

## Dose intensity Chart for Select Lipid Lowering Agents

	% LDL-C Reduction	HMG-CoA Reductase Inhibitors ("-statin")							Misc. (Zetia)	PCSK9 Inhibitors						
		Rosuva- (Crestor)	Atorva- (Lipitor)	Pitava- (Livalo)	Simva- (Zocor)	Lova- (Altoprev)	Prava- (Pravachol)	Fluva- (Lescol XL)		Alirocumab (Praluent)	Evolocumab (Repatha)					
<b>High Intensity</b>	65										<b>140 mg every 2 weeks</b> \$1340* or <b>420 mg monthly</b> \$2010*  <i>(LDL-C reduction is regardless of statin use)</i>					
	63	40 mg generic	---	---	---	---	---									
	62		---	---	---	---										
	61		---	---	---	---										
	60		80 mg generic	---	---	---	---									
	59	---		---	---	---										
	58	20 mg generic	---	---	---	---										
	56		---	---	---	---										
	54	10 mg generic \$196.12 <sup>†</sup>	40 mg generic \$120.05 <sup>†</sup>	---	---	---	---									
	52			---	---	---	---									
50	5 mg generic	40 mg generic \$120.05 <sup>†</sup>	---	---	---	---										
<b>Moderate Intensity</b>			48	---	---	---	---	---								
			46	---	---	---	---	---								
44			20 mg generic	4 mg Brand only \$332.01 <sup>†</sup>	40 mg generic	60 mg Brand only	80 mg generic	80 mg ER Generic \$294.87 <sup>†</sup>								
42									---	---	---	---				
40			10 mg generic	2 mg Brand only	20 mg Generic \$77.41 <sup>†</sup>	20 mg generic	40 mg Generic \$79.02 <sup>†</sup>	20 mg generic								
38									---	---	---	---				
36			1 mg Brand only	10 mg generic	40 mg generic \$69.48 <sup>†</sup>	20 mg generic	20 mg generic	40 mg generic								
34									---	---	---	---				
32			10 mg generic \$212.16 <sup>†</sup>	10 mg generic	10 mg generic	10 mg generic	20 mg generic	20 mg generic								
30	---	---							---	---						
<b>Low Intensity</b>	28	10 mg generic \$212.16 <sup>†</sup>							10 mg generic	10 mg generic	20 mg generic	20 mg generic				
	26												---	---	---	---
	24												---	---	---	---
	22		---	---	---	---										
	20		---	---	---	---										
18	---	---	---	---												

<sup>†</sup> Average Cash Price From [www.goodrx.com](http://www.goodrx.com) as of December 2017, if exact price is desired, please contact the patient's pharmacy; \*Average wholesale price

### Tiered Benefit Coverage for Select Local Payers

Coverage based on payer formularies as of January 2018, coverage subject to change and may vary based on patient's individual plan

		Rosuva- (Crestor)	Atorva- (Lipitor)	Pitava- (Livalo)	Simva- (Zocor)	Lova- (Altoprev)	Prava- (Pravachol)	Fluva- (Lescol XL)	Ezetimibe (Zetia)	Alirocumab (Praluent)	Evolocumab (Repatha)
<b>Excellus Commercial</b>	Generic	1	1	--	1	1	1	1	1	--	--
	Brand	3	3	3 <sup>ST</sup>	3	3	3	3	3	2 <sup>PA</sup>	2 <sup>PA</sup>
<b>Excellus Blue Choice Option</b>	Generic	C	C	--	C	C	C	C	C	--	--
	Brand	C <sup>ST</sup>	NC	C <sup>ST</sup>	NC	C <sup>ST</sup>	NC	C <sup>ST</sup>	NC	C <sup>PA</sup>	C <sup>PA</sup>
<b>Excellus Medicare</b>	Generic	1	1	--	1	1	1	2	2	--	--
	Brand	NC	NC	4	NC	4 <sup>ST</sup>	NC	NC	NC	5 <sup>PA</sup>	5 <sup>PA</sup>
<b>MVP Commercial</b>	Generic	1	1	--	1	1	1	1	1	--	--
	Brand	3	3	3	3	3	3	3	3	3 <sup>PA</sup>	3 <sup>PA</sup>
<b>MVP Medicaid</b>	Generic	1	1	--	1	1	1	1	1	--	--
	Brand	NC	NC	NC	NC	NC	NC	NC	NC	3	3
<b>MVP Medicare</b>	Generic	3	1	--	1	1	1	2-ER is tier 3 on some plans	3	--	--
	Brand	NC	NC	NC (Tier 4 on some plans)	NC	NC	NC	NC	NC	5 <sup>PA</sup>	NC
<b>Fidelis Care Medicaid</b>	Generic	1	1	--	1	1	1	NC	2	--	--
	Brand	NC	NC	NC	NC	NC	NC	NC	NC	5 <sup>PA</sup>	NC
<b>Fidelis Care Medicare</b>	Generic	1	1	--	1	1	1	1	2	--	--
	Brand	NC	NC	4 <sup>ST</sup>	NC	4 <sup>ST</sup>	NC	NC	NC	5 <sup>PA</sup>	NC
<b>Pharmacy Discount Lists</b> <small>(as of Jan 2018)</small>	--	--	URMC (10 mg)	--	Walgreens, Rite Aid, URMC (5, 10, 20, 40, 80 mg)	Wegmans, Target, Walmart (10, 20 mg), Walgreens, Rite Aid and URMC (10, 20, 40 mg)	Target (10, 20, 40 mg), Walgreens (10, 20, 40, 80 mg), Rite Aid (10, 20, 40, 80 mg)	--	--	--	--

C = Covered NC = Not covered ST = Step therapy required before coverage granted, PA = Prior Authorization req'd, NF = non-formulary (PA required)

Note: Red shading indicates that this agent is non-preferred agent on the payers formulary and may result in higher copayment or may require step therapy or prior authorization prior to use