January 2025

Cigna Healthcare Pharmacy clinical update

Plan affordability and prescription drug access are strategic imperatives for our clients and for Cigna Healthcare℠. Our low net drug cost and utilization management (UM) approach is an integral part of achieving affordability for clients and customers. This model reevaluates the traditional pricing process with the goal to deliver more affordable drug options to customers and immediate savings to clients. This includes removing certain high-priced and/or low-value drugs where other alternatives are available – regardless of incentives or rebates.

January 2025 clinical drug changes[1]

As part of our ongoing commitment to provide affordable and quality health care coverage, we regularly review and update our formularies. Our latest formulary changes focus on:

- Egregious drug removals
- Promotion of lower cost generic alternatives
- Positive changes to enhance medication access

Together, these actions impact less than 1% of membership[2] and achieve an average savings of $2.53 PMPM.[3]

Customer communications

We will send letters and emails to impacted customers in late September 2024. Reminder notifications will release in November 2024 and again in January 2025. Other materials are available at client request, such as formulary-specific flyers for customers and formulary PDFs.

Health care provider communications

To build awareness and help impacted providers talk with their Cigna Healthcare patients, we will:

- Send patient-specific letters that outline important formulary changes and covered drug alternatives
- Post information on our provider portal
- Include an article in the provider newsletter

Our priority is to maintain affordability for our clients and customers now and in the future. We will continue to make drug coverage enhancements across medical and pharmacy benefits to help drive sustainable cost savings while improving both medication adherence and health outcomes.

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Summary of January 1, 2025 formulary changes

Changes apply to Cigna Healthcare's Standard, Performance, Value, Advantage and Legacy formularies as noted. These highlights do not reflect the entire list of Cigna Healthcare's January 2025 drug changes. For drug-specific changes, please request a customer formulary change flyer.

Condition/Drug Class	Goal	Drug Removed[4]	Covered Alternatives
Oral contraception	Drive to generic alternatives	Lo Loestrin FE	norethindrone-estradiol-iron
Pain	Promote lower cost generic equivalent	Gralise 300mg and 600mg	gabapentin ER
Acne	Promote lower cost generic equivalent	Aczone	dapsone
Migraine	Drive to generic alternatives	Trudhesa	sumatriptan
Nausea and vomiting in pregnancy	Promote lower cost generic equivalent	Diclegis	doxylamine succinate and pyridoxine
Opioid-induced constipation	Drive to generic and preferred alternatives	Relistor	lubiprostone Movantik Symproic

Additional updates:

- Removing 31 egregiously priced multisource brand drugs to promote use of lower cost FDA-approved generic equivalents[4,5]
- Pancreatic enzyme replacement: Zenpep is moving to preferred brand; use of non-covered options, including Creon, will require a step through Zenpep[4]
- Those utilizing more costly treatments for overactive bladder, including Myrbetriq[6] and Gemtesa, will be required to try mirabegron ER (generic Myrbetriq)[4]

Positive changes: many changes implemented prior to 1/1/25 to unlock additional client affordability and earlier customer access

Drug Name	Drug Indication	Action	Effective Date
Tyvaso DPI	Pulmonary arterial hypertension	Moving from non-preferred to preferred brand	7/15/2024
Movantik Symproic	Opioid-induced constipation	Moving from non-preferred to preferred brand	9/1/2024
Meibo Tyrvaya	Dry eye disease	Moving from non-covered to preferred brand	6/1/2024 (Meibo) 7/1/2024 (Tyrvaya)
Multaq	Atrial fibrillation	Moving from non-covered to preferred brand	6/1/2024
Sotyktu	Psoriasis	Moving from non-preferred to preferred brand	6/1/2024
Pomalyst Promacta Tasigna Tafinlar Mekinist Scemblix Piqray	Oncology	Moving from non-preferred to preferred brand	6/1/2024 (Pomalyst) 7/1/24 (all others)
Doptelet Tavalisse	Thrombocytopenia	Moving from non-preferred to preferred brand	7/1/2024
Saxenda[7]	Weight management	Moving from non-preferred to preferred brand	1/1/2025

1. State laws in Connecticut, New York, Texas and Louisiana may require plan to cover medication at current benefit level until your plan renews. This means that if medication is taken off the drug list, is moved to a higher cost-share tier or needs approval from Cigna before plan will cover it, these changes may not begin until plan's renewal date. State law in Illinois may require plan to cover medications at current benefit level until plan renews. This means that if member currently has approval through a review process for plan to cover medication, the drug list change(s) listed here may not affect member until plan renewal date. If member doesn't currently have approval through a coverage review process, member may continue to receive coverage at current benefit level if doctor requests it. 2. Cigna Healthcare National Book of Business estimate of customers disrupted by 1/1/25 formulary changes. 3. Cigna Healthcare National Book of Business pricing analysis estimating value of January 2025 drugs under medical benefit, under pharmacy benefit (formulary) and UM changes (for clients that adopt Cigna Healthcare's UM packages or Cigna Healthcare specialty UM). Results may vary. PMPM = per member, per month. 4. Medical necessity review by Cigna Healthcare is available for customers unable to use covered alternatives. Moving to non-preferred brand subject to prior authorization with embedded step on Legacy. 5. Number of drugs removed varies by formulary. 6. Effective 9/1/24
7. Coverage of Saxenda only applies for clients electing optional Weight Management drug coverage.