THE DOSE

Pharmacy clinical insight from Cigna

DECEMBER 2018

VIEW ONLINE

U.S. biosimilars market and Cigna affordability strategies

Since the first biosimilar launched on the U.S. market in 2015, several additional biosimilar products are now available. As additional biosimilars launch over the coming years, they represent an opportunity to reduce the rapidly increasing cost of specialty drugs through healthy competition. Cigna Pharmacy Management continues to explore affordability strategies for these unique specialty medications.

Read our full biosimilars update. Click here.

Integrated benefits drive engagement and savings

Since 2015, Cigna has conducted a National Book of Business (see footnotes) annual study to explore the value of benefits integration and engagement. In years past, the study focused on the integration of medical and pharmacy benefits only. But given recent findings, like the fact that up to one-third of people with a serious medical or chronic condition also have symptoms of depression,[1] the need for a holistic, integrated approach that includes behavioral health is clear.

That's why this year's study, in which Cigna engaged KPMG, a global auditing and consulting firm, to review study design and methodology, includes an analysis of integrated medical, pharmacy and behavioral health benefits. The results – and the savings – are more compelling than ever.

Increased engagement

Based on the analysis, when medical, pharmacy and comprehensive behavioral health benefits are integrated, customers are significantly more active in health coaching, complex case management, and effective specialty drug management versus those with only Cigna medical and basic behavioral coverage.[2]

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Cigna Pharmacy Management®

We are a Pharmacy Benefits Manager within a global health service company. Our goal is to leverage holistic customer insights and integrated analytics to deliver a more personalized experience and, ultimately, better outcomes and lower total medical costs.

What's inside?

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Together, all the way.®

Cigna®

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Integration Study, continued from page 1

- 22% more individuals engage in health coaching and case management programs
- 15% more individuals complete multiple health improvement activities

Engagement-driven cost savings

Increased engagement in managing health conditions also helps generate medical cost savings for clients who connect their benefits with Cigna.[3]

- $193 annually, on average, for each covered member
- $645 annually for each individual identified with a known health improvement opportunity (approx. 20% of the population)
- These medical savings can increase to more:
  - $9,792 per member per year (PMPY) for an engaged person with a specialty condition
  - $5,900 PMPY for an engaged person with diabetes

A truly integrated experience

Truly connected benefits within the same health services company (not just a data feed) allow for more meaningful insights, more thoughtful interventions and more holistic, individualized and effective customer support. This can mean improved outcomes, productivity and savings for clients and customers alike. That's the value of a truly connected health care experience.

For more information about this multiyear study and effort, click here. Or, access this press release.

1. WebMD, Dealing With Chronic Illnesses and Depression, August 2018.
2. 2018 Cigna National Book of Business (see footnote 3) study of medical customers who have Cigna medical, pharmacy and behavioral benefits vs. those with Cigna medical only. Average annual per member per year (PMPY) estimated medical savings. Individual client/customer | results will vary and are not guaranteed.
3. Cigna 2018 National Book of Business study of medical customers who have Cigna pharmacy and behavioral benefits vs. those with Cigna medical and basic behavioral. Average annual per member per year (PMPY) – Individual client/customer results will vary and are not guaranteed.

Enhanced Narcotic Therapy Management Program working to identify opioid risks

Cigna is committed to helping improve our customers' health, and possibly save lives, by identifying and supporting those at-risk for opioid misuse or possible overdose. Our goal is to reduce overdose among our enrolled customers by 25% by December 2021.[1]

In March 2018, Cigna reached its goal of reducing opioid use by 25% among our commercial customer base – one year ahead of schedule.[2]

One program to help us reach our goal of reducing overdose among customers has recently been enhanced. The Cigna Narcotic Therapy Management program now helps to identify a greater range of customers who may be at risk for substance use disorder or overdose.

We studied current program insights and clinical expertise and then expanded the criteriato identify at-risk substance use patterns. These include:

- Prescriptions from multiple physicians and pharmacies
- High prescription volume or very high daily dose
- High net dose along with other non-opioid medications.

Integrated medical, pharmacy and behavioral benefits, along with partnering with prescribers, allow for better management of our customers' overall health and wellness. When benefit administration is integrated, we can offer programs and services that can work together more effectively compared with clients who carve out parts of administration.

The Cigna Narcotic Therapy Management program at work:

1. **Identify** – Uses **combined benefit data** to form a complete picture of a customer's medical condition and prescription drug use. Then it flags individuals who may be at risk for misuse or abuse of opioids. We calculate a morphine milligram equivalents (MME) score – a sum of the total daily dose of opioids for which a customer receives coverage. This number offers insight into who might be at risk for addiction or overdose.
2. **Guide** – The program triggers prior authorization edits that help to ensure the plan covers the appropriate amount/dose of opioids.
3. **Offer options** – Fully engages physicians when the program flags one of their patients. Once made aware of their usage patterns, the provider may opt to restrict at-risk patients to just one physician or pharmacy for prescription narcotics. He or she may also counsel the patient, discuss pain management alternatives, prescribe overdose rescue or detox medication, make referrals and connect with Cigna programs.
4. **Advocacy** – Assists with referrals to Cigna Behavioral Health to explore treatment options and inpatient or outpatient facilities, if necessary.
5. **Reduce** – Helps to reduce inappropriate use and create better health outcomes through proper opioid management.

Enhanced Narcotic Therapy Management Program, continued from page 2

For more information about the Narcotic Therapy Management program, click here.

Visit Cigna's new pain resource hub, which provides educational material and resources about pain, how it manifests, how it's treated and, ultimately, how to manage it as safely as possible.

Learn more about how Cigna is working together with customers, families, communities and employers to confront the opioid epidemic together. Click here.

1. Initial focus will be on targeted U.S. communities where a sizable number of Cigna commercial customers reside and where there are higher incidences of overdose. These include: Connecticut, Maryland, New Jersey, Virginia, Chicago, New York City, Philadelphia, Washington, DC.
2. Cigna press release, Cigna's Partnership With Physicians Successfully Reduces Opioid Use By 25 Percent – One Year Ahead of Goal, March 2018. https://cigna.com/newsroom/news-releases/2018/cignas-partnership-withphysicians-successfully-reduces-opioid-use-by-25-percent-one-year-ahead-of-goal

Opioid legislation signed into law

On October 24, the SUPPORT for Patients and Communities Act (SUPPORT Act) was signed into law. This comprehensive legislation addresses the United States' opioid crisis. It also takes steps to augment and enhance the nationwide system for preventing and treating opioid addiction.

Nationally, in 2016, nearly 64,000 people died of drug overdoses across the United States. Approximately two-thirds of these deaths were linked to opioids.[1] Opioids were linked to one in five deaths, or 20% of all deaths, for adults ages 25-34.[1]

Overall, the SUPPORT Act aims to improve a wide range of public health measures and law enforcement tools to address the opioid epidemic. These include approval and oversight of existing opioid therapies, prescribing practices and the development of technologies to detect illegally imported narcotics. More specifically, the law lifts a decades-old Medicaid restriction on payment for inpatient addiction treatment. It also expands access to medication-assisted treatment, known as the gold standard of addiction care, and allows Medicare to reimburse for some of these services.

1. Seth P, Scholl L, Rudd RA, Bacon S. Overdose Deaths Involving Opioids, Cocaine, and Psychostimulants — United States, 2015–2016. MMWR Morb Mortal Wkly Rep 2018;67:349–358. DOI: http://dx.doi.org/10.15585/mmwr.mm6712a1

Entresto PA removal tied to Cigna's formulary strategy

Entresto® (sacubitril/valsartan) is used to reduce the risk of cardiovascular death and hospitalizations for patients with chronic heart failure.[1]

As of November 15, 2018, the prior authorization (PA) requirement for Entresto was removed across all commercial group formularies.[2] This affects all commercial group clients with utilization management (UM) in place. (Entresto is subject to the plan's pharmacy benefit terms of coverage at the 2nd tier/ preferred brand level on most formularies/plans.)

Why did Cigna make this change?

To gain insight on the use and clinical value of Entresto, Cigna conducted a real-world evidence study using pharmacy and medical claim data for customers receiving coverage for Entresto. The study compared associated expense of hospitalization claims due to recorded heart failure before and after customers began treatment with Entresto.

Study results showed a reduction in hospitalizations during the period after starting on Entresto, and a corresponding net reduction in total medical cost for the client.[3] This evidence, in conjunction with an assessment of the PA on Entresto where we determined that the vast majority of use was consistent with the PA criteria, led to the decision to lift the PA requirement.

This change shows that managing medical and pharmacy in a connected benefit is critical to developing a strategy that helps improve health outcomes and lower total medical cost.

For more information about Entresto, Cigna's actions, and the study that shows how Entresto can reduce the risk and additional medical costs of heart failure-related hospitalizations, click here.

1. Entresto®, a prescription medicine used to reduce risk of death and hospitalization in people with certain types of long-lasting (chronic) heart failure. Usually used with other heart failure therapies, in place of an ACE inhibitor or other ARB therapy. Novartis Pharmaceuticals Corporation, East Hanover, New Jersey. November 2017.
2. Does not include Individual and Family Plan formularies.
3. Cigna National Book of Business clinical study 2018.

New auto-fill service at Cigna Home Delivery Pharmacy℠

Now it's easy for customers to stay on track with the important medications they take every day. With Cigna Home Delivery Pharmacy Automatic Refill service, customers can automatically refill prescription medication they take regularly. This service began in early November 2018.

Our new pharmacy services are fast and convenient

Customers eligible for our auto-refill service will have choices: Whether or not they want to enroll and how they wish to do so. They can opt to enroll some prescriptions and not others – it's their choice. Enrollment is available online at myCigna.com, on the myCigna® mobile app,* or by phone. It's free and easy to get started.

Enrolled customers get their next refill(s) in the mail automatically. They won't need to call in for a refill. They can save time and rest assured they'll have the medication they need on hand. We will alert the customer 14 days before we refill or renew the prescription, so customers can choose to cancel if they'd like.

The auto-refill service is not offered for specialty medications.

* The downloading and use of the myCigna Mobile App is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile phone carrier and data usage charges apply.

Drug updates

Pipeline review

This section highlights selected pipeline drugs expected to be approved by the U.S. Food and Drug Administration (FDA) in 2019 that may significantly impact clinical practice and/or pharmaceutical costs.[1,2]

Drug name/ manufacturer	Proposed use	How it works	What's important
AVXS-101/AveXis	Treatment of type I spinal muscular atrophy (SMA); type I SMA is a rare genetic neuromuscular disease that may occur in approximately 200–250 US births annually	One-time gene therapy that delivers a functioning copy of the missing gene that causes SMA	**Route of administration:** IV injection **Benefit coverage:** Medical **Anticipated FDA decision:** Late 2018 or early 2019 **U.S. sales forecast in 2024:** $781M; analysts speculate that AVXS-101 could be priced in the range of $4M–$5M per patient
esketamine/ Johnson & Johnson	Treatment of major depressive disorder (MDD) that does not respond to standard treatments	Esketamine provides a potent and rapid onset antidepressant effect but has significant side effects and potential for misuse. It will likely be used in severely depressed or suicidal individuals who do not respond to other therapies, and administered in a medically supervised setting	**Route of administration:** Intranasal **Benefit coverage:** Medical **Anticipated FDA decision:** 1Q2019 **U.S. sales forecast in 2024:** $437M
siponimod/Novartis	Treatment of secondary progressive and relapsing forms of multiple sclerosis (MS)	Same mechanism as Gilenya® but does not appear to have cardiovascular side effects. Limited treatment options for secondary progressive MS	**Route of administration:** Oral **Benefit coverage:** Pharmacy **Anticipated FDA decision:** 1Q2019 **U.S. sales forecast in 2024:** $699M
NKTR-181/Nektar	Treatment of chronic low back pain	New type of opioid for pain that exhibits a very low incidence of side effects (e.g., euphoria, respiratory depression) and very low misuse potential	**Route of administration:** Oral **Benefit coverage:** Pharmacy **Anticipated FDA decision:** 2Q2019 **U.S. sales forecast in 2024:** $149M
AR101/Aimmune Therapeutics	Desensitization for individuals with peanut allergies	AR101 is an oral formulation of peanut protein. Gradually increasing doses of AR101 are given daily to desensitize individuals over a six-month period. Oral administration may be preferred over current injectable treatment options	**Route of administration:** Oral **Benefit coverage:** Pharmacy **Anticipated FDA decision:** 1H2019 **U.S. sales forecast in 2024:** $1,747M

Pipeline Review, continued from page 5

Drug name/ manufacturer	Proposed use	How it works	What's important
Viaskin Peanut/DBV Technologies	Desensitization for individuals with peanut allergies	Viaskin Peanut uses a similar desensitization approach to AR101, except the peanut protein is delivered via a topical transdermal patch. Transdermal patch administration may be preferred over current injectable treatment options	**Route of administration:** Topical transdermal patch **Benefit coverage:** Pharmacy **Anticipated FDA decision:** 1H2019 **U.S. sales forecast in 2024:** $687M
lisocabtagene maraleucel/Celgene	Treatment of relapsed or refractory DLBCL (diffuse large B-cell lymphoma)	Lisocabtagene will be the third CAR-T (chimeric antigen receptor T-cell) cellular gene therapy on the market, following Kymriah and Yescarta	**Route of administration:** Intravenous **Benefit coverage:** Medical **Anticipated FDA decision:** 2H2019 **U.S. sales forecast in 2024:** $782M
brolucizumab/ Novartis	Treatment of wet age-related macular degeneration (wet AMD)	Brolucizumab works similar to other wet AMD agents by stopping the growth and leakage of blood vessels in the eye. It may offer the advantage of less frequent dosing (every 12 weeks) over currently available treatments for wet AMD	**Route of administration:** Intraocular **Benefit coverage:** Medical **Anticipated FDA decision:** 2H2019 **U.S. sales forecast in 2024:** $877M
VX-659 + ivacaftor + tezacaftor/Vertex	Treatment of cystic fibrosis (CF)	Targets specific gene mutations that cause CF. Current CF treatments (Kalydeco, Orkambi, Symdeko) are only effective in approximately 30% of the CF population. In addition to potentially being more effective in improving lung function, up to 90% of individuals with CF may respond to the VX-659 triple combination	**Route of administration:** Oral **Benefit coverage:** Pharmacy **Anticipated FDA decision:** 4Q2019 **U.S. sales forecast in 2024:** $2,066M

1. EvaluatePharma, Evaluate Ltd., London, United Kingdom. www.evaluatepharma.com Accessed November 8, 2018
2. Biomedtracker, Informa Business Intelligence, Inc., New York, NY. www.biomedtracker.com Accessed November 8, 2018
Note:
Benefit coverage is based on currently available information and could change pending final FDA-approved prescribing information

Formulary updates

The following changes were made to Cigna formularies between July 6, 2018 and November 2, 2018.

Brand drug additions

BRAND NAME	STRENGTH	COMMON USE	CLINICAL EDITS	COPAY TIER				
				Standard formulary	Value formulary	Performance formulary	Advantage formulary	Legacy formulary
AJOVY	225 MG/1.5	Prevention of migraine		NC	NC	NC	NC	3
ALTRENO	0.05%	Acne	PA	3	3	3	3	3
ARIKAYCE	590 MG/8.4	Antibiotic	PA	3	3	3	3	3
COPIKTRA	15, 25 MG	Leukemia, lymphoma	PA	3	3	3	3	3
DELSTRIGO	100–300 MG	HIV/AIDS		3	3	3	3	3
DUPIXENT	200 MG/1.14	Eczema, asthma	PA	3	3	3	3	3
EMGALITY	120 MG/ML	Prevention of migraine		NC	NC	NC	NC	3
EPIDIOLEX	100 MG/ML	Seizures	PA	3	3	3	3	3
GALAFOLD	123 MG	Fabry's disease	PA	3	3	3	3	3
ILARIS	150 MG/ML	Cryopyrin-associated periodic syndromes (CAPS), other rare inflammatory conditions	PA	3	3	3	3	3
KAPSPARGO SPRINKLE	25, 50, 100, 200 MG	Hypertension		3	3	3	3	3
LENVIMA	4, 12 MG	Thyroid, kidney, liver cancer	PA	3	3	3	3	3
MACRILEN	0.5 MG/ML	Diagnostic for adult growth hormone deficiency		3	3	3	3	3
MINOLIRA ER	105, 135 MG	Antibiotic		NC	NC	NC	NC	3
MULPLETA	3 MG	Increase platelet count in chronic liver disease	PA	3	3	3	3	3
NIVESTYM	300, 480 MCG	Increase white blood cell count in cancer	PA	3	3	3	3	3
NOCDURNA	25, 50 MCG	Nocturnal polyuria		NC	NC	NC	NC	3
NUPLAZID	10, 34 MG	Psychosis in Parkinson's disease	PA	3	3	3	3	3
ORKAMBI	100–125, 150–188 MG	Cystic fibrosis	PA, QL	3	3	3	3	3
PIFELTRO	100 MG	HIV/AIDS		3	3	3	3	3

Formulary updates, continued from page 7

Brand drug additions

BRAND NAME	STRENGTH	COMMON USE	CLINICAL EDITS	COPAY TIER				
				Standard formulary	Value formulary	Performance formulary	Advantage formulary	Legacy formulary
QBREXZA	2.40%	Excessive sweating		NC	NC	NC	NC	3
SIGNIFOR LAR	10,30 MG	Acromegaly, Cushing's disease	PA	3	3	3	3	3
SOMAVERT	10 MG	Acromegaly	PA	2	2	2	3	2
SYMTUZA	800-150 MG	HIV/AIDS		3	3	3	3	3
TAKHZYRO	300 MG/2 ML	Hereditary angioedema	PA	3	3	3	3	3
TALZENNA	0.25,1.0 MG	Breast cancer	PA	3	3	3	3	3
TEGSEDI	284 MG	Hereditary amyloidosis	PA	3	3	3	3	3
TIBSOVO	250 MG	Acute myeloid leukemia	PA	3	3	3	3	3
TIGLUTIK	50 MG/10 ML	Amyotrophic lateral sclerosis (ALS)	PA	3	3	3	3	3
VIZIMPRO	15,30,45 MG	Lung cancer	PA	3	3	3	3	3
XARELTO	2.5 MG	Prevention or treatment of blood clots		2	2	2	2	2
XEPI	1%	Impetigo		NC	NC	NC	NC	3
XOFLUZA	20,40 MG	Seasonal influenza	QL	3	3	3	3	3
ZORTRESS	1 MG	Prevent organ rejection after transplant		3	3	3	3	3
ZTLIDO	1.80%	Pain due to postherpetic neuraligia		NC	NC	NC	NC	3

PA: Prior authorization
QL: Quantity limit
ST: Step Therapy
T1/Tier 1: Generic
T2/Tier 2: Brand
T3/Tier 3: Non-preferred
NC: Not Covered: This drug is not covered. However, if the covered alternative is not appropriate for the customer, there is a process where his/her provider can request approval of this drug.

Generic drug additions

GENERIC NAME	STRENGTH	CORRESPONDING BRAND NAME	COMMON USE	CLINICAL EDITS	COPAY TIER				
					Standard formulary	Value formulary	Performance formulary	Advantage formulary	Legacy formulary
ALBENDAZOLE	200 MG	ALBENZA	Parasitic infections		1	1	1	1	1
AMPHETAMINE SULFATE	5, 10 MG	EVEKEO	ADD/ADHD		1	1	1	1	1
BENOXINATE HCL/FLUORES-CEIN SOD	0.4%–0.25%	FLURESS	Ophthalmic procedures		1	1	1	1	1
BUDESONIDE	9 MG	UCERIS	Ulcerative colitis		1	1	1	1	1
BUPROPION HCL	450 MG	FORFIVO XL	Anti-depressant	QL	1	1	1	1	1
BUTALBITAL/ ACETAMINOPHEN	50 MG – 300 MG	BUTALBITAL-ACETAMINOPHEN	Migraine headache		NC	NC	NC	NC	1
CLINDAMYCIN PHOS/BENZOYL PEROX	1.2%–2.5%	ACANYA	Acne		1	1	1	1	1
CLINDAMYCIN PHOSPHATE	1.00%	CLINDAGEL	Acne		1	1	1	1	1
CLOBAZAM	2.5, 10, 20 MG	ONFI	Seizures		1	1	1	1	1
COLESEVELAM HCI	3.75 G	WELCHOL	Hyper-cholesterolemia		1	1	1	1	1
CROTAMITON	10%	EURAX	Scabies or pruritis		1	1	1	1	1
DALFAMPRIDINE	10 MG	AMPYRA	Multiple sclerosis	PA	1	1	1	1	1
DESOXIMETASONE	0.25%	TOPICORT	Topical inflammatory conditions		1	1	1	1	1
DEXAMETHASONE	1.5 MG	DEXPAK	Inflammatory or allergic conditions		NC	NC	NC	NC	1
DORZOLAMIDE/ TIMOLOL	2 %–0.5 %	COSOPT PF	Glaucoma		1	1	1	1	1
GLYCOPYRRO-LATE	1.5 MG	GLYCATE	Peptic ulcer		1	1	1	1	1
ITRACONAZOLE	10 MG/ML	SPORANOX	Fungal infections		1	1	1	1	1
LACTULOSE	10 G	KRISTALOSE	Laxative		1	1	1	1	1
LIDOCAINE/ EMOLLIENT CMB NO.102	5%	DERMACINRX PHN PAK	Topical inflammatory conditions		1	1	1	1	1
LULICONAZOLE	1%	LUZU	Topical antifungal		1	1	1	1	1
METFORMIN HCL	500 MG/ 5 ML	RIOMET	Diabetes, type II		1	1	1	1	1
MORPHINE SULFATE	40 MG	KADIAN	Severe pain	PA, QL	1	1	1	1	1

Generic drug additions, continued from page 9

Generic drug additions

GENERIC NAME	STRENGTH	CORRESPONDING BRAND NAME	COMMON USE	CLINICAL EDITS	COPAY TIER				
					Standard formulary	Value formulary	Performance formulary	Advantage formulary	Legacy formulary
TADALAFIL	20 MG	ADCIRCA	Pulmonary arterial hypertension		1	1	1	1	1
TADALAFIL	2.5,5,10, 20 MG	CIALIS	Erectile dysfunction or benign prostatic hyperplasia	PA	1	1	1	1	1
TESTOSTERONE	20.25/1.25. 1.25G-1.62,2.5G-1.62	ANDROGEL	Testosterone deficiency	PA, QL	1	1	1	1	1
VARDENAFIL HCL	2.5,5,10, 20 MG	LEVITRA	Erectile dysfunction	PA, QL	1	1	1	1	1

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Tier changes

BRAND NAME	STRENGTH	COMMON USE	TIER CHANGE	CLINICAL EDITS	PDL TIER				
					Standard formulary	Value formulary	Performance formulary	Advantage formulary	Legacy formulary
AMETHIA LO	0.10–0.02–0.01	Contraception	From 2 to 3		3	3	3	3	3
AZILECT	0.5, 1 MG	Parkinson's disease	From 2 to 3	QL	3	3	3	3	3
BILTRICIDE	600 MG	Parasitic infection	From 2 to 3		3	3	3	3	3
CELLCEPT	250, 500 MG; 200 MG/ML	Prevent organ rejection after transplant	From 2 to 3		3	3	3	3	3
COLCRYST	0.6 MG	Gout	From 2 to 3		3	3	3	3	3
ENTYVIO	300 MG	Crohn's disease or ulcerative colitis	From 3 to 2	PA					
LAMICTAL ODT	25, 50, 100, 200 MG	Seizures	From 2 to 3		3	3	3	3	3

Tier changes, continued from page 10

Tier changes

BRAND NAME	STRENGTH	COMMON USE	TIER CHANGE	CLINICAL EDITS	PDL TIER				
					Standard formulary	Value formulary	Performance formulary	Advantage formulary	Legacy formulary
NEORAL	25 MG, 100 MG/ML	Prevent organ rejection after transplant	From 2 to 3		3	3	3	3	3
NEXIUM DR PKT	25 MG, 100 MG/ML	Acid reflux	From 3 to 2	QL	2	2	2 (no change)	2	2 (no change)
SANDIMMUNE	100 MG	Prevent organ rejection after transplant	From 2 to 3		3	3	3	3	3
SEASONIQUE	0.15-0.03-0.01	Contraception	From 2 to 3		3	3	3	3	3
TARGRETIN	75 MG	Cutaneous lymphoma	From 2 to 3	PA	3	3	3	3	3
TAZORAC	0.10%	Psoriasis	From 2 to 3		3	3	3	3	3
WELCHOL	625 MG, 3.75 G	Hyper-cholesterolemia	From 2 to 3		3	3	3	3	3

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On the horizon – upcoming first generic launches*

TARGET DATE	BRAND NAME	GENERIC NAME	COMMON USE	2017 U.S. BRAND SALES
2H2018	CANASA	Mesalamine	Ulcerative colitis	$244M
2H2018	MOVIPREP	Ascorbic acid; polyethylene glycol 3350; potassium chloride; sodium ascorbate; sodium chloride; sodium sulfate	Colonoscopy bowel prep	$38M
2H2018	RAPAFLO	Silodosin	Benign prostatic hyperplasia (BPH)	$206M
2019	OMNARIS	Ciclesonide	Allergic rhinitis	$10M
2019	ZORTRESS	Everolimus	Prevent organ rejection after transplant	$130M
2019	EPCLUSA	Sofosbuvir; Velpatasvir	Hepatitis C (HCV)	$2,747M
2019	HARVONI	Sofosbuvir; Ledipasvir	Hepatitis C (HCV)	$5,549M
2019	OMEPRAZOLE (tablet) (Dexcel)	Omeprazole	Acid reflux	$0M
2019	RANEXA	Ranolazine	Ischemic heart diseases, chronic angina	$889M
2019	SOLODYN (105 mg)	Minocycline Hydrochloride	Acne	$58M
2019	EXJADE	Deferasirox	Treatment of chronic iron overload	$165M
2019	OSMOPREP	Sodium phosphate, dibasic, anhydrous; sodium phosphate, monobasic, monohydrate	Constipation or colonoscopy bowel prep	$10M
2020	SILENOR	Doxepin Hydrochloride	Insomnia	$42M
2020	NOXAFIL (suspension)	Posaconazole	Fungal infections	$25M
2020	OFIRMEV	Acetaminophen	Moderate to severe pain	$314M

*Source for upcoming first generic launches table: IPD analytics, http://www.ipdanalytics.com; assessed August 1, 2018.

Cigna®