



**Changes to Aetna's Precertification, Quantity Limit and Step-Therapy lists for commercial plans**

<b>Drugs requiring precertification effective June 1, 2013</b>	
LIPITOR (all strengths)	WELLBUTRIN 75mg and 100mg

<b>Drugs requiring precertification effective July 1, 2013</b>	
ACTIMMUNE *	EDARBYCLOR
ADDERALL	FOCALIN
ADDERALL XR	FOCALIN XR
ATACAND	HYZAAR
ATACAND HCT	METADATE CD
AVALIDE	METHYLIN chewable
AVAPRO	METHYLIN solution
BENICAR	PROCENTRA
BENICAR HCT	QUILLIVANT XR
CONCERTA	RITALIN
COZAAR	RITALIN LA
DESOXYN	RITALIN SR
DEXEDRINE CR	TEVETEN
DIOVAN #	TEVETEN HCT
DIOVAN HCT	TRUVADA
EDARBI	

<b>Drug(s) requiring quantity limits</b>	
No quantity limit changes for June 1, 2013 or July 1, 2013	

<b>Drug(s) requiring step-therapy effective July 1, 2013</b>	
DIOVAN #	

**\* Medication(s) added to the National Precertification List.**

**# Brand-name drug expected to become available generically in the near future. After the generic drug becomes available, or on July 1, 2013, whichever comes first, the brand-name drug may be covered at higher, non-preferred copay and/or added to the Formulary Exclusions List. The brand-name drug will also be subject to precertification and/or step therapy.**

Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Health Insurance Company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products.

Aetna Pharmacy Management refers to an internal business unit of Aetna Health Management, LLC.

The drugs on the Precertification and Step Therapy Lists are subject to change. The quantity limits and step therapy drug coverage review programs are not available in all service areas. For example, step therapy programs do not apply to fully-insured members in Indiana. Step therapy does not apply to fully-insured members in New Jersey. However, these programs are available to self-funded plans. Please refer to your plan documents or call the Member Services number on your ID card.

In accordance with state law, 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.

The term precertification means the utilization review process to determine whether the requested service, procedure, prescription drug or medical device meets the company's clinical criteria for coverage. It does not mean precertification as defined by Texas law, as a reliable representation or payment of care or services to fully insured HMO and PPO members.

In accordance with state law, Texas commercial fully-insured members who are receiving coverage for a drug added to the precertification and step-therapy lists will continue to have those drugs covered at the same benefits level until their plan renewal date.

These edits will not be implemented for Louisiana commercial fully-insured members with Louisiana contracted plans or residents in Louisiana with commercial fully-insured plans until further notice. Any additional exceptions or changes to this implementation schedule that impact plans' members will be communicated at least 30 days prior to the effective date of the change.