



## National Formulary Prescription Drug Plans

The coverage you need,  
at a cost you can afford



## Most Chambers of Commerce Group Insurance Plan® Health options manage increasing prescription drug costs through the use of a formulary.

A formulary is an evolving list defining the prescription drugs to be covered under your company's benefit program. The Chambers Plan incorporates the TELUS® Health Solutions National Formulary, which is designed to minimize the impact of rising drug costs by covering only those that are both clinically and cost effective.

Though new medications are routinely considered, they are not automatically covered.

### HOW DO HEALTH OPTIONS WITH THE NATIONAL FORMULARY WORK?

Under the Chambers Plan, formulary plans reimburse prescription drug purchases on a two tier system. If the DIN (Drug Identification Number) is on the National Formulary, coverage will range from 70% to 100% (based on your firm's plan design). Eligible prescription drugs not on the Formulary will be covered at 50%. Formulary options encourage informed choices by reimbursing more cost-effective drug treatments at higher levels.


If the drug your physician prescribes is not on the Formulary, a 'therapeutic alternative' providing similar treatment likely will be. With your doctor's advice, you have two options:

- you can ask your doctor to prescribe a drug that is on the Formulary, covered at the higher reimbursement percentage, or
- you can fill the unlisted prescription and be reimbursed 50% of the eligible cost.

### HOW WILL MY DOCTOR KNOW WHAT TO PRESCRIBE?

Tell your doctor your drug benefit program uses the TELUS Health Solutions National Formulary. Physicians are familiar with these types of plans. The following list provides the 100 most frequently prescribed medications covered under the National Formulary.

*TELUS Health Solutions operates the largest private electronic insurance claims network in Canada. With continued input from an independent committee of physicians and pharmacists, TELUS Health Solutions constantly reviews the items included in the National Formulary based on their quality and cost.*



**THE NATIONAL FORMULARY  
COVERS 85% OF THE MOST  
FREQUENTLY PRESCRIBED  
DRUGS**

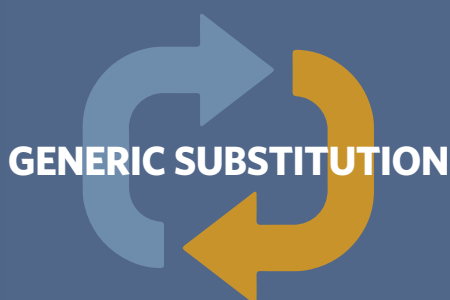
**THIS PARTIAL LIST OF THE MOST FREQUENTLY DISPENSED MEDICATIONS ILLUSTRATES THE NATIONAL FORMULARY'S COVERAGE**

DIN	Name
00021474	TEVA-HYDROCHLOROTHIAZIDE 25MG TABLET
00312770	APO-PREDNISONE 5MG TABLET
00326844	APO-HYDRO 25MG TABLET
00337749	TEVA-FUROSEMIDE 40MG TABLET
00406716	NOVAMOXIN 500MG CAPSULE
00445282	APO-SULFATRIM DS TABLET
00509558	EPIPEN 0.3MG AUTO-INJECTOR
00583421	TEVA-CEPHALEXIN 500MG TABLET
00585114	APO-IBUPROFEN 600MG TABLET
00589861	TEVA-NAPROX 500MG TABLET
00592277	APO-NAPROXEN 500MG TABLET
00608165	TEVA-OXYCOCET TABLET
00613215	TEVA-SPIRONOLACTONE 25MG TABLET
00628123	APO-AMOXI 500MG CAPSULE
00642215	APO-PEN-VK 300MG TABLET
00653276	RATIO-LENOLTEC NO.3 TABLET
00716626	BETADERM 0.1% CREAM
00733059	APO-RANITIDINE 150MG TABLET
00885444	PMS-HYDROMORPHONE 1MG TABLET
02031094	LAMISIL 1% CREAM
02063662	MACROBID 100MG CAPSULE
02123282	COVERSYL 4MG TABLET
02144263	TEVA-TRAZODONE 50MG TABLET
02163926	TYLENOL W/CODEINE NO. 3 TABLET
02166704	PROMETRIUM 100MG CAPSULE
02167786	APO-METFORMIN 500MG TABLET
02171228	SYNTHROID 0.112MG TABLET
02172062	SYNTHROID 0.025MG TABLET
02172070	SYNTHROID 0.05MG TABLET
02172089	SYNTHROID 0.075MG TABLET
02172097	SYNTHROID 0.088MG TABLET
02172100	SYNTHROID 0.1MG TABLET
02172119	SYNTHROID 0.125MG TABLET
02172127	SYNTHROID 0.15MG TABLET
02172135	SYNTHROID 0.175MG TABLET
02177145	APO-CYCLOBENZAPRINE 10MG TABLET
02213192	ELTROXIN 50MCG TABLET
02213206	ELTROXIN 100MCG TABLET
02233852	SYNTHROID 137MCG TABLET
02236974	ALESSE 21 TABLET
02236975	ALESSE 28 TABLET
02238465	NASONEX AQ. NASAL SPRAY 50MCG
02241497	VENTOLIN HFA 100MCG INHALER
02244292	FLOVENT HFA 125MCG INHALER (AEROSOL)
02244293	FLOVENT HFA 250MCG INHALER (AEROSOL)
02245386	SYMBICORT 200 TURBUHALER
02245623	APO-AMOXI CLAV 875/125MG TABLET
02245669	APO-SALVENT CFC FREE INHALER
02246010	APO-METOPROLOL 25MG TABLET
02246624	COVERSYL 8MG TABLET

DIN	Name
02246820	SANDOZ METFORMIN 500MG TABLET
02247162	CRESTOR 10MG TABLET
02247439	SANDOZ BISOPROLOL 5MG TABLET
02251582	APO-RAMIPRIL 10MG CAPSULE
02252716	CIPRODEX OTIC SUSPENSION
02252767	APO-CLOPIDOGREL 75MG TABLET
02263238	CIPRALEX 10MG TABLET
02265826	SANDOZ AZITHROMYCIN 250MG TABLET
02273373	APO-AMLODIPINE 5MG TABLET
02275031	TEVA-VENLAFAXINE XR 75MG ER CAPSULE
02275058	TEVA-VENLAFAXINE XR 150MG ER CAPSULE
02284383	SANDOZ AMLODIPINE 5MG TABLET
02284391	SANDOZ AMLODIPINE 10MG TABLET
02287064	CYCLOBENZAPRINE 10MG TABLET
02294338	LANTUS SOLOSTAR 100U/ML PREFILL PEN 5X3ML
02295261	APO-ATORVASTATIN 10MG TABLET
02295288	APO-ATORVASTATIN 20MG TABLET
02295296	APO-ATORVASTATIN 40MG TABLET
02295709	SUBOXONE 8MG/2MG SL TABLET
02298589	AVAMYS 27.5MCG NASAL SPRAY
02314185	SANDOZ-RABEPRAZOLE 20MG TABLET
02321157	YAZ TABLET
02325462	VAGIFEM 10 TABLET
02326450	TEVA-SALBUTAMOL HFA 100MCG/DOSE
02331284	AMLODIPINE 5MG TABLET
02337983	APO-ROSUVASTATIN 10MG TABLET
02337991	APO-ROSUVASTATIN 20MG TABLET
02340208	SANDOZ TAMSULOSIN CR 0.4MG ER TABLET
02348772	TRAZODONE 50MG TABLET
02352729	AMOXICILLIN 500MG CAPSULE
02353377	METFORMIN 500MG TABLET
02353660	CITALOPRAM 20MG TABLET
02354616	TEVA-ROSUVASTATIN 10MG TABLET
02374862	RAMIPRIL 10MG CAPSULE
02382075	MYLAN-BUPROPION XL 150MG TABLET
02382083	MYLAN-BUPROPION XL 300MG TABLET
02385341	METFORMIN FC 500MG TABLET
02387883	ALYSENA 28 TABLET
02388081	AURO-AMOXICILLIN 500MG CAPSULE
02403587	APO-MOMETASONE 50MCG AQUEOUS NASAL SPRAY
02405628	ROSUVASTATIN 5MG TABLET
02405636	ROSUVASTATIN 10MG TABLET
02405644	ROSUVASTATIN 20MG TABLET
02408570	MYLAN-PANTOPRAZOLE T 40MG TABLET
02419858	SALBUTAMOL HFA 100MCG/DOSE
02430118	ESCITALOPRAM 10MG TABLET
02440628	TEVA-PANTOPRAZOLE MAGNESIUM 40MG TABLET
02454645	VALACYCLOVIR 500MG TABLET
02465124	MAR-KETOROLAC 10MG TABLET
02470233	SANDOZ PERINDOPRIL ERBUMINE 4MG TABLET

Although the National Formulary covers the most frequently prescribed drugs, it does not cover them all. The table below lists the most commonly prescribed non-formulary drugs and possible therapeutic alternatives that are included on the National Formulary. A possible therapeutic alternative is not indicative of interchangeability. The decision about what drugs are prescribed is between **you and your doctor**. By discussing your plan with your doctor, a drug therapy may be prescribed, when appropriate, which is an eligible expense on the formulary. Doctors who want additional or more specific information are welcome to contact TELUS Health Solutions toll-free at 1.888.668.1330.

DIN	Non-Formulary Drug	National Formulary Drug Alternative
00821772	D-TABS 10000IU TABLET	ONE-ALPHA, OSTOFORTE
02282445	ZOPICLONE 7.5MG TABLET	RESTORIL, MOGADON, HALCION
02301083	SANDOZ PANTOPRAZOLE 40MG TABLET	CYTOTEC, PARIET, PEPCID, SULCRATE, TECTA, ZANTAC
02303922	JANUVIA 100MG TABLET	DIABETA, GLUCOPHAGE, PRANDASE
02315963	PMS-CETIRIZINE 20MG TABLET	ALOMIDE, ATARAX, AVAMYS, FLONASE, LIVOSTIN, NASACORT, NASONEX, OMNARIS, PATANOL, RHINOCORT
02333872	JANUMET 50/1000MG TABLET	DIABETA, GLUCOPHAGE, PRANDASE
02339102	APO-ESOMEPRAZOLE 40MG TABLET	CYTOTEC, PARIET, PEPCID, SULCRATE, TECTA, ZANTAC
02354969	DEXILANT 60MG CAPSULE	CYTOTEC, PARIET, PEPCID, SULCRATE, TECTA, ZANTAC
02378612	XARELTO 20MG TABLET	ARIXTRA, BRILINTA, COUMADIN, FRAGMIN, FRAXIPARINE, FRAXIPARINE FORTE, INNOHEP, LOVENOX, LOVENOX HP, PLAVIX, SINTROM
02379007	JAMP-VITAMIN D 10000U TABLET	ONE-ALPHA, OSTOFORTE



Both tiers under the Chambers Plan use Generic substitution. Where there is a Generic drug that is considered interchangeable with a Brand drug, only the cost of the lowest price Generic will be reimbursed. The Plan will reimburse the eligible Generic cost based on the reimbursement percentage of the tier in which the DIN is found.

Though the Plan substitutes Generic equivalents wherever possible, a Brand drug will be dispensed if the Generic is unacceptable. Your physician need only specify "No Substitution" on the prescription. In these situations, the Plan will reimburse the eligible Brand cost, again based on the reimbursement percentage of the tier in which the DIN is found.