



Old American Insurance Company Medication Disclosure Summer 2018

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Old American Insurance Company reserves the right to ask additional questions or pursue additional information and take final action on any medication or combination of medications listed and not listed here. Certain medications may imply treatment for a condition relating to a health impairment(s) stated in the application. Simply indicating use of a medication listed does not guarantee acceptance of a plan indicated and is subject to final underwriting approval.

Medications	Generic	Medical Condition(s)	Plan Eligibility
Aricept	Donepezil	Alzheimer's/Dementia	<i>Decline</i>
Atripla	Efavirenz	HIV/AIDS	<i>Decline</i>
Cognex	Tacrine	Alzheimer's	<i>Decline</i>
Combivir	Lamivudine/Zidovudine	HIV/AIDS	<i>Decline</i>
Ergoploid Mesylates	Hydergine	Alzheimer's	<i>Decline</i>
Exelon	Rivastigmine Tartrate	Alzheimer's	<i>Decline</i>
Galantamine	Razadyne	Alzheimer's	<i>Decline</i>
Kaletra	Lopinavir / Ritonavir	HIV/AIDS	<i>Decline</i>
Memantine	Namenda	Alzheimer's	<i>Decline</i>
Reminyl	Razadyne	Alzheimer's	<i>Decline</i>
Reyataz	Atazanavir	HIV/AIDS	<i>Decline</i>
Riluzole	Rilutek	ALS/Lou Gehrig's Disease	<i>Decline</i>
Truvada	Emtricitabine / Tenofovir	HIV/AIDS	<i>Decline</i>

Medications	Generic	Medical Condition(s)	Plan Eligibility
Abilify	Aripiprazole	Bipolar Disorder	BMS**
Aggrenox	Asprin-Dipyridamole	Stroke, TIA, Heart Attack	BMS (more than 24 months)
Amidarone	Nexterone	Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
Anoro Ellipta	Umeclidinium Bromide – Vilanterol	COPD	BMQ
Antibuse	Disulfiram	Substance Abuse	BMQ
Avonex	Interferon beta-1a	Multiple Sclerosis	BMS
Azilect	Rasagiline	Parkinson's Disease	BMS
Benlysta	Belimumab	Systemic Lupus	BMQ
Betaseron	Interferon beta-1b	Multiple Sclerosis	BMS
Betapace	Sotalol	Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
Breo Ellipta	Fluticasone Furoate/Vilanterol	COPD	BMQ
Brilinta	Ticagrelor	Blood Thinner	BMQ
Calcitriol	Rocaltrol	Chronic Kidney Disease	BMQ
Campral	Acamprosate	Alcohol/Substance Abuse	BMQ
Capecitabine	Xeloda	Cancer	BMQL
Carbadopa	Lodosyn	Parkinson's Disease	BMS

Medications	Generic	Medical Condition(s)	Plan Eligibility
Casodex	Bicalutamide	Prostate Cancer	BMQL
Cayston	Aztreonam	Cystic Fibrosis	BMQL
Cellcept	Mycophenolic Acid	Organ/Bone Marrow Transplant	BMQ
Cinacalcet	Sensipar	Chronic Hepatitis	BMQ
Clozapine	Clozaril	Bipolar Disorder	BMS**
Codeine		Chronic Pain	BMP*
Comtan	Entacapone	Parkinson's Disease	BMS
Copaxone	Glatiramer acetate	Multiple Sclerosis	BMS
Cordarone	Amiodarone	Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
Coumadin	Warfarin	Blood Thinner	BMS (more than 24 months); BMP (more than 60 months)
Cyclosporine	Neoral	Organ/Bone Marrow Transplant	BMQ
Daliresp	Roflumilast	COPD	BMQ
Demerol		Chronic Pain	BMP*
Depakote	Valproic acid	Bipolar Disorder	BMS**
		Seizure Disorder	BMP
Digoxin	Lanoxin	Congestive Heart Failure	BMQ
Dilaudid	Hydromorphone	Chronic Pain	BMP*
Dopamine		Parkinson's Disease	BMS
Effient	Prasugrel	Angina/Chest Pain	BMQ; BMS (more than 24 months)
Eldepryl	Selegiline	Multiple Sclerosis	BMS
Entresto	Sacubitril/Valsartan	Congestive Heart Failure	BMQL; BMQ (more than 24 months)
Everolimus	Zortress	Organ/Bone Marrow Transplant	BMQ
Fentanyl	Duragesic	Chronic Pain	BMQ
Flecainide		Atrial Fibrillation/Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
Geodon	Ziprasidone	Bipolar Disorder	BMQ
Haldol	Haloperidol	Bipolar Disorder	BMQ
Harvoni	Ledipasvir/Sofosbuvir	Chronic Hepatitis	BMQ
Hydroxyurea	Hydrea	Cancer/Sickle Cell Anemia	BMQ
Incivek	Telaprevir	Substance Abuse	BMQ
Incrue Ellipta	Umeclidinium Bromide	COPD	BMQ
Infergen	Interferon	Chronic Hepatitis	BMQ
Inspra	Eplerenone	Congestive Heart Failure	BMQ
Insulin		Diabetes	BMS
Intron A	Interferon alfa-2b	Chronic Hepatitis	BMQ
Isosorbide		Angina/Chest Pain	BMS (more than 24 months)
Kalydeco	Ivacaftor	Cystic Fibrosis	BMQL
Lamictal	Lamotrigine	Bipolar Disorder	BMS**
Lasix + Spironolactone	Furosemide + Spironolactone	Edema	BMQ
Levodopa	Carbidopa/Levodopa	Parkinson's Disease	BMS
Lithium	Lithobid	Bipolar Disorder	BMS**

Medications	Generic	Medical Condition(s)	Plan Eligibility
Lupron	Leuprolide	Cancer	BMQL
Methadone		Chronic Pain/Substance Abuse	BMQ
Mexitil	Mexiletine	Atrial Fibrillation/Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
MS Contin ER	Morphine Sulfate	Chronic Pain	BMP*
Multaq	Dronedaron	Atrial Fibrillation/Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
Mycophenolate	Myfortic	Organ/Bone Marrow Transplant	BMQ
Naltrexone	Vivitrol	Substance Abuse	BMQ
Narcan	Naloxone	Substance Abuse	BMQ
Neupro	Rotigotine	Multiple Sclerosis	BMS
Nitroglycerin (not taken)	Nitrostat (not taken)	Angina/Chest Pain	BMS (more than 24 months); BMP (more than 60 months)
Nitro Patch	Trasderm Nitro	Angina/Chest Pain	BMQ
Olysio	Simeprevir	Chronic Hepatitis	BMQ
Opana	Oxymorphone	Chronic Pain	BMP*
Oxycontin	Oxycodone / Percocet	Chronic Pain	BMP*
Phoslo	Calcium Acetate	Chronic Kidney Disease	BMQ
Prograf	Tacrolimus	Organ/Bone Marrow Transplant	BMQ
Pulmozyme	Dornase Alfa	Cystic Fibrosis	BMQL
Rapamune	Sirolimus	Organ/Bone Marrow Transplant	BMQ
Rebetrol	Rebetron / Ribavirin	Chronic Hepatitis	BMQ
Ranexa	Ranolazine	Angina/Chest Pain	BMQ
Rhythmol	Propafenone	Atrial Fibrillation/Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
Risperdal	Risperidone	Bipolar Disorder	BMS**
Roflumilast	Daliresp	COPD	BMQ
Roxicodone	Oxycodone	Chronic Pain	BMP*
Saphris	Asenapine	Schizophrenia/Bipolar Disorder	BMQ
Seroquel	Quetiapine	Bipolar Disorder	BMS**
Sevelamer	Renagel	Chronic Kidney Disease	BMQ
Simeprevir	Olysio	Chronic Hepatitis	BMQ
Sinemet	Carbidopa / Levodopa	Parkinson's Disease	BMS
Sofosbuvir	Sovaldi	Chronic Hepatitis	BMQ
Spiriva	Tiotropium	COPD	BMQ
Spirolactone	Aldactone	Edema	BMS
Suboxone	Buprenorphine	Alcohol/Substance Abuse	BMQ
Telaprevir	Incivek	Chronic Hepatitis	BMQ
Temodar	Temozolomide	Cancer	BMQL
Tikosyn	Dofetilide	Atrial Fibrillation/Arrhythmias	BMS (more than 24 months); BMP (more than 60 months)
Tobi	Tobramycin	Cystic Fibrosis	BMQL
Trulicity	Dulaglutide	Diabetes	BMP
Tudorza	Aclidinium Bromide	COPD	BMQ
Ultram/Conzip	Tramadol	Chronic Pain	BMP*

Medications	Generic	Medical Condition(s)	Plan Eligibility
Vicodin	Hydrocodone	Chronic Pain	BMP*
Victoza	Liraglutide	Diabetes	BMP
Victrelis	Boceprevir	Chronic Hepatitis	BMQ
Viekira	Ombitasvir/Paritaprevir/ Ritonavir	Chronic Hepatitis	BMQ
Xarelto	Rivaroxaban	Blood Thinner	BMS (more than 24 months)
Zemlar	Paricalcitol	Chronic Kidney Disease	BMQ
Zoladex	Goserelin	Cancer	BMQL
Zyprexa	Olanzapine	Bipolar Disorder	BMS**

**Qualifies for plan if prescribed in isolation and/or not at high daily doses. Multiple daily opioids, high doses or frequent use may result in different plan eligibility.*

***Multiple prescriptions of atypical antipsychotics qualifies only for BMQ classification. These medications taken in combination with other anti-depressants may alter plan eligibility.*

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