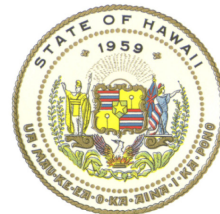


LIST OF DRUGS SUBJECT TO REFERENCE-BASED PRICING Effective 12/1/2010

Effective January 1, 2010, the EUTF-informedRx Prescription Drug Plan includes a Reference-Based Pricing Program. With this program, the most cost-effective FDA-approved drug will be designated as the Preferred drug within three (3) drug categories or classes. The table below is a listing of medications that are affected by the Reference-Based Pricing program. Generic drugs are in lower case and preferred brands are in UPPER case.

Low Cost Alternative (Preferred Drug)	Co-payment for 30-Day Supply at Retail/90-Days at Mail for the Low Cost Alternative	Non-Preferred Drug	Estimated Co-payment Range for 30-Day Supply for Non-Preferred Drug at <u>Mail or Retail*</u>
<i>Simvastatin</i> (Generic of Zocor)	\$5/\$10	ALTOPREV CRESTOR (5mg & 10mg) LESCOL LESCOL XL LIPITOR (10mg, 20mg & 40mg) LIVALO lovastatin MEVACOR PRAVACHOL pravastatin ZOCOR	\$13-\$143
<i>Prilosec OTC**</i> (Brand or Generic)	\$5/\$10	ACIPHEX DEXILANT lansoprazole NEXIUM omeprazole (except 10mg capsules and 20mg and 40mg capsules at mail) pantoprazole PREVACID PRILOSEC (except 10mg capsules) PROTONIX ZEGERID	\$71-\$142
<i>Claritin or Claritin-D**</i> (Brand or Generic)	\$5/\$10	ALLEGRA ALLEGRA-D cetirizine OTC cetirizine-D OTC CLARINEX CLARINEX-D fexofenadine XYZAL Zyrtec OTC Zyrtec-D OTC	\$6-\$89

This List is effective January 1, 2010 and is subject to change without prior notice.



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**Co-payments and savings are estimates only and may vary based on market price fluctuations.*

***These over-the-counter (OTC) medications will be available at the generic co-payment with a valid prescription.*

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