



Fax Blast



News Flash

To: Sharp Health Plan Providers
Attn: Providers and Provider Office Staff
From: Sharp Health Plan
Date: October 26, 2018
Subject: **Important Prescription Drug Benefit Update Effective January 1, 2019**

Attention Provider Partner:

Effective January 1, 2019, Sharp Health Plan will no longer cover prescription drugs that have an over-the-counter (OTC) equivalent available (unless specifically stated as a Covered Benefit in the "What is Covered" section of the Member Handbook or as required by law). An OTC equivalent is a drug considered safe and effective for use without a doctor's prescription, and that offers the same benefits as a prescription drug.

What does this mean?

- Members usually will not receive coverage for brand and generic prescription medications that have OTC versions available with same active ingredient.
- Members may still purchase the medication — either by prescription or over-the-counter — but will be responsible for the full cost of the drug. Choosing to purchase the OTC version may save members money, especially when purchased at "big-box" stores.

The complete list of drugs excluded from coverage (along with their OTC alternatives) is shown below. If you have any questions, please contact Customer Care at 1-858-499-8300 or 1-800-359-2002, or email customer.service@sharp.com. We are available to assist you Monday – Friday, 8 a.m. – 6 p.m.

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Benefit Exclusion Drug List for Over-the-Counter Equivalents

The products listed in the second column below will not be covered under the Sharp Health Plan prescription drug benefit plan. Members can still purchase them, but they will be responsible for the full cost. Members may purchase a product with the same active ingredient(s) that is available over the counter (OTC). Common OTC alternatives are listed in the third column below.

Category	Non-Covered Prescription Drugs	OTC Products with Same Active Ingredients
Allergy – Nasal	Budesonide 32 mcg	Rhinocort 24-Hour Allergy OTC (budesonide 32 mcg)
	Fluticasone Propionate 50 mcg	Flonase OTC (fluticasone propionate 50 mcg)
Allergy – Oral	Cetirizine HCl 1 mg/mL	Cetirizine 1 mg/mL Oral Solution OTC Children’s Zyrtec Oral Solution OTC (cetirizine 5 mg/5 mL)
	Clemastine Fumarate 2.68 mg	Clemastine Fumarate 1.34 mg OTC Dayhist 1.34 mg Allergy OTC
	Levocetirizine Dihydrochloride 5 mg, 2.5 mg/5 mL	Xyzal Allergy 24 HR OTC (levocetirizine 5 mg) Children’s Xyzal Allergy OTC (levocetirizine 2.5 mg/5 mL)
Analgesics	Ibuprofen 400 mg, 600 mg, 800 mg, 100 mg/5 mL	Advil 200 mg OTC Ibuprofen 200 mg OTC Motrin 200 mg OTC Children’s Ibuprofen 100 mg/5 mL



Category	Non-Covered Prescription Drugs	OTC Products with Same Active Ingredients
Dietary Supplements	Ferrous Sulfate 324 mg, 325 mg [elemental iron 65 mg]	Feosol Original OTC (elemental iron 65 mg) Ferrous Sulfate 325 mg OTC
Gastrointestinal (GI) – Anti-Diarrheal	Loperamide HCl 2 mg	Imodium OTC (loperamide 2 mg) Loperamide 2 mg OTC
Gastrointestinal (GI) – H2 Blockers	Cimetidine 400 mg, 800 mg	Cimetidine 200 mg OTC Tagamet 200 mg OTC
	Famotidine 20 mg, 40 mg	Famotidine 10 mg, 20 mg OTC Pepcid/AC 10 mg, 20 mg OTC
	Ranitidine HCl 150 mg, 300 mg	Ranitidine 75 mg, 150 mg OTC Zantac 75 mg, 150 mg OTC
Gastrointestinal (GI) – Laxatives	Polyethylene Glycol 17 gm, 17 gm/dose	Miralax 17 gm/dose OTC Polyethylene Glycol 17 gm/dose OTC
Gastrointestinal (GI) – Proton Pump Inhibitors	Esomeprazole Magnesium 20 mg, 40 mg	Esomeprazole Magnesium 20 mg OTC Nexium 24HR 20 mg OTC
	Lansoprazole 15 mg, 30 mg	Lansoprazole 15 mg OTC Prevacid 15 mg OTC
	Omeprazole 20 mg, 40 mg	Omeprazole 20 mg OTC Prilosec 20 mg OTC



Category	Non-Covered Prescription Drugs	OTC Products with Same Active Ingredients
Nausea	Meclizine HCl 12.5 mg, 25 mg	Meclizine 12.5 mg and 25 mg OTC Bonine 25 mg OTC
Topicals – Antibacterial	Neomycin/Bacitracin/Polymyxin/Hydrocortisone 1%	Neosporin + Cortizone 10 (hydrocortisone 1%)
Topicals – Antifungal	Butenafine HCl 1%	Lotrimin Ultra, Mentax (butenafine 1%)
	Clotrimazole 1%	Lotrimin (clotrimazole 1%)
Topicals – Dermatological	Adapalene 0.1%	Differin Gel 0.1% OTC (adapalene .1%)
	Aluminum Chloride 20%	Certain Dri (aluminum chloride 12%) Xerac AC (aluminum chloride 6.25%)
	Ammonium Lactate 12%	AmLactin 12% OTC (lactic acid 12%)
	Hydrocortisone 1%	Cortizone 10 (hydrocortisone 1%)
Urinary	Oxybutynin 3.9 mg/24 HR	Oxytrol 3.9 mg/24 HR
Women’s Care	Miconazole Nitrate 200 mg	Monistat 3 (200 mg)

