zeposia 7-day starter pack, starter pack, 0.92mg capsules (Multiple Sclerosis)	▶ Will have a quantity limit. <sup>3</sup>	▶ Your plan will only cover up to a certain amount of medication at one time.	Pharmacy
July 2 <sup>nd</sup>	Banzel 200, 400mg tablet (Seizure Disorders)	▶ Will move to a higher tier (non-preferred brand) on the Cigna National Preferred Prescription Drug List.	▶ If Cigna approves coverage of this medication, it may cost you more to fill. ▶ Consider these covered options which are used to treat the same condition: rufinamide.	Pharmacy

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## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 2 <sup>nd</sup>	Ferriprox 500mg tablet <i>(Miscellaneous)</i>	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna National Preferred Prescription Drug List.</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these covered options which are used to treat the same condition: deferiprone.</li> </ul>	Pharmacy
	Jemperli 500mg/10ml vial <i>(Cancer)</i>	<ul style="list-style-type: none"> <li>Will move to a higher tier (non-preferred brand) on the Cigna National Preferred Prescription Drug List.</li> </ul>	<ul style="list-style-type: none"> <li>If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>Consider these covered options which are used to treat the same condition: carboplatin, cisplatin (generic).</li> </ul>	Pharmacy
July 1 <sup>st</sup>	Actemra syringe, Actemra ACTpen <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>This medication will only be covered under the Cigna pharmacy benefit.</li> <li><b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</b></li> </ul>	Medical
	Apokyn cartridge <sup>5</sup> <i>(Parkinson's Disease)</i>	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b> However, if you're currently taking this medication, this change won't affect you until your coverage approval period ends.</li> <li>Consider this covered option which is used to treat the same condition: Kynmobi.</li> </ul>	Pharmacy
	Avsola <i>(Pain Relief and Inflammatory Disease)</i>	Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Besivance suspension <sup>5</sup> <i>(Eye Conditions)</i>	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li>Consider these covered options which are used to treat the same condition: ciprofloxacin hcl, gatifloxacin, levofloxacin hemihydrate, moxifloxacin, ofloxacin.</li> </ul>	Pharmacy
	Betimol eye drops <sup>5</sup> <i>(Eye Conditions)</i>	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li>Consider these covered options which are used to treat the same condition: timolol maleate, betaxolol, levobunolol, Alphagan P, Combigan.</li> </ul>	Pharmacy
	Bijuva capsule <sup>5</sup> <i>(Hormonal Agents)</i>	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li>Consider these covered options which are used to treat the same condition: amabelz, estradiol-norethindrone acetate, fyavolv, jinteli, mimvey, norethindrone-ethinyl estradiol.</li> </ul>	Pharmacy
	Bromsite eye drops <sup>5</sup> <i>(Eye Conditions)</i>	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li>Consider these covered options which are used to treat the same condition: bromfenac sodium, diclofenac sodium, ketorolac tromethamine.</li> </ul>	Pharmacy
	Canasa suppository <sup>5</sup> <i>(Gastrointestinal/Heartburn)</i>	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li>Consider this covered option which is used to treat the same condition: mesalamine.</li> </ul>	Pharmacy
	Cimzia syringe <i>(Pain Relief and Inflammatory Disease)</i>	Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Avsola.	Medical
	Colcrys tablet <sup>5</sup> <i>(Pain Relief and Inflammatory Disease)</i>	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li><b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</b></li> <li>Consider this covered option which is used to treat the same condition: colchicine.</li> </ul>	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Corlanor tablet, Corlanor oral solution <sup>5</sup> (Blood Pressure/Heart Medications)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b> However, if you're currently taking this medication, this change won't affect you until your coverage approval period ends.</li> <li>▶ Consider these covered options which are used to treat the same condition: atenolol, bisoprolol, carvedilol, metoprolol succinate, metoprolol tartrate, propranolol.</li> </ul>	Pharmacy
	Cosopt PF eye drops <sup>5</sup> (Eye Conditions)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider this covered option which is used to treat the same condition: dorzolamide-timolol.</li> </ul>	Pharmacy
	Daliresp tablet <sup>5</sup> (Asthma/COPD/Respiratory)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ <b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: Arnuity Ellipta, Asmanex HFA, Flovent HFA, Incruse Ellipta, QVAR Redihaler, Serevent Diskus, Spiriva Respimat.</li> </ul>	Pharmacy
	Dexcom G6 Sensor, Dexcom G6 Transmitter (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Divigel gel packet <sup>5</sup> (Hormonal Agents)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider this covered option which is used to treat the same condition: estradiol (patches).</li> </ul>	Pharmacy
	Eligard (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Envarsus XR tablet <sup>5</sup> (Transplant Medications)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b> However, if you're currently taking this medication, this change won't affect you until your coverage approval period ends.</li> <li>▶ Consider this covered option which is used to treat the same condition: tacrolimus.</li> </ul>	Pharmacy
	Estring vaginal ring <sup>5</sup> (Hormonal Agents)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: estradiol (cream), estradiol (vaginal tablet), yuvafem, Premarin (cream).</li> </ul>	Pharmacy
	Evamist spray <sup>5</sup> (Hormonal Agents)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider this covered option which is used to treat the same condition: estradiol (patches).</li> </ul>	Pharmacy
	Eversense CGM System - sensor, transmitter (Diabetes)	▶ Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna National Preferred Prescription Drug List.	▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Fasenra pen (auto-injector) (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>▶ This medication will only be covered under the Cigna pharmacy benefit.</li> <li>▶ <b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</b></li> </ul>	Medical
	Fensolvi (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Firmagon (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Flarex eye drops <sup>5</sup> (Eye Conditions)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: dexamethasone sodium phosphate, fluorometholone, loteprednol etabonate, prednisolone acetate, Inveltys, Lotemax (ointment).</li> </ul>	Pharmacy
	FreeStyle Sensor 10, 14, 2 (Diabetes - CGMs)	Will no longer be covered under the medical benefit (benefit exclusion).	This diabetic supply will only be covered under the Cigna pharmacy benefit.	Medical
	Freestyle Libre CGM system - sensor, reader Freestyle Libre 2 CGM system - sensor, reader (Diabetes)	<ul style="list-style-type: none"> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna National Preferred Prescription Drug List.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Fulphila (Blood Modifiers/ Bleeding Disorders)	Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ <b>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</b></li> <li>▶ Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Granix (Blood Modifiers/ Bleeding Disorders)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Guardian Connect CGM system - sensor, transmitter, glucose monitor (Diabetes)	<ul style="list-style-type: none"> <li>▶ Will need approval from Cigna before it can be covered ("prior authorization") on the Cigna National Preferred Prescription Drug List.</li> </ul>	<ul style="list-style-type: none"> <li>▶ Your plan will only cover this medication if your doctor's office requests and receives approval from Cigna.</li> </ul>	Pharmacy
	Imvexxy maintenance pack, starter pack <sup>5</sup> (Cancer)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: estradiol (cream), estradiol (vaginal tablet), yuvafem, Premarin (cream).</li> </ul>	Pharmacy
	Inflectra (Pain Relief and Inflammatory Disease)	Will be a preferred medication under the medical benefit.	If you're currently using Remicade, ask your doctor if you should consider switching to Inflectra.	Medical
	Ingrezza Initiation Pack, 40, 80mg (Miscellaneous)	<ul style="list-style-type: none"> <li>▶ Will move to a higher tier (non-preferred brand) on the Cigna National Preferred Prescription Drug List.</li> </ul>	<ul style="list-style-type: none"> <li>▶ If Cigna approves coverage of this medication, it may cost you more to fill.</li> <li>▶ Consider these covered options which are used to treat the same condition: Austedo.</li> </ul>	Pharmacy
	Lupron Depot, Lupron Depot-PED (7.5mg, 11.25mg, 15mg, 30mg) (Miscellaneous)	Will need approval from Cigna before it can be covered ("precertification")	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Pharmacy
	Menest tablet <sup>5</sup> (Hormonal Agents)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider this covered option which is used to treat the same condition: estradiol (tablets).</li> </ul>	Pharmacy
	Nivestym (Blood Modifiers/Bleeding Disorders)	<ul style="list-style-type: none"> <li>▶ Will be a preferred medication under the medical benefit <u>and</u></li> <li>▶ Will no longer need approval from Cigna before it can be covered ("precertification").</li> </ul>	<ul style="list-style-type: none"> <li>▶ Your doctor's office no longer has to request coverage approval from Cigna.</li> <li>▶ If you're currently using Granix, ask your doctor if you should consider switching to Nivestym.</li> </ul>	Medical

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Northera capsule <sup>5</sup> (Blood Pressure/Heart Medications)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>› This change starts on July 14, 2021.</li> <li>› If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</li> <li>› Consider this covered option which is used to treat the same condition: droxidopa.</li> </ul>	Pharmacy
	Nucala syringe, Nucala auto-injector (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>› This medication will only be covered under the Cigna pharmacy benefit.</li> <li>› If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Ogivri (Cancer)	Will no longer be a preferred medication under the medical benefit.	<ul style="list-style-type: none"> <li>› If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</li> <li>› Consider these preferred medications, which are available under the Cigna medical benefit: Kanjinti, Trazimera.</li> </ul>	Medical
	Orencia syringe, Orencia clickjet (Pain Relief and Inflammatory Disease)	Will no longer be covered under the medical benefit (benefit exclusion).	<ul style="list-style-type: none"> <li>› This medication will only be covered under the Cigna pharmacy benefit.</li> <li>› If you currently have approval for your plan to cover this medication, it's important to know that approval will end on June 30<sup>th</sup>.</li> </ul>	Medical
	Pliaglis cream <sup>5</sup> (Pain Relief and Inflammatory Disease)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>› This change starts on July 14, 2021.</li> <li>› If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</li> <li>› Consider these covered options which are used to treat the same condition: lidocaine (cream), lidocaine/prilocaine (cream).</li> </ul>	Pharmacy
	Pulmicort Flexhaler <sup>5</sup> (Asthma/COPD/Respiratory)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>› This change starts on July 14, 2021.</li> <li>› If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</li> <li>› Consider these covered options which are used to treat the same condition: Arnuity Ellipta, Asmanex, Asmanex HFA, Flovent Diskus, Flovent HFA, QVAR Redihaler.</li> </ul>	Pharmacy
	QNASL nasal spray, QNASL Children's spray (Allergy/Nasal Sprays)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>› This change starts on July 14, 2021.</li> <li>› If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</li> <li>› Consider these covered options which are used to treat the same condition: betaxolol hcl, bimatoprost, dorzolamide-timolol, latanoprost, levobunolol hcl, timolol maleate, travoprost.</li> </ul>	Pharmacy

## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Remicade (Pain Relief and Inflammatory Disease)	Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li>▶ <b>This change won't affect you if you're currently taking Remicade to treat Polyarticular Juvenile Idiopathic Arthritis (pJIA).</b></li> <li>▶ Remicade will no longer be a preferred medication under the Cigna medical benefit. Consider these preferred medications, which are available under the Cigna medical benefit: Inflectra, Avsola.</li> <li>▶ <b>If you currently have approval (precertification) for your plan to cover Remicade, it's important to know that approval will end on June 30<sup>th</sup>.</b> If you were approved for coverage past July 1<sup>st</sup> and your doctor wants you to continue using Remicade, you may be able to appeal this decision.</li> </ul>	Medical
	Rhopressa ophth solution <sup>5</sup> (Eye Conditions)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: betaxolol hcl, bimatoprost, dorzolamide-timolol, latanoprost, levobunolol hcl, timolol maleate, travoprost.</li> </ul>	Pharmacy
	Rocklatan eye drops <sup>5</sup> (Eye Conditions)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ <b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: betaxolol hcl, bimatoprost, dorzolamide-timolol, latanoprost, levobunolol hcl, timolol maleate, travoprost.</li> </ul>	Pharmacy
	Saphris tab sublingual <sup>5</sup> (Schizophrenia/ Anti-Psychotics)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ <b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</b></li> <li>▶ Consider this covered option which is used to treat the same condition: asenapine maleate.</li> </ul>	Pharmacy
	Tirosint capsule; Tirosint Sol solution <sup>5</sup> (Hormonal Agents)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: euthyrox, levo-t, levothyroxine sodium, levoxyl, unithroid.</li> </ul>	Pharmacy
	Tobradex ST eye drops <sup>5</sup> (Eye conditions)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider these covered options which are used to treat the same condition: tobramycin/dexamethasone (drops), Tobradex (ointment).</li> </ul>	Pharmacy
	Trelstar (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Truvada tablet <sup>5</sup> (AIDS/HIV)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li>▶ <b>This change starts on July 14, 2021.</b></li> <li>▶ Consider this covered option which is used to treat the same condition: emtricitabine/tenofovir (tdf).</li> </ul>	Pharmacy



## CIGNA NATIONAL PRESCRIPTION DRUG LIST (cont)

DATE CHANGE STARTS	MEDICATION NAME/DRUG CLASS	WHAT'S CHANGING	ADDITIONAL INFORMATION	BENEFIT IT'S COVERED UNDER
July 1 <sup>st</sup>	Wegovy 0.25mg/0.5ml, 0.5mg/0.5ml, 1mg/0.5ml, 1.7mg/0.75ml, 2.4mg/0.75 ml pen (Weight Management)	<ul style="list-style-type: none"> <li>Will move to a lower tier (preferred brand) on the Cigna National Preferred Prescription Drug List.</li> </ul>	<ul style="list-style-type: none"> <li>This medication will move, or recently moved, to preferred brand. This means it may cost you less to fill.</li> </ul>	Pharmacy
	Welchol tablet <sup>s</sup> (Cholesterol Medications)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li><b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</b></li> <li>Consider this covered option which is used to treat the same condition: colesevelam hcl.</li> </ul>	Pharmacy
	Ziextenzo (Blood Modifiers/Bleeding Disorders)	Will have a change to its coverage policy.	<ul style="list-style-type: none"> <li><b>If you're currently taking this medication, this change won't affect you until your current coverage approval ends.</b></li> <li>Consider these preferred medications, which are available under the Cigna medical benefit: Nyvepria, Udenyca, Neulasta.</li> </ul>	Medical
	Zoladex (Hormonal Agents)	Will need approval from Cigna before it can be covered ("precertification").	Your plan only covers this medication if your doctor's office requests and receives approval from Cigna.	Medical
	Zylet eye drops <sup>s</sup> (Eye Conditions)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li>Consider these covered options which are used to treat the same condition: tobramycin/dexamethasone (drops), Tobradex (ointment).</li> </ul>	Pharmacy
	Zytiga 500mg tablet <sup>s</sup> (Cancer)	Will no longer be covered because it's being taken off of the Cigna National Preferred Prescription Drug List.	<ul style="list-style-type: none"> <li><b>This change starts on July 14, 2021.</b></li> <li><b>If you currently have approval for your plan to cover this medication, it's important to know that approval will end on July 13<sup>th</sup>.</b></li> <li>Consider this covered option which is used to treat the same condition: abiraterone acetate.</li> </ul>	Pharmacy

Generic medications start with a lowercase letter and brand-name medications start with a capital letter.

1. State laws in **Texas** and **Louisiana** may require your plan to cover your medication at your current benefit level until your plan renews. This means that if your medication is taken off the drug list, is moved to a higher cost-share tier or needs approval from Cigna before your plan will cover it, these changes may not begin until your plan's renewal date. To find out if these state laws apply to your plan, please call Customer Service using the number on your Cigna ID card.
2. State law in **Illinois** may require your plan to cover your medications at your current benefit level until your plan renews. This means that if you currently have approval through a review process for your plan to cover your medication, the drug list change(s) listed here may not affect you until your plan renewal date. If you don't currently have approval through a coverage review process, you may continue to receive coverage at your current benefit level if your doctor requests it. To find out if this state law applies to your plan, please call Customer Service using the number on your Cigna ID card.
3. **This change may not apply to your specific plan.** Log in to the myCigna App® or myCigna.com to find out if this medication requires prior authorization.
4. This is a specialty medication. **If your plan covers specialty medications on a specialty tier, this change won't affect its cost.** Log in to the myCigna App or myCigna.com to learn more about how your plan covers specialty medications.
5. This medication needs approval from Cigna before your plan will cover it. If your doctor feels an alternative medication isn't right for you, he or she can ask Cigna to consider approving coverage of your medication. If you don't get approval and you continue to fill this prescription on or after July 1<sup>st</sup>, you'll pay its full cost-out-of-pocket directly to the pharmacy. Also, the cost can't be applied to your annual deductible or out-of-pocket maximum.



#### Questions?

- Click to Chat on **myCigna.com**, Monday–Friday, 9:00 am–8:00 pm EST.
- Call the number on your Cigna ID card, 24/7/365.



Cigna reserves the right to make changes to the Drug List without notice. Your plan may cover additional medications; please refer to your enrollment materials for details. Cigna does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna may receive payments from manufacturers of certain preferred brand medications, and in limited instances, certain non-preferred brand medications, that may or may not be shared with your plan depending on its arrangement with Cigna. Depending upon plan design, market conditions, the extent to which manufacturer payments are shared with your plan and other factors as of the date of service, the preferred brand medication may or may not represent the lowest-cost brand medication within its class for you and/or your plan.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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