

Humana 2015 Drug List Changes

Prior Authorization

Rx3 and Rx4

New Prior Authorizations - The following drugs will require prior authorization effective January 1, 2015. If you fill or refill a prescription for any drug that requires prior authorization, your doctor must obtain authorization from Humana before the prescription will be covered. For copayment level information, visit Humana.com.

NOTE: For Commercial Fully-Insured and Individual policies issued in Texas, Louisiana, and Puerto Rico: formulary changes are effective on a plan's renewal date.

Drug Name	Grandfatherable	Alternatives
AZILECT	N	selegiline HCl
HIZENTRA	N	CONSULT YOUR PHYSICIAN
ITRACONAZOLE	N	CONSULT YOUR PHYSICIAN
LOTRONEX	N	loperamide; diphenoxylate-atropine
OMEGA-3 ACID ETHYL ESTERS	N	fenofibrate; fenofibric acid; gemfibrozil
PERFOROMIST	N	Foradil Aerolizer; Serevent Diskus
VIMPAT	Y	THIS DRUG NOW REQUIRES UTILIZATION REVIEW. PLEASE HAVE YOUR PHYSICIAN INITIATE AN AUTHORIZATION REQUEST.
WELCHOL	N	colestipol; cholestyramine (with sugar); Cholestyramine Light