Good news! A lower-cost alternative to EpiPen®, EpiPen Jr.® and Adrenaclick® is now available.

We share your concerns about the high cost of EpiPen®, EpiPen Jr.® and Adrenaclick®. That’s why we want you to know that there are now authorized generics available to these branded medications, they cost half the price.

**What you should do the next time you need a refill**
Ask your pharmacist to substitute your prescription for EpiPen, EpiPen Jr. or Adrenaclick with the lower-cost authorized generic, Epinephrine Injection, USP Auto-injector. Depending on your plan, you’ll pay a lower copay or coinsurance for the authorized generic because it’s covered as a generic (tier 1) on your drug list.

In some cases, you may need to ask your doctor for a prescription for the authorized generic, or ask the pharmacist to call your doctor.

**What’s an “authorized generic?”**
It’s a brand name product that’s approved by the U.S. Food and Drug Administration, but sold as a generic. An authorized generic is made by the same manufacturer as the branded product. So, it’s exactly the same – in ingredients and how it works – just without the brand name on its label.

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**Together, all the way.**
What you need to know about the authorized generic, Epinephrine Injection

Epinephrine Injection comes in a two-pack carton and includes a trainer pen. The device works exactly like the branded medication does, so you or your caregiver won’t need any training to use it. Here’s what the packages look like.

Coverage changes to the branded EpiPen and Adrenaclick as of January 7, 2017*

Because the authorized generic is now available, we’ve made changes to how branded EpiPen, EpiPen Jr. and Adrenaclick are covered. Depending on the drug list your plan is using, the branded medications are either:

- Covered as non-preferred brand, meaning they will cost you more to fill the prescription. They may also require approval for coverage under your plan.
- Not covered at all, unless approved by Cigna.**

To find out how these branded medications are covered under your specific plan, log into myCigna.com or call customer service using the number on the back of your Cigna ID card.

Questions?
Please call Customer Service using the toll-free number on the back of your Cigna ID card. We're here to help.

* In accordance with Texas and Louisiana state law, customers with affected benefit plans who receive coverage for medications that are removed from the prescription drug list during the plan year will continue to have those medications covered at the same benefit level until their plan renewal date. To find out if these state mandates apply to your plan, please call Customer Service.

** If your doctor wants you to fill a prescription for a branded medication instead of the authorized generic, your plan will only cover it if your doctor requests and receives approval from Cigna. Approval is handled by your doctor. You don’t need to call us or fill out paperwork.

Para obtener ayuda en español llame al número en su tarjeta de Cigna.
Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan’s network, your prescription may not be covered, or reimbursement may be limited by your plan’s copayment, coinsurance or deductible requirements. Refer to your plan documents for costs and complete details of your plan’s prescription drug coverage.

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