



## **IMPORTANT – Additional coverage being provided by the State of Delaware**

The State of Delaware is providing additional coverage of the drugs listed below to ensure that your copayments remain similar to what you experienced in your prior State of Delaware-sponsored prescription drug plan.

The following drugs may appear as Tier 3 Non-Preferred Brand Drugs in either the enclosed formulary or on the plan's website. However, as a result of this additional coverage, you will only be charged the applicable **Tier 2 Preferred Brand Drugs copayment** when you fill your prescription at a network pharmacy.

This list is current as of September 1, 2015, and additional drugs may be added from time to time.

If you have any questions regarding your prescription drug coverage, please contact Express Scripts Medicare Customer Service at **1.877.680.4883** (TTY users only: **1.800.716.3231**). Customer Service is available 24 hours a day, 7 days a week.

<u>Drug Name</u>	<u>Drug Name</u>	<u>Drug Name</u>
ABSORICA 10 MG CAPSULE	ADRENACLICK 0.3 MG AUTO-INJECT	ARISTOSPAN 20 MG/ML VIAL
ABSORICA 20 MG CAPSULE	ALBUTEROL SULF HFA 90 MCG INH	ARISTOSPAN 5 MG/ML VIAL
ABSORICA 25 MG CAPSULE	ALORA 0.025 MG PATCH	ARMOUR THYROID 120 MG TABLET
ABSORICA 30 MG CAPSULE	ALORA 0.05 MG PATCH	ARMOUR THYROID 15 MG TABLET
ABSORICA 35 MG CAPSULE	ALORA 0.075 MG PATCH	ARMOUR THYROID 180 MG TABLET
ABSORICA 40 MG CAPSULE	ALORA 0.1 MG PATCH	ARMOUR THYROID 240 MG TABLET
ACANYA GEL PUMP	AMMONIUM CHLORIDE 5 MEQ/ML	ARMOUR THYROID 30 MG TABLET
ACTHREL 100 MCG VIAL	AMMONUL 10%-10% VIAL	ARMOUR THYROID 300 MG TABLET
ACTOPLUS MET XR 15-1,000 MG TB	AMYTAL SODIUM 0.5 GRAM VIAL	ARMOUR THYROID 60 MG TABLET
ACTOPLUS MET XR 30-1,000 MG TB	ANALPRAM HC 2.5% LOTION	
ACZONE 5% GEL	ARGATROBAN-NACL 50 MG/50 ML VL	
ADAPALENE 0.1% LOTION		
ADRENACLICK 0.15 MG AUTO-INJECT		

ARMOUR THYROID 90 MG TABLET	CLINIMIX E 4.25%-5% SOLUTION	ELIDEL 1% CREAM
ATRALIN 0.05% GEL	CLINIMIX E 5%-15% SOLUTION	ELIGARD 22.5 MG SYRINGE KIT
AUVI-Q 0.15 MG AUTO-INJECTOR	CLINIMIX E 5%-20% SOLUTION	ELIGARD 30 MG SYRINGE KIT
AUVI-Q 0.3 MG AUTO-INJECTOR	CLINIMIX E 5%-25% SOLUTION	ELIGARD 45 MG SYRINGE KIT
AVELOX IV 400 MG/250 ML	COMBIPATCH 0.05-0.14 MG PTCH	ELIGARD 7.5 MG SYRINGE KIT
AXIRON 30 MG/ ACTUATION SOLN	COMBIPATCH 0.05-0.25 MG PTCH	ENJUVIA 0.3 MG TABLET
AZASAN 100 MG TABLET	CRINONE 4% GEL	ENJUVIA 0.45 MG TABLET
AZASAN 75 MG TABLET	CRINONE 8% GEL	ENJUVIA 0.625 MG TABLET
BAL IN OIL 100 MG/ML AMPULE	DALVANCE 500 MG VIAL	ENJUVIA 0.9 MG TABLET
BEYAZ 28 TABLET	DAYTRANA 10 MG/9 HR PATCH	ENJUVIA 1.25 MG TABLET
BICNU 100 MG VIAL	DAYTRANA 15 MG/9 HR PATCH	EPIDUO 0.1-2.5% GEL
BLOXIVERZ 10 MG/10 ML VIAL	DAYTRANA 20 MG/9 HOUR PATCH	EPIDUO 0.1-2.5% GEL PUMP
BLOXIVERZ 5 MG/10 ML VIAL	DAYTRANA 30 MG/9 HOUR PATCH	EPIPEN 2-PAK 0.3 MG AUTO-INJECT
BRISDELLE 7.5 MG CAPSULE	DEPO-ESTRADIOL 5 MG/ML VIAL	ESTRING 2 MG VAGINAL RING
CANASA 1,000 MG SUPPOSITORY	DIBENZYLINE 10 MG CAPSULE	ETOPOPHOS 100 MG VIAL
CAPASTAT SULFATE 1 GM VIAL	DIFFERIN 0.1% LOTION	EVAMIST 1.53 MG/SPRAY
CARBOCAINE 2% VIAL	DILATRATE-SR 40 MG CAPSULE	FENOFIBRATE 150 MG CAPSULE
CEFTAZIDIME 1 GM PIGGYBACK	DIVIGEL 0.25 MG GEL PACKET	FENOFIBRATE 50 MG CAPSULE
CEFTAZIDIME 2 GM PIGGYBACK	DIVIGEL 0.5 MG GEL PACKET	FINACEA 15% GEL
CLINIMIX E 2.75%-10% SOLUTION	DIVIGEL 1 MG GEL PACKET	FLOLAN 0.5 MG VIAL
CLINIMIX E 2.75%-5% SOLUTION	DORIBAX 250 MG VIAL	FLOLAN 1.5 MG VIAL
CLINIMIX E 4.25%-10% SOLUTION	DORIBAX 500 MG VIAL	FOCALIN XR 25 MG CAPSULE
CLINIMIX E 4.25%-25% SOLUTION	DOXYCYCLINE IR-DR 40 MG CAP	FOCALIN XR 35 MG CAPSULE
		FOSRENOL 1,000 MG POWDER PACK
		FOSRENOL 1,000 MG TABLET CHEW

FOSRENOL 500 MG TABLET CHEW	HYSINGLA ER 60 MG TABLET	LIPTRUZET 10-80 MG TABLET
FOSRENOL 750 MG POWDER PACKET	IMOGAM RABIES-HT 150 UNIT/ML	LO LOESTRIN FE 1-10 TABLET
FOSRENOL 750 MG TABLET CHEW	INCRUSE ELLIPTA 62.5 MCG INH	MEMANTINE 5-10 MG TITRATION PK
FRAGMIN 2,500 UNITS/ 0.2 ML SYR	INTEGRILIN 20 MG/10 ML VIAL	METHITEST 10 MG TABLET
FRAGMIN 5,000 UNITS/ 0.2 ML SYR	INTEGRILIN 200 MG/100 ML VIAL	MIACALCIN 200 UNIT/ML VIAL
GABLOFEN 10,000 MCG/ 20 ML VIAL	INTEGRILIN 75 MG/100 ML VIAL	MINASTRIN 24 FE CHEWABLE TAB
GABLOFEN 40,000 MCG/ 20 ML VIAL	INVANZ 1 GM ADD- VANTAGE VIAL	MINIVELLE 0.025 MG PATCH
GABLOFEN 50 MCG/ML SYRINGE	INVANZ 1 GM VIAL	MINIVELLE 0.0375 MG PATCH
GELNIQUE 10% GEL SACHETS	ISOTON GENTAMICIN 100 MG/50 ML	MINIVELLE 0.05 MG PATCH
GELNIQUE 3% GEL	JARDIANCE 10 MG TABLET	MINIVELLE 0.075 MG PATCH
GENOTROPIN MINIQUICK 0.2 MG	JARDIANCE 25 MG TABLET	MINIVELLE 0.1 MG PATCH
GLYCOPHOS VIAL	KENALOG-10 10 MG/ML VIAL	MIRAPEX ER 2.25 MG TABLET
HECTOROL 2 MCG/ML VIAL	LAMICTAL XR START KIT (BLUE)	MIRAPEX ER 3.75 MG TABLET
HEMABATE 250 MCG/ML AMPUL	LAMICTAL XR START KIT (GREEN)	MIRAPEX ER 4.5 MG TABLET
HEPAGAM B VIAL	LAMICTAL XR START KIT (ORANGE)	MIRVASO 0.33% GEL
HEXTEND 6%-LACT ELEC BAG	LANOXIN PED 100 MCG/ML AMPUL	MOVIPREP POWDER PACKET
HYPERRAB S-D 150 UNITS/ML VIAL	LEVOTHYROXINE 100 MCG VIAL	MOXEZA 0.5% EYE DROPS
HYPERTET S-D 250 UNITS SYRINGE	LIPOFEN 150 MG CAPSULE	MUSTARGEN 10 MG VIAL
HYSINGLA ER 20 MG TABLET	LIPOFEN 50 MG CAPSULE	MYOBLOC 10,000 UNITS/2 ML VIAL
HYSINGLA ER 30 MG TABLET	LIPTRUZET 10-10 MG TABLET	MYOBLOC 2,500 UNIT/ 0.5 ML VIAL
HYSINGLA ER 40 MG TABLET	LIPTRUZET 10-20 MG TABLET	MYOBLOC 5,000 UNITS/ 1 ML VIAL
	LIPTRUZET 10-40 MG TABLET	NAMENDA 5-10 MG TITRATION PK

NAROPIN 0.2% 20 MG/ 10 ML AMP	NUCYNTA ER 100 MG TABLET	PRAMOSONE 1% CREAM
NAROPIN 0.2% 40 MG/ 20 ML AMP	NUCYNTA ER 150 MG TABLET	PRAMOSONE 1% LOTION
NAROPIN 0.2% 400 MG/ 200 ML BTL	NUCYNTA ER 200 MG TABLET	PRAMOSONE 2.5% LOTION
NAROPIN 0.5% 100 MG/ 20 ML AMP	NUCYNTA ER 250 MG TABLET	PRANDIMET 1 MG-500 MG TABLET
NAROPIN 0.75% 150 MG/ 20 ML AMP	NUCYNTA ER 50 MG TABLET	PRANDIMET 2 MG-500 MG TABLET
NAROPIN 1% 100 MG/ 10 ML AMPULE	NUVARING VAGINAL RING	PRED MILD 0.12% EYE DROPS
NAROPIN 1% 200 MG/ 20 ML AMPULE	NUVIGIL 150 MG TABLET	PREMARIN 25 MG VIAL
NAROPIN 2 MG/ML INFUSION BTL	NUVIGIL 200 MG TABLET	PREMPHASE 0.625-5 MG TABLET
NAROPIN 200 MG/100 ML INF BTL	NUVIGIL 250 MG TABLET	PREMPRO 0.3 MG-1.5 MG TABLET
NATAZIA 28 TABLET	NUVIGIL 50 MG TABLET	PREMPRO 0.45-1.5 MG TABLET
NATRECOR 1.5 MG VIAL	ONEXTON GEL PUMP	PREMPRO 0.625-2.5 MG TABLET
NEMBUTAL SODIUM 50 MG/ML VIAL	OPANA ER 10 MG TABLET	PREMPRO 0.625-5 MG TABLET
NEOPROFEN 20 MG/2 ML VIAL	OPANA ER 15 MG TABLET	PRIALT 100 MCG/ML VIAL
NEOSTIGMINE 10 MG/10 ML VIAL	OPANA ER 20 MG TABLET	PRIALT 25 MCG/ML VIAL
NEOSTIGMINE 5 MG/10 ML VIAL	OPANA ER 30 MG TABLET	PROAIR HFA 90 MCG INHALER
NESACAINE 1% VIAL	OPANA ER 5 MG TABLET	PROCALAMINE IV SOLUTION
NEUT 4% VIAL	OPANA ER 7.5 MG TABLET	PROCTOFOAM-HC 1%-1% FOAM
NEXTERONE 150 MG/ 100 ML BAG	ORACEA 40 MG CAPSULE	PROSOL 20% INJECTION
NEXTERONE 360 MG/ 200 ML BAG	OTREXUP 20 MG/0.4 ML AUTO-INJ	PROTOPAM CHLORIDE 1 GM VIAL
NORMOSOL-M AND DEXTROSE 5%	OXSORALEN 1% LOTION	PROVENTIL HFA 90 MCG INHALER
NUCYNTA 100 MG TABLET	OXTELLAR XR 150 MG TABLET	QNASL 80 MCG NASAL SPRAY
NUCYNTA 50 MG TABLET	OXTELLAR XR 300 MG TABLET	QNASL CHILDREN'S 40 MCG SPRAY
NUCYNTA 75 MG TABLET	OXTELLAR XR 600 MG TABLET	QUILLIVANT XR 25 MG/ 5 ML SUSP
	PANHEMATIN 313 MG VIAL	
	PATANOL 0.1% EYE DROPS	
	PHOSPHOLINE IODIDE 0.125%	
	POLOCAINE 2% VIAL	

RASUVO 10 MG/0.2 ML AUTOINJ	SUMAVEL DOSEPRO 6 MG/0.5 ML	TREXALL 5 MG TABLET
RASUVO 12.5 MG/0.25 ML AUTOINJ	SUPPRELIN LA 50 MG KIT	TREXALL 7.5 MG TABLET
RASUVO 15 MG/0.3 ML AUTOINJ	TACLONEX 0.005%-0.064% SUSPENS	TREXIMET 85-500 MG TABLET
RASUVO 17.5 MG/0.35 ML AUTOINJ	TEFLARO 400 MG VIAL	TRULICITY 0.75 MG/0.5 ML PEN
RASUVO 20 MG/0.4 ML AUTOINJ	TEFLARO 600 MG VIAL	TRULICITY 1.5 MG/0.5 ML PEN
RASUVO 22.5 MG/0.45 ML AUTOINJ	TEKAMLO 150 MG-10 MG TABLET	UVADEX 20 MCG/ML VIAL
RASUVO 25 MG/0.5 ML AUTOINJ	TEKAMLO 150 MG-5 MG TABLET	VAGIFEM 10 MCG VAGINAL TAB
RASUVO 27.5 MG/0.55 ML AUTOINJ	TEKAMLO 300 MG-10 MG TABLET	VANTAS 50 MG KIT
RASUVO 30 MG/0.6 ML AUTOINJ	TEKAMLO 300 MG-5 MG TABLET	VELTIN GEL
RASUVO 7.5 MG/0.15 ML AUTOINJ	TEKTURNA 150 MG TABLET	VENTOLIN HFA 90 MCG INHALER
REOPRO 2 MG/ML VIAL	TEKTURNA 300 MG TABLET	VIGAMOX 0.5% EYE DROPS
ROBAXIN 1,000 MG/10 ML VIAL	TEKTURNA HCT 150-12.5 MG TAB	VIVELLE-DOT 0.025 MG PATCH
SAFYRAL TABLET	TEKTURNA HCT 150-25 MG TABLET	VIVELLE-DOT 0.0375 MG PATCH
SENSORCAINE-EPI 0.75%-0.0005	TEKTURNA HCT 300-12.5 MG TAB	VIVELLE-DOT 0.05 MG PATCH
SIMCOR 1,000-20 MG TABLET	TEKTURNA HCT 300-25 MG TABLET	VIVELLE-DOT 0.075 MG PATCH
SIMCOR 1,000-40 MG TABLET	THERACYS 81 MG VIAL	VIVELLE-DOT 0.1 MG PATCH
SIMCOR 500-20 MG TABLET	THROMBATE III 500 UNITS VIAL	VOLUVEN INJECTION
SIMCOR 500-40 MG TABLET	TIMENTIN 31 GM BULK VIAL	VYTORIN 10-10 MG TABLET
SIMCOR 750-20 MG TABLET	TOBRADEX EYE OINTMENT	VYTORIN 10-20 MG TABLET
SOTALOL HCL 150 MG/ 10 ML VIAL	TOBRADEX ST EYE DROPS	VYTORIN 10-40 MG TABLET
SOTRADECOL 1% VIAL	TRANSDERM-SCOP 1.5 MG/3 DAY	VYTORIN 10-80 MG TABLET
SOTRADECOL 3% VIAL	TREXALL 10 MG TABLET	VYVANSE 10 MG CAPSULE
SUMAVEL DOSEPRO 4 MG/0.5 ML	TREXALL 15 MG TABLET	VYVANSE 20 MG CAPSULE
		VYVANSE 30 MG CAPSULE

VYVANSE 40 MG CAPSULE  
VYVANSE 50 MG CAPSULE  
VYVANSE 60 MG CAPSULE  
VYVANSE 70 MG CAPSULE  
WELCHOL 3.75G PACKET  
WELCHOL 625 MG TABLET  
ZANOSAR 1 GM POWDER  
VIAL  
ZIANA GEL

ZOLADEX 10.8 MG  
IMPLANT SYRN  
ZOLADEX 3.6 MG IMPLANT  
SYRN  
ZOMIG 2.5 MG NASAL  
SPRAY  
ZOMIG 5 MG NASAL SPRAY  
ZORVOLEX 18 MG  
CAPSULE  
ZORVOLEX 35 MG  
CAPSULE

ZOVIRAX 5% CREAM  
ZUBSOLV 1.4-0.36 MG  
TABLET SL  
ZUBSOLV 5.7-1.4 MG  
TABLET SL  
ZUBSOLV 8.6-2.1 MG  
TABLET SL