

Preferred Generics

This program can show you how you can save money when you choose a generic drug over a brand-name drug. Generics work just as well as brand-name drugs but most often cost a lot less. So switching to generics can lower your drug costs.



BlueCross BlueShield
of Georgia

How does the Preferred Generics program work?

Most times when your doctor prescribes a medicine that's a brand-name drug and it has a generic option, your pharmacy will automatically fill the prescription using the generic drug. And you'll pay less for the generic drug. Our Preferred Generics program helps you save money when you "prefer a generic" over a brand-name drug.

Why do I pay more for a brand-name drug?

Each time your doctor writes a prescription for a brand-name drug that has a generic option but writes "dispense as written" on the prescription, the pharmacy has to fill the prescription for the brand-name drug — just the way the doctor wrote it. You would then have to pay the brand copayment.

If your doctor had not put "dispense as written" on the prescription, the pharmacy would be allowed to give you the generic drug and your cost would be only your tier one (generic) copayment. If you still chose to fill the brand-name drug, you would then have to pay your tier one copayment plus the difference in cost between the brand-name and generic drug.

Here's an example of why you pay more for a brand name drug:

Your tier one (generic) drug copayment:	\$ 10
Plus the brand name drug cost:	+ \$ 160
Subtotal:	<u>\$ 170</u>
Minus the generic drug cost:	- \$ 60
You pay more for a 30-day supply of the brand-name prescribed drug:	\$ 110

If your doctor prescribes a brand-name drug and it has no generic option, you pay only the brand-name drug copay or coinsurance cost.

Is a generic right for me?

Ask your doctor if there is a generic for the drug you take – and see if it's right for you. Never switch any medicine until you talk to your doctor. Keep in mind that generic and brand-name drugs have the same active ingredient, strength and dose. The U.S. Food and Drug Administration (FDA) states that generics must meet the same high standards for purity, quality, safety and strength. Plus, generics usually cost less.

Are all brand-name drugs included this program?

No. A small group of brand-name drugs called Narrow Therapeutic Index drugs are not included in the program, but are covered at the brand-name copay or coinsurance level. These drugs usually need blood levels to be checked often to make sure the dose is safe and working well. When a generic version of these drugs is available, you do not pay the difference between the brand-name and generic drug.

The group of Narrow Therapeutic Index drugs include:

· Armour Thyroid	· Felbatol	· Prograf
· Banzel	· Gabitril	· Sabril
· Carbatrol	· Keppra	· Sandimmune
· CellCept	· Keppra XR	· Stavzor
· Celontin	· Lamictal (all forms)	· Synthroid
· Cerebyx	· Lanoxicap	· Tegretol
· Clozaril	· Lanoxin	· Tegretol XR
· Cordarone	· Levothroid	· Theophylline products
· Coumadin	· Levoxyl	· Topamax
· Creon	· Lithobid	· Topamax Sprinkle
· Depacon	· Myfortic	· Trileptal
· Depakene	· Mysoline	· Ultrase
· Depakote	· Neoral	· Unithroid
· Depakote ER	· Pacerone	· Vimpat
· Diastat	· Pancrease	· Zaronitin
· Dilantin	· Pancrarecarb	· Zenpep
· Eskalith	· Pancrelipase	· Zonegran
· Eskalith CR	· Peganone	
· Fazaclo ODT	· Phenytek	

Benefits may vary. Refer to your benefit plan for complete details about your prescription drug coverage, limitations and exclusions.