

# Quick Guide to Heart Care Medications

## 2007 Aetna Preferred Drug List for Commercial Plans\*

LOWEST TIER Generic drugs on the Preferred Drug List	MIDDLE TIER Brand-name drugs on the Preferred Drug List	HIGHEST TIER Brand-name drugs not on the Preferred Drug List
<b>ACE Inhibitors AND Angiotensin Receptor Blockers (ARBs)</b>		
<i>benazepril</i> QL <i>captopril</i> QL <i>enalapril</i> QL <i>fosinopril</i> QL <i>lisinopril</i> QL <i>quinapril</i> QL	ALTACE ( <i>ramipril</i> ) QL COZAAR ( <i>losartan</i> ) QL DIOVAN ( <i>valsartan</i> ) QL	ACCUPRIL ( <i>quinapril</i> ) FE, QL, ST ACEON ( <i>perindopril</i> ) FE, QL ATACAND ( <i>candesartan</i> ) FE, QL, ST AVAPRO ( <i>irbesartan</i> ) FE, QL, ST BENICAR ( <i>olmesartan</i> ) FE, QL CAPOTEN ( <i>captopril</i> ) FE, QL LOTENSIN ( <i>benazepril</i> ) FE, QL LYTENSOPRIL (HYPERTENSA/ <i>lisinopril</i> ) FE MAVIK ( <i>trandolapril</i> ) FE, QL MICARDIS ( <i>telmisartan</i> ) FE, QL MONOPRIL ( <i>fosinopril</i> ) FE, QL PRINIVIL ( <i>lisinopril</i> ) FE, QL TEVETEN ( <i>eprosartan</i> ) FE, QL UNIVASC ( <i>moexipril</i> ) FE, QL VASOTEC ( <i>enalapril</i> ) FE, QL ZESTRIL ( <i>lisinopril</i> ) FE, QL
<b>Beta Blockers</b>		
<i>acebutolol</i> <i>atenolol</i> <i>betaxolol</i> <i>bisoprolol</i> <i>metoprolol</i> <i>nadolol</i> <i>pindolol</i> <i>propranolol</i> <i>sorine</i> <i>sotalol</i> <i>timolol</i>	COREG ( <i>carvedilol</i> )	BETAPACE/AF ( <i>sotalol</i> ) BLOCADREN ( <i>timolol</i> ) CARTROL ( <i>carteolol</i> ) FE CORGARD ( <i>nadolol</i> ) INDERAL/LA ( <i>propranolol</i> ) INNOPRAN XL ( <i>propranolol</i> ) KERLONE ( <i>betaxolol</i> ) FE LEVATOL ( <i>penbutolol</i> ) FE LOPRESSOR ( <i>metoprolol</i> ) FE SECTRAL ( <i>acebutolol</i> ) TENORMIN ( <i>atenolol</i> ) TOPROL XL ( <i>metoprolol SR</i> ) FE ZEBETA ( <i>bisoprolol</i> ) FE
<b>Blood Thinners</b>		
<i>aspirin</i> (OTC) <i>ticlopidine</i> <i>warfarin</i>	PLAVIX ( <i>clopidogrel</i> ) #	COUMADIN ( <i>warfarin sodium</i> ) FE TICLID ( <i>ticlopidine</i> )
<b>Lipid Lowering Drugs</b>		
<i>cholestyramine</i> <i>colestipol</i> <i>fenofibrate</i> <i>gemfibrozil</i> <i>lovastatin</i> QL <i>pravastatin</i> QL <i>prevalite</i> <i>simvastatin</i> QL	ADVICOR ( <i>niacin/lovastatin</i> ) QL ANTARA ( <i>fenofibrate</i> ) CRESTOR 5 mg ( <i>rosuvastatin</i> ) QL, ST CRESTOR 10, 20 and 40 mg ( <i>rosuvastatin</i> ) QL LESCOL ( <i>fluvastatin</i> ) QL LESCOL XL ( <i>fluvastatin</i> ) QL NIASPAN ( <i>niacin</i> ) TRICOR ( <i>fenofibrate</i> ) # VYTORIN 10/10 ( <i>ezetimibe/simvastatin</i> ) QL,ST VYTORIN 10/20, 10/40, 10/80 ( <i>ezetimibe/simvastatin</i> ) QL WELCHOL ( <i>colesevelam</i> ) ZETIA ( <i>ezetimibe</i> ) QL	ALTOPREV ( <i>lovastatin SR</i> ) FE, QL, ST COLESTID ( <i>colestipol</i> ) FE LIPEX ( <i>simvastatin</i> ) FE LIPITOR ( <i>atorvastatin</i> ) FE, QL, ST LOFIBRA ( <i>fenofibrate micronized</i> ) FE LOPID ( <i>gemfibrozil</i> ) FE MEVACOR ( <i>lovastatin</i> ) FE, QL, ST OMACOR ( <i>omega-3-acid ethyl esters 90</i> ) FE PRAVACHOL ( <i>pravastatin</i> ) FE, QL, ST QUESTRAN ( <i>cholestyramine</i> ) FE TRIGLIDE ( <i>fenofibrate</i> ) FE ZOCOR ( <i>simvastatin</i> ) FE, QL, ST

\* Commercial plans = Non-Medicare plans

UPPERCASE - Brand-name medication

lowercase italics - generic medication

FE - Formulary-excluded medication

QL - Quantity Limit applies under most plans

ST = Step-therapy applies under some plans

# = Brand-name medication expected to become available generically during 2007. After the generic medication becomes available, the brand-name medication may be covered at a higher copay and/or added to the Formulary Exclusions List.

The Preferred Drug List, Formulary Exclusions, Precertification, Quantity Limit and Step-Therapy Lists are subject to change. Also note that Step-Therapy, Precertification and Quantity Limit programs, are not applicable in all service areas.

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# Pharmacy Benefits Reference

## 2007 Aetna Preferred Drug List

The choices you and your patients make regarding prescription medications affect health care costs. Drug prices are a prime contributor to the recent significant increases in the cost of insurance.

## The savings can add up

If your patient's benefits plan has a higher copayment for nonpreferred drugs, and if you feel that a preferred generic drug or a preferred drug is appropriate for your patient, he or she can begin saving money immediately. Here's an example:

**1**  
If your patient is currently taking a **Nonpreferred Drug** and the copayment is **\$35** per month, your patient's total cost is **\$420** per year.\*

**2**  
If your patient is switched to a **Preferred Generic Drug** and the copayment is **\$10** per month, your patient's total cost is **\$120** per year.\*

**3**  
Your patient can save **\$300** per year on just one prescription medication by switching to a preferred generic drug.

**1**  
If your patient is currently taking a **Nonpreferred Drug** and the copayment is **\$35** per month, your patient's total cost is **\$420** per year.\*

**2**  
If your patient is switched to a **Brand-Name Preferred Drug** and the copayment is **\$20** per month, your patient's total cost is **\$240** per year.\*

**3**  
Your patient can save **\$180** per year on just one prescription medication by switching to a preferred brand-name drug.

\*Calculations based on 12 prescriptions per year.

All member care and related decisions are the sole responsibility of the physician, and this information does not dictate or control physicians' clinical decisions regarding the appropriate care of members. Pharmacy benefits are not limited to the drugs on the Preferred Drug List. Drugs on the Formulary Exclusions List may be excluded from coverage under some pharmacy benefits plans unless a medical exception is obtained. Many drugs on the Preferred Drug List are subject to manufacturer rebate arrangements between Aetna and the manufacturer of those drugs.

In accordance with state law, commercial California HMO members enrolled in a closed formulary benefits plan who are receiving coverage for medications that are moved to the Formulary Exclusions List, and commercial California HMO members who are receiving coverage for medications that are added to the Precertification or Step-Therapy lists will continue to have those medications covered, for as long as the treating physician continues prescribing them, provided that the drug is appropriately prescribed and is considered safe and effective for treating the enrollee's medical condition. Nothing in this section shall preclude the prescribing provider from prescribing another drug covered by the plan that is medically appropriate for the enrollee, nor shall anything in this section be construed to prohibit generic drug substitutions. This regulation does not apply to Medicare plans.

The Preferred Drug List, Formulary Exclusions, Precertification, Quantity Limit and Step-Therapy Lists are subject to change. Also note that step-therapy, precertification and quantity limit programs are not applicable in all service areas. For example, Step-Therapy does not apply to fully insured commercial members in New Jersey and Indiana.

For commercial members in Texas, additions to the 2007 Preferred Drug List will be effective no later than January 1, 2007. In accordance with state law, full-risk commercial members in Texas who are receiving coverage for medications that are removed from the Preferred Drug List during the plan year will continue to have those medications covered at the same benefit level until their plan renewal date. This regulation does not apply to Medicare plans.

Aetna is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. The Aetna companies that offer, underwrite or administer benefits coverage are Aetna Health Inc., Aetna Health of California Inc., Aetna Health of Illinois Inc., and/or Aetna Life Insurance Company. Aetna Pharmacy Management refers to an internal business unit of Aetna Health Management, LLC.

To submit medical exception or precertification requests for prescription medications:

- Fax the Precertification unit, toll free at 1-800-408-2386.
- Call the Precertification unit, toll free at 1-800-414-2386.
- To submit requests online, go to: [www.aetna.com](http://www.aetna.com), put your cursor on "for Health Care Professionals" and select "Physician Self-Service" to register for the secure website for Health Care Professionals.

Current drug information is available online at [www.aetna.com/formulary](http://www.aetna.com/formulary).