



## Important Notification Time Sensitive Information

Re: Selected Removal of Drugs from HealthSpring Prescription Drug Benefit for 2011

Dear HealthSpring Member

**Effective January 1, 2011, the HealthSpring formulary (list of covered drugs) will be changing.** Every month the Preferred Drug List (formulary) is updated. Medications on the preferred drug list included both generics and brand-name drugs. Information regarding changes may be found on our website at [www.healthspring.com](http://www.healthspring.com)

Effective January 1, 2011 the drugs listed in the following table will be removed from all of the HealthSpring formularies. Changes to the formulary have been approved by Medicare. Please contact your physicians and ask them to prescribe alternative formulary medications.

Name of Affected Drug	Reasons for Change	Alternative Drugs
APIDRA	Brand Alternative(s) Available	HUMALOG; HUMULIN
BETASERON	Brand Alternative Available	REBIF (Prior Authorization Required); AVONEX (Prior Authorization Required)
BONIVA TABS	Brand /Generic Alternative(s) Available	ACTONEL; <i>alendronate</i>
LEVEMIR	Brand Alternative(s) Available	LANTUS
LUNESTA	Generic Alternative(s) Available	<i>zaleplon; zolpidem</i>
NOVOLIN, N, R	Brand Alternative(s) Available	HUMALOG; HUMULIN
NOVOLOG, MIX	Brand Alternative(s) Available	HUMALOG; HUMULIN
VESICARE	Brand /Generic Alternative(s) Available	ENABLEX; TOVIAZ; <i>oxybutynin</i>
VYTORIN	Brand /Generic Alternative(s) Available	ZETIA; <i>simvastatin</i>

What if a drug you are taking now is not on the Drug List (formulary) for 2011? In some situations, HealthSpring will cover a one-time, temporary supply of your drug when your current supply runs out. This temporary supply will be for a maximum of 30 days or less if your prescription is written for fewer

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days. Please refer to your Evidence of Coverage Chapter 3, Section 5.2 which will explain when you can get a temporary supply. Meanwhile, you and your doctor will need to decide what to do before your supply of the drug runs out. Perhaps your doctor will find one of the alternative drugs listed above will treat your condition. Or you and your doctor can ask HealthSpring to make an exception for you and cover the drug. To learn what you must do to ask for an exception, see the *Evidence of Coverage* included in the *Notice of Change* that was mailed to you. Look for Chapter 7 (*What to do if you have problem or complaint*). Formulary exception request forms are available on the website and may be faxed to (615)-291-7072 or 1-866-845-7267.

Thank you for choosing HealthSpring. If you have any questions regarding this notice, please call Pharmacy Services at 1-800-331-6293 8 a.m. to 8 p.m. 7 days a week. TTY users should call 1-866-845-7230.

Sincerely,

HealthSpring Pharmacy Services Department

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S5932\_PDNATEN171rev1 CMS Approved 09/15/2010