

2019 PREVENTIVE DRUG LIST



As of January 1, 2019

Preventive medications are used to prevent conditions like high blood pressure, high cholesterol, diabetes, asthma, osteoporosis, heart attack, stroke and prenatal nutrient deficiency.

This document shows the most commonly prescribed preventive generic and brand name medications your plan covers as of January 1, 2019.¹ **The Preventive Drug List is regularly updated so it's important to know that this is not a complete list of covered medications, and not all of the medications listed here may be covered by your specific plan.**

Here's some helpful information about this drug list:

- › Medications are listed alphabetically by the condition they prevent.
- › Brand name medications are capitalized and generic medications are lowercase.
- › Some brand name preventive medications have a generic equivalent. For these medications, the generic will be listed in parenthesis next to the brand name.
- › Some preventive medications are also considered "specialty" medications. Some plans may cover specialty medications on a specialty tier, may limit coverage to a 30-day supply and/or require you to use a preferred specialty pharmacy to receive coverage. Please log in to the **myCigna**[®] website or app, or check your plan materials, to learn more about how your plan covers specialty medications.

Some plans have specific coverage requirements for preventive medications.

For example, some plans may:

- › Require you to pay a copay, coinsurance (the percentage you pay after you meet your deductible) and/or deductible (the amount you pay before your plan starts to pay) to receive coverage for a preventive generic medication. Or,
- › Cover preventive generic medications at 100%, or no cost (\$0) to you.

You should log into the **myCigna**[®] website or app or check your plan materials to learn more about how your plan covers preventive medications. You can also use the Drug Cost tool to estimate how much your medication may cost and view lower-cost alternatives, if available.²

Go generic and save

Your plan covers many preventive medications. You should ask your doctor if a lower-cost generic medication may be right for you. Generics have the same strength and active ingredients as brand name medications, but often cost much less – in some cases, up to 85% less.³

Together, all the way.[®]



Offered by: Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, or their affiliates.

887232 m All with Diabetic Supplies for Legacy 10/18

Preventive Drug List

Asthma related

Accolate
Advair Diskus
Advair HFA
AirDuo RespiClick
albuterol
Alvesco
Anoro Ellipta
Arcapta Neohaler
ArmonAir RespiClick
Arnuity Ellipta
Asmanex
Asmanex HFA
Atrovent HFA
Bevespi Aerosphere
Breo Ellipta
Brovana
budesonide
caffeine citrate
Combivent Respimat
cromolyn
Dulera
Elixophyllin
Flovent Diskus
Flovent HFA
fluticasone-salmeterol

Asthma related

(continued)

Incruse Ellipta
ipratropium
ipratropium-albuterol
levalbuterol
levalbuterol concentrate
levalbuterol HFA
Lonhala Magnair
metaproterenol
montelukast
Perforomist
ProAir HFA
ProAir RespiClick
Proventil HFA
Pulmicort
Pulmicort Flexhaler
QVAR RediHaler
Seebri Neohaler
Serevent Diskus

Singular
Spiriva
Spiriva Respimat
Stiolto Respimat
Striverdi Respimat
Symbicort
terbutaline tablet
Theo-24
Theochron
theophylline
Utibron Neohaler
Ventolin HFA
Xolair
Xopenex
Xopenex Concentrate
Xopenex HFA
zafirlukast
zileuton ER
Zyflo
Zyflo CR

Blood pressure related

Accupril
Accuretic
acebutolol
acetazolamide
Adalat CC
Afeditab CR
Aldactazide
Aldactone
Altace
amiloride
amiloride-HCTZ
amlodipine
amlodipine-benazepril
amlodipine-olmesartan
amlodipine-valsartan
amlodipine-valsartan-HCTZ
Atacand
Atacand HCT
atenolol
atenolol-chlorthalidone
Avalide
Avapro
Azor
benazepril
benazepril-HCTZ
Benicar

Benicar HCT
Betapace
Betapace AF
betaxolol
bisoprolol
bisoprolol-HCTZ
bumetanide
Bystolic
Byvalson
Calan
Calan SR
candesartan
candesartan-HCTZ
captopril
captopril-HCTZ
Cardizem
Cardizem CD
Cardizem LA
Cardura
Cardura XL
Carospir
Cartia XT
carvedilol
carvedilol ER
Catapres
Catapres-TTS
chlorothiazide
chlorthalidone
clonidine
Coreg
Coreg CR
Corgard
Corzide
Cozaar
Demadox
Demser
Dibenzylidine
diltiazem
diltiazem 12hr ER
diltiazem 24hr CD
diltiazem 24hr ER
diltiazem ER
Dilt-XR
Diovan
Diovan HCT
Diuril
doxazosin
Dutoprol

Blood Pressure related

(continued)

Dyazide
Dyrenium
Edarbi
Edarbyclor
Edecrin
enalapril
enalapril-HCTZ
Epaned
eplerenone
eprosartan
ethacrynic acid
Exforge
Exforge HCT
felodipine ER
fosinopril
fosinopril-HCTZ
furosemide
guanfacine
Hemangeol
hydralazine
hydrochlorothiazide
Hyzaar
indapamide
Inderal LA
Inderal XL
Innopran XL
Inspra
irbesartan
irbesartan-HCTZ
isradipine
Kaspargo Sprinkle
labetalol
Lasix
lisinopril
lisinopril-HCTZ
Livalo
Lopressor
Lopressor HCT
losartan
losartan-HCTZ
Lotensin
Lotensin HCT
Lotrel
Matzim LA
Maxzide
Maxzide-25

methazolamide
methyclothiazide
methyldopa
methyldopa-HCTZ
metolazone
metoprolol
metoprolol ER-HCTZ
metoprolol-HCTZ
Micardis
Micardis HCT
Microzide
Minipress
minoxidil
moexipril
moexipril-HCTZ
nadolol
nadolol-bendroflumethiazide
Neptazane
nicardipine
nifedipine
nifedipine ER
nimodipine
nisoldipine
Norvasc
Nymalize
olmesartan
olmesartan-amlodipine-HCTZ
olmesartan-HCTZ
perindopril
phenoxybenzamine
pindolol
prazosin
Prestalia
Prinivil
Procardia
Procardia XL
propranolol
propranolol ER
propranolol-HCTZ
Qbrelis
quinapril
quinapril-HCTZ
ramipril
Sorine
sotalol
sotalol AF
Sotylize
spironolactone
spironolactone-HCTZ

Sular
Tarka
Taztia XT
Tekturna
Tekturna HCT
telmisartan
telmisartan-amlodipine
telmisartan-HCTZ
Tenoretic 100
Tenoretic 50
Tenormin
terazosin
Tiazac
timolol
Toprol XL
torsemide
trandolapril
trandolapril-verapamil ER
triamterene-HCTZ
Tribenzor
Twynsta
valsartan
valsartan-HCTZ
Vaseretic
Vasotec
Vecamyl
verapamil
verapamil ER
verapamil ER PM
verapamil SR
Verelan
Verelan PM
Zestoretic
Zestril
Ziac

Blood thinner related

Aggrenox
aspirin-dipyridamole ER
Brilinta
cilostazol
clopidogrel
Coumadin
dipyridamole
Durlaza
Effient
Eliquis
Jantoven
Plavix

Blood thinner related

(continued)

Pradaxa
prasugrel
Savaysa
warfarin
Xarelto
Yosprala
Zontivity

Cholesterol related

Altoprev
amlodipine-atorvastatin
Antara
atorvastatin
Caduet
cholestyramine
cholestyramine Light
colesevelam
Colestid
colestipol
Crestor
ezetimibe
ezetimibe-simvastatin
fenofibrate
fenofibric acid
Fenoglide
Fibricor
FloLipid
fluvastatin ER
fluvastatin
gemfibrozil
Lescol
Lescol XL
Lipitor
Lipofen
Livalo
Lopid
lovastatin
Lovaza
niacin ER
Niacor
Niaspan
omega-3 ethyl esters
Pravachol
pravastatin
Prevalite
Questran

Questran Light
rosuvastatin
simvastatin
Tricor
Triglide
Triklo
Trilipix
Vascepa
Vytorin
Welchol
Zetia
Zocor
Zypitamag

Diabetes related

Please log in to the [myCigna website or app](#), or check your plan materials, to learn more about how your plan covers diabetes-related preventive medications.

acarbose
Actoplus met
Actoplus met XR
Actos
Adlyxin
Admelog
Admelog SoloStar
Afrezza
alogliptin
alogliptin-metformin
alogliptin-pioglitazone
Amaryl
Apidra
Apidra SoloStar
Avandia
Basaglar
Bydureon
Byetta
chlorpropamide
Cycloset
Diabetic Supplies (i.e. lancets, syringes, urine test, alcohol pads)
Duetact
Farxiga
Fiasp
Fortamet
glimepiride
glipizide
glipizide ER

glipizide XL
glipizide-metformin
Glucophage
Glucophage XR
Glucotrol
Glucotrol XL
Glucovance
Glumetza
glyburide
glyburide micronized
glyburide-metformin
Glynase
Glyset
Glyxambi
Humalog
Humulin
Invokamet
Invokamet XR
Invokana
Janumet
Janumet XR
Januvia
Jardiance
Jentadueto
Jentadueto XR
Kazano
Kombiglyze XR
Lantus
Lantus SoloStar
Levemir
metformin
metformin ER
miglitol
nateglinide
Nesina
Novolin
Novolog
OneTouch test strips and meters
Onglyza
Oseni
Ozempic
pioglitazone
pioglitazone-glimepiride
pioglitazone-metformin
Prandin
Precose
QTERN
repaglinide
repaglinide-metformin

Diabetes related

(continued)

Riomet
Segluromet
Soliqua
Starlix
Steglatro
Steglujan
SymlinPen
Synjardy
Synjardy XR
Tanzeum
tolazamide
tolbutamide
Toujeo Max SoloStar
Toujeo SoloStar
Trajenta

Tresiba
Trulicity
Victoza
Xigduo XR
Xultophy

Osteoporosis related

Actonel
alendronate
Atelvia
Binosto
Boniva
calcitonin-salmon
etidronate
Evista
Forteo
Fosamax

Fosamax Plus D
ibandronate
Miacalcin
raloxifene
risedronate
risedronate DR
Tymlos

Prenatal vitamins

Your plan considers all prescription strength prenatal vitamins to be "preventive."

Please check your drug list to see which tier your plan covers prenatal vitamins on.

Brand name medications are capitalized and generic medications are lowercase



1. State laws in Texas and Louisiana may require your plan to cover your medications at your current benefit level until your plan renews. This means that if your medication is taken off the drug list, is moved to a higher cost-share tier or needs approval, these changes may not begin until your renewal date. To find out if these state laws apply to your plan, please call Customer Service using the number on the back of your ID card.
2. Prices are not guaranteed, and even though a price is displayed in the Drug Cost tool, it's not a guarantee of coverage. Your costs and coverage may change by the time you fill your prescription at the pharmacy, and medication costs at individual pharmacies can vary. For example, your pharmacy's retail cash price for a specific medication may be less than the price shown in the Drug Cost tool. Coverage and pricing may change.
3. U.S. Food and Drug Administration (FDA) website, "Generic Drug Facts." Last updated 06/04/18.

Cigna reserves the right to make changes to this drug list without notice. Your plan may cover additional medications; please refer to your enrollment materials for details. Cigna does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna may receive payments from manufacturers of certain preferred brand medications, and in limited instances, certain non-preferred brand medications, that may or may not be shared with your plan depending on its arrangement with Cigna. Depending upon plan design, market conditions, the extent to which manufacturer payments are shared with your plan and other factors as of the date of service, the preferred brand medication may or may not represent the lowest-cost brand medication within its class for you and/or your plan.

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. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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Cigna:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact customer service at the toll-free number shown on your ID card, and ask a Customer Service Associate for assistance.

If you believe that Cigna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by sending an email to ACAGrievance@Cigna.com or by writing to the following address:

Cigna
Nondiscrimination Complaint Coordinator
PO Box 188016
Chattanooga, TN 37422

If you need assistance filing a written grievance, please call the number on the back of your ID card or send an email to ACAGrievance@Cigna.com. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, DC 20201
1.800.368.1019, 800.537.7697 (TDD)
Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>.



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Proficiency of Language Assistance Services

English – ATTENTION: Language assistance services, free of charge, are available to you. For current Cigna customers, call the number on the back of your ID card. Otherwise, call 1.800.244.6224 (TTY: Dial 711).

Spanish – ATENCIÓN: Hay servicios de asistencia de idiomas, sin cargo, a su disposición. Si es un cliente actual de Cigna, llame al número que figura en el reverso de su tarjeta de identificación. Si no lo es, llame al 1.800.244.6224 (los usuarios de TTY deben llamar al 711).

Chinese – 注意：我們可為您免費提供語言協助服務。對於 Cigna 的現有客戶，請致電您的 ID 卡背面的號碼。其他客戶請致電 1.800.244.6224（聽障專線：請撥 711）。

Vietnamese – XIN LỜI Ý: Quý vị được cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Dành cho khách hàng hiện tại của Cigna, vui lòng gọi số ở mặt sau thẻ Hội viên. Các trường hợp khác xin gọi số 1.800.244.6224 (TTY: Quay số 711).

Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 현재 Cigna 가입자님들께서는 ID 카드 뒷면에 있는 전화번호로 연락해주시십시오. 기타 다른 경우에는 1.800.244.6224 (TTY: 다이얼 711)번으로 전화해주시십시오.

Tagalog – PAUNAWA: Makakakuha ka ng mga serbisyo sa tulong sa wika nang libre. Para sa mga kasalukuyang customer ng Cigna, tawagan ang numero sa likuran ng iyong ID card. O kaya, tumawag sa 1.800.244.6224 (TTY: I-dial ang 711).

Russian – ВНИМАНИЕ: вам могут предоставить бесплатные услуги перевода. Если вы уже участвуете в плане Cigna, позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки участника плана. Если вы не являетесь участником одного из наших планов, позвоните по номеру 1.800.244.6224 (TTY: 711).

Arabic – برجاء الانتباه خدمات الترجمة المجانية متاحة لكم. لعملاء Cigna الحاليين برجاء الاتصال بالرقم المدون علي ظهر بطاقتكم الشخصية. او اتصل ب 1.800.244.6224 (TTY: اتصل ب 711).

French Creole – ATANSYON: Gen sèvis èd nan lang ki disponib gratis pou ou. Pou kliyan Cigna yo, rele nimewo ki dèyè kat ID ou. Sinon, rele nimewo 1.800.244.6224 (TTY: Rele 711).

French – ATTENTION: Des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes un client actuel de Cigna, veuillez appeler le numéro indiqué au verso de votre carte d'identité. Sinon, veuillez appeler le numéro 1.800.244.6224 (ATS : composez le numéro 711).

Portuguese – ATENÇÃO: Tem ao seu dispor serviços de assistência linguística, totalmente gratuitos. Para clientes Cigna atuais, ligue para o número que se encontra no verso do seu cartão de identificação. Caso contrário, ligue para 1.800.244.6224 (Dispositivos TTY: marque 711).

Polish – UWAGA: w celu skorzystania z dostępnej, bezpłatnej pomocy językowej, obecni klienci firmy Cigna mogą dzwonić pod numer podany na odwrocie karty identyfikacyjnej. Wszystkie inne osoby prosimy o skorzystanie z numeru 1 800 244 6224 (TTY: wybierz 711).

Japanese – 注意事項: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。現在のCignaのお客様は、IDカード裏面の電話番号まで、お電話にてご連絡ください。その他の方は、1.800.244.6224 (TTY: 711)まで、お電話にてご連絡ください。

Italian – ATTENZIONE: Sono disponibili servizi di assistenza linguistica gratuiti. Per i clienti Cigna attuali, chiamare il numero sul retro della tessera di identificazione. In caso contrario, chiamare il numero 1.800.244.6224 (utenti TTY: chiamare il numero 711).

German – ACHTUNG: Die Leistungen der Sprachunterstützung stehen Ihnen kostenlos zur Verfügung. Wenn Sie gegenwärtiger Cigna-Kunde sind, rufen Sie bitte die Nummer auf der Rückseite Ihrer Krankenversicherungskarte an. Andernfalls rufen Sie 1.800.244.6224 an (TTY: Wählen Sie 711).

Persian (Farsi) – توجه: خدمات کمک زبانی، به صورت رایگان به شما ارائه می‌شود. برای مشتریان فعلی Cigna، لطفاً با شماره‌ای که در پشت کارت شناسایی شماست تماس بگیرید. در غیر اینصورت با شماره 1.800.244.6224 تماس بگیرید (شماره تلفن ویژه ناشنوايان: شماره 711 را شماره‌گیری کنید).