## TRAVATAN Z<sup>®</sup> and Other Prostaglandin Analog Drugs Formulary Placement for Medicare Plans 2017–2018

	Branded Drugs				Generic Drugs	
Plan	TRAVATAN Z®	LUMIGAN® 0.01%	ZIOPTAN®	XALATAN <sup>®</sup>	Latanoprost	Travoprost
Silverscript Choice	Tier 3 Preferred	Tier 3 Preferred	Not Covered	Not Covered	Tier 2 Non-Preferred	Not Available
AARP MedicareRx Preferred	Tier 3 Preferred	Tier 3 Preferred	Not Covered	Not Covered	Tier 2 Non-Preferred	Not Available
Humana Walmart Rx PDP	Tier 3 Preferred*	Tier 3 Preferred*	Not Covered	Not Covered	Tier 2 Non-Preferred*	Not Available
Humana Preferred Rx PDP	Tier 3 Preferred*	Tier 3 Preferred*	Not Covered	Not Covered	Tier 2 Non-Preferred*	Not Available
AARP MedicareComplete	Tier 3 Preferred	Tier 3 Preferred	Not Covered	Not Covered	Tier 1 Preferred	Not Available
Humana Gold Plus	Tier 3 Preferred*	Tier 3 Preferred*	Not Covered	Not Covered	Tier 1 Preferred*	Not Available
Aetna Medicare Rx Saver	Tier 4 Non-Preferred	Tier 3 Preferred	Not Covered	Not Covered	Tier 2 Non-Preferred	Tier 2 Non-Preferred
AARP MedicareRx Saver Plus	Tier 3 Preferred	Tier 3 Preferred	Not Covered	Not Covered	Tier 2 Non-Preferred	Not Available
Wellcare Classic	Tier 3 Preferred	Tier 3 Preferred	Not Covered	Not Covered	Tier 2 Non-Preferred	Not Available
HumanaChoice	Tier 3 Preferred*	Tier 3 Preferred*	Not Covered	Not Covered	Tier 2 Non-Preferred*	Not Available
Silverscript Employer PDP	Tier 2 Preferred	Tier 2 Preferred	Tier 3 Non-Preferred	Not Covered	Tier 1 Preferred	Not Available
Humana Enhanced PDP	Tier 3 Preferred*	Tier 3 Preferred*	Not Covered	Not Covered	Tier 2 Non-Preferred*	Not Available
Kaiser Permanente Senior Advantage	Tier 4 Non-Preferred	Tier 3 Preferred	Tier 4 Non-Preferred	Tier 4 Non-Preferred	Tier 2 Non-Preferred	Tier 2 Non-Preferred
Express Scripts High Performance Medicare PDP	Not Covered	Not Covered	Not Covered	Not Covered	Tier 2 Non-Preferred	Tier 2 Non-Preferred
Express Scripts Premier Access Medicare PDP	Tier 3 Preferred	Tier 3 Preferred	Tier 4 Non-Preferred <sup>‡</sup>	Tier 4 Non-Preferred <sup>‡</sup>	Tier 2 Non-Preferred	Tier 2 Non-Preferred

Source: CVS/Caremark; Decision Resources Group; SEC Filings
Note: Plans sorted by the number of lives covered and represent the 15 largest Medicare plans in the U.S. Formulary placement is for years 2017–2018. TRAVATAN® was discontinued in July 2010. RESCULA® was discontinued in March 2015. \*dedenotes prior authorization requirement. ‡ denotes step therapy.

