



**2018 Preventive Drug List for
Consumer Driven Health Plans
Expanded List**



Alphabetical Listing – Expanded List

A

Abacavir
 Abacavir-Lamivudine
 Abacavir-Lamivudine-
 Zidovudine
Abilify E
 Acarbose
Accolate
Accuneb
Accupril
Accuretic
 Acebutolol
Aceon
Actonel
ACTOplus Met
ACTOplus Met XR
Actos E
Adalat CC
Adlyxin
Advair Diskus
Advair HFA
Afrezza E
Aerospan
 Afeditab
Aggrenox
AirDuo Resplick E
 Albuterol Nebulized
 Solution
 Albuterol Oral Tablet
Aldactazide
Aldactone
 Alendronate
Alogliptin E
**Alogliptin-
 Metformin E**
**Alogliptin-Pioglitazone
 E**
Altace
Altoprev E
Alvesco
Amaryl
 Amiloride
 Amiloride-
 Hydrochlorothiazide
 Aminophylline
 Amlodipine
 Amlodipine-Benazepril
 Amlodipine-Olmesartan **E**
 Amlodipine-Olmesartan-
 Hydrochlorothiazide **E**
 Amlodipine-Valsartan
 Amlodipine-Valsartan-
 Hydrochlorothiazide **E**
Amturnide E
 Anastrozole
Anoro Ellipta
Antara E
Apidra
Aptivus
Arcapta Neohaler
Arimidex E
 Aripiprazole
Arixtra
Arnuity Ellipta
Aromasin
Asmanex HFA
Asmanex Twisthaler
 Aspirin-Dipyridamole
Astagraf XL E

Atacand
Atacand HCT
Atelvia E
 Atenolol
 Atenolol-Chlorthalidone
Atripla
 Atorvastatin
Atrovent HFA
Aubagio
Avalide
Avandia
Avapro
Avonex
Azasan
 Azathioprine
Azor E

B

Basaglar
 Benazepril
 Benazepril-
 Hydrochlorothiazide
Benicar E
Benicar HCT E
Betaseron
 Betaxolol*
Bevespi Aerosphere
Bidil
Binosto E
 Bisoprolol
 Bisoprolol-
 Hydrochlorothiazide
Boniva
Breo Ellipta
Brilinta
Brovana
 Budesonide
 Bumetanide
Bydureon
Byetta
Bystolic
Byvalson E

C

Calan
Calan SR
 Calcitonin (Salmon)
 Candesartan
 Candesartan-
 Hydrochlorothiazide
 Captopril
 Captopril-
 Hydrochlorothiazide
Cardene SR
Cardizem E
Cardizem CD E
Cardizem LA E
Cardura
 Cartia XT
 Carvedilol
Catapres
Catapres TTS
Cellcept E
 Chlorothiazide
 Chlorpromazine
 Cholestyramine
 Cholestyramine Light
 Choline Fenofibrate **E**
 Cilostazol

Clonidine
 Clonidine Patch
 Clopidogrel
Clorpress
 Clozapine
Clozaril
Colestid
 Colestipol
Combivent Respimat
Combivir
Complera
Copaxone
Coreg
Coreg CR E
Corgard
Corzide
Coumadin
Covera HS
Cozaar
Crestor E
Crixivan
 Cromolyn
Cycloset
 Cyclosporine

D

Daliresp
Demadex
Descovy
Diabeta
 Diabetic Testing - Lancets
 Didanosine
Didronel
Dilacor XR
 Dilt CD
 Dilt XR
 Diltia XT
 Diltiazem
 Diltiazem ER
 Diltzac ER
Diovan E
Diovan HCT E
 Dipyridamole
Diuril
 Doxazosin
Duetact
Dulera E
Duoneb
Dutoprol E
Dyazide
Dynacirc CR
Dyrenium

E

Edarbi
Edarbyclor
Edecrin
Edurant
Effient
Eliquis
Elixophyllin
Emtriva
 Enalapril
 Enalapril-
 Hydrochlorothiazide
 Enoxaparin
Envarsus XR E
Epaned
Epivir

Eplerenone
 Eprosartan
Epzicom E
 Ethacrynic Acid
 Etidronate
Evista E
Evotaz
 Exemestane
Exforge E
Exforge HCT E
Extavia E
 Ezetimibe

F

Fanapt
Foreston
Farxiga
FazaClo
 Felodipine ER
Femara E
 Fenofibrate 43, 50 ,
 67,130, 134, 150,
 200 mg Capsule **E**
 Fenofibrate 40, 48, 120,
 145 mg Tablet **E**
 Fenofibrate 54, 160 mg
 Tablet
 Fenofibric Acid **E**
Fenoglide E
Fibricor E
Flovent Diskus
Flovent HFA
 Fluphenazine
 Fluticasone/Salmeterol
 Resplick
 Fluvastatin
 Fluvastatin ER
 Fondaparinux
Foradil
Fortamet E
Forteo
Fortical
Fosamax
Fosamax Plus D
 Fosinopril
 Fosinopril-
 Hydrochlorothiazide
Fragmin
 Furosemide
Fuzeon

G

Gastrocrom
 Gemfibrozil
 Gengraf
Genvoya
Geodon E
Gilenya
 Glatopa **E**
 Glimepiride
 Glipizide
 Glipizide ER
 Glipizide-Metformin
Glucophage
Glucophage XR
Glucotrol
Glucotrol XL
Glucovance
Glumetza E

Glyburide
 Glyburide Micronized
 Glyburide-Metformin
Glynase
Glyset
Glyxambi E
 Guanfacine

H

Haloperidol
 Heparin
Humalog
Humalog Mix 50/50
Humalog Mix 75/25
Humulin 50/50
Humulin 70/30
Humulin N
Humulin R
 Hydralazine
 Hydrochlorothiazide
Hyzaar

I

Ibandronate
Imuran E
Incruse Ellipta
 Indapamide
Inderal
Inderal LA E
Innopran XL
Inspra
 Insulin Needles/Syringes
Intelligence
Invega E
Invirase
Invokamet
Invokamet XR
Invokana
 Ipratropium
 Ipratropium/Albuterol
 Irbesartan
 Irbesartan -
 Hydrochlorothiazide
Isentress
Isentress HD
Isoptin SR
 Isradipine

J

Jantoven
Janumet
Janumet XR
Januvia
Jardiance
Jentadueto
Jentadueto XR

K

Kaletra
Kazano
Kombiglyze XR

L

Labetalol
 Lamivudine
 Lamivudine-Zidovudine
Lantus E
Lasix
Latuda

Alphabetical Listing – Expanded List

Lescol
Lescol XL E
 Letrozole
Levalbuterol HFA
 Levalbuterol Nebulized Solution **E**
Levatol
Levemir
Lexiva
Lipitor E
Lipofen E
 Lisinopril
 Lisinopril-Hydrochlorothiazide
Livalo E
Lofibra E
Lopid
 Lopinavir-RitanaVir
Lopressor
Lopressor HCT
 Losartan
 Losartan-Hydrochlorothiazide
Lotensin
Lotensin HCT
Lotrel
 Lovastatin
Lovaza E
Lovenox
 Loxapine
Lufyllin

M

Matzim LA
Mavik
Maxzide
 Metaproterenol
 Metformin
 Metformin ER (generic Fortamet) **E**
 Metformin ER (generic Glucophage XR)
 Metformin ER (generic Glumetza) **E**
 Methylclothiazide
 Methyldopa
 Methyldopa-Hydrochlorothiazide
 Metolazone
 Metoprolol 37.5, 75 mg **E**
 Metoprolol Succinate
 Metoprolol Tartrate
 Metoprolol-Hydrochlorothiazide
Mevacor
Miacalcin
Micardis E
Micardis HCT E
Microzide
Midamor
 Miglitol
Minipress
 Minoxidil
 Moexipril
 Moexipril-Hydrochlorothiazide
 Molindone
 Montelukast

Mycophenolate
 Mycophenolic Acid
Myfortic E

N

Nadolol
 Nadolol-Bendroflumethazide
 Nateglinide
Neoral E
Nesina
 Nevirapine
 Nevirapine Extended-Release **E**
 Niacin Extended-Release
Niasor
Niaspan
 Nicardipine
 Nifedipine
 Nifedipine ER
 Nimodipine
 Nisoldipine
Norvasc
Norvir
Novolin 70/30
Novolin N
Novolin R
Novolog
Novolog Mix 70/30

O

Odefsey
 Olanzapine
 Olmesartan
 Olmesartan-Hydrochlorothiazide
 Omega-3 Acid Ethyl Esters
OneTouch Diabetic Meters
OneTouch Diabetic Test Strips
Onglyza
Oseni

P

Paliperidone ER
 Pediatric Flouride Preparations
Perforomist
 Perindopril
 Perphenazine
Persantine
 Pioglitazone
 Pioglitazone-Glimepiride
 Pioglitazone-Metformin
 Pindolol
Plavix E
Plegridy
Pletal
Pradaxa
PrandiMet
Prandin
Pravachol
 Pravastatin
 Prazosin
Precose

Prenatal Vitamins
Prestalia E
 Prevalite
Prezcobix
Prezista
Prinivil
Proair HFA
Proair Respiclick
Procardia
Procardia XL
Prograf E
 Propranolol
 Propranolol-Hydrochlorothiazide
Proventil HFA
Pulmicort
Pulmicort Flexhaler

Q

Qbrelis E
Questran
Questran Light
 Quetiapine
 Quetiapine ER
 Quinapril
 Quinapril-Hydrochlorothiazide
QVAR

R

Raloxifene
 Ramipril
Rapamune E
Rebif
 Repaglinide
 Repaglinide-Metformin
Rescriptor
 Reserpine
Retrovir
Rexulti
Reyataz
Riomet
 Risedronate
Risperdal E
 Risperidone
 Rosuvastatin

S

Sandimmune E
Saphris
Savaysa
Sectral
Seebri NeoHaler
Selzentry
Serevent Diskus
Seroquel E
Seroquel XR E
 Simvastatin
 Simvastatin/Ezetimibe
Singulair E
 Sirolimus
Soliqua
Soltamox E
Spiriva HandiHaler
Spiriva Respimat
 Spironolactone
 Spironolactone-Hydrochlorothiazide

Starlix
 Stavudine
Stiolto Respimat E
Stribild
Striverdi Respimat Sular
Sustiva
Symbicort
SymlinPen
Synjardy
Synjardy XR

T

Tacrolimus
 Tamoxifen
Tanzeum
Tarka
 Taztia XT
Tecfidera
Tekturna
Tekturna HCT
 Telmisartan
 Telmisartan-Amlodipine **E**
 Telmisartan-Hydrochlorothiazide
Tenex
Tenoretic E
Tenormin E
 Terazosin
 Terbutaline
Teveten
Teveten HCT
Thalitone
Theo-24
 Theochron
 Theophylline
 Theophylline/Guaifenesin
 Thioridazine
 Thiothixene
Tiazac
 Ticlopidine
 Timolol*
Tivicay
 Tolbutamide
Toprol XL
 Torsemide
Toujeo E
Tradjenta
Trandate
 Trandolapril
 Trandolapril-Verapamil
Tresiba E
 Triamterene-Hydrochlorothiazide
Tribenzor E
Tricor E
 Trifluoperazine
Triglide E
Trilipix E
Triumeq
Trizivir
Trulicity
Truvada
Tudorza Pressair
Twynsta E
Tymlos

U

Uniretic
Univasc
Utibron NeoHaler E

V

Valsartan
 Valsartan-Hydrochlorothiazide
Vascepa
Vaseretic E
Vasotec E
Ventolin HFA
 Verapamil
 Verapamil ER
Verelan
Verelan PM
Versacloz E
Victoza
Videx
Videx EC
Viracept
Viramune E
Viramune XR E
Viread
Viteka
VoSpire ER
Vraylar
Vytorin E

W

Warfarin
Welchol

X

Xarelto
Xigduo XR E
Xopenex HFA
Xopenex Nebulized Solution E
Xultophy E

Z

Zafirlukast
Zaroxolyn
Zebeta
Zerit
Zestoretic E
Zestril E
Zetia E
Ziac
Ziagen
 Zidovudine
Zinbryta
 Ziprasidone
Zocor
Zontivity
Zortress
Zyflo
Zyflo CR
Zyprexa E

E May be excluded from coverage. *Coverage is provided for oral formulations. **Bold type = Brand name drug** [Plain type = Generic drug]

Listing by Therapeutic Category – Expanded List

Breast Cancer Prevention

Anastrozole
Arimidex E
Aromasin
 Exemestane
Fareston
Femara E
 Letrozole
Soltamox E
 Tamoxifen

Cardiovascular/Heart Disease - Blood Clot/Platelet Therapy

Aggrenox
Arixtra
 Aspirin-Dipyridamole
Brilinta
 Cilostazol
 Clopidogrel
Coumadin
 Dipyridamole
Effient
Eliquis
 Enoxaparin
 Fondaparinux
Fragmin
 Heparin
 Jantoven
Lovenox
Persantine
Plavix E
Pletal
Pradaxa
Savaysa
 Ticlopidine
 Warfarin
Xarelto
Zontivity

Cardiovascular/Heart Disease - High Blood Pressure

Accupril
Accuretic
 Acebutolol
Aceon
Adalat CC
 Afeditab
Aldactazide
Aldactone
Altace
 Amiloride
 Amiloride-Hydrochlorothiazide
 Amlodipine
 Amlodipine-Benazepril
 Amlodipine-Olmesartan **E**
 Amlodipine-Olmesartan-Hydrochlorothiazide **E**
 Amlodipine-Valsartan
 Amlodipine-Valsartan-Hydrochlorothiazide **E**
Amturide E
Atacand
Atacand HCT
 Atenolol
 Atenolol-Chlorthalidone
Avalide
Avapro
Azor E
 Benazepril

Benazepril-Hydrochlorothiazide
Benicar E
Benicar HCT E
 Betaxolol*
Bidil
 Bisoprolol
 Bisoprolol-Hydrochlorothiazide
 Bumetanide
Bystolic
Byvalson E
Calan
Calan SR
 Candesartan
 Candesartan-Hydrochlorothiazide
 Captopril
 Captopril-Hydrochlorothiazide
Cardene SR
Cardizem E
Cardizem CD E
Cardizem LA E
Cardura
 Cartia XT
 Carvedilol
Catapres
Catapres TTS
 Chlorothiazide
 Clonidine
 Clonidine Patch
Clorpress
Coreg
Coreg CR E
Coregard
Corzide
Covera HS
Cozaar
Demadex
Dilacor XR
 Dilt CD
 Dilt XR
 Diltia XT
 Diltiazem
 Diltiazem ER
 Diltzac ER
Diovan E
Diovan HCT E
Diuril
 Doxazosin
Dutoprol E
Dyazide
Dynacirc CR
Dyrenium
Edarbi
Edarbyclor
Edecrin
 Enalapril
 Enalapril-Hydrochlorothiazide
Epaned
 Eplerenone
 Eprosartan
 Ethacrynic Acid
Exforge E
Exforge HCT E
 Felodipine ER
 Fosinopril
 Fosinopril-Hydrochlorothiazide
 Furosemide
 Guanfacine

E May be excluded from coverage. *Coverage is provided for oral formulations. **Bold type = Brand name drug** [Plain type = Generic drug]

Listing by Therapeutic Category – Expanded List

Hydralazine
 Hydrochlorothiazide
Hyzaar
 Indapamide
Inderal
Inderal LA E
Innopran XL
Inspra
 Irbesartan
 Irbesartan - Hydrochlorothiazide
Isoptin SR
 Isradipine
 Labetalol
Lasix
Levator
 Lisinopril
 Lisinopril-Hydrochlorothiazide
Lopressor
Lopressor HCT
 Losartan
 Losartan-Hydrochlorothiazide
Lotensin
Lotensin HCT
Lotrel
 Matzim LA
Mavik
Maxzide
 Methyclothiazide
 Methyldopa
 Methyldopa-Hydrochlorothiazide
 Metolazone
 Metoprolol 37.5, 75 mg **E**
 Metoprolol Succinate
 Metoprolol Tartrate
 Metoprolol-Hydrochlorothiazide
Micardis E
Micardis HCT E
Microzide
Midamor
Minipress
 Minoxidil
 Moexipril
 Moexipril-Hydrochlorothiazide
 Nadolol
 Nadolol-Bendroflumethazide
 Nicardipine
 Nifedipine
 Nifedipine ER
 Nimodipine
 Nisoldipine
Norvasc
 Olmesartan
 Olmesartan-Hydrochlorothiazide
 Perindopril
 Pindolol
 Prazosin
Prestalia E
Prinivil
Procardia
Procardia XL
 Propranolol
 Propranolol-Hydrochlorothiazide
Qbrexas E
 Quinapril
 Quinapril-Hydrochlorothiazide
 Ramipril
 Reserpine
Sectral
 Spironolactone

Spironolactone-Hydrochlorothiazide
Sular
Tarka
 Taztia XT
Tekturna
Tekturna HCT
 Telmisartan
 Telmisartan-Amlodipine **E**
 Telmisartan-Hydrochlorothiazide
Tenex
Tenoretic E
Tenormin E
 Terazosin
Teveten
Teveten HCT
Thalitone
Tiazac
 Timolol*
Toprol XL
 Torsemide
Trandate
 Trandolapril
 Trandolapril-Verapamil
 Triamterene-Hydrochlorothiazide
Tribenzor E
Twynsta E
Uniretic
Univasc
 Valsartan
 Valsartan-Hydrochlorothiazide
Vaseretic E
Vasotec E
 Verapamil
 Verapamil ER
Verelan
Verelan PM
Zaroxolyn
Zebeta
Zestoretic E
Zestril E
Ziac

Cardiovascular/Heart Disease - High Cholesterol

Altoprev E
Antara E
 Atorvastatin
 Cholestyramine
 Cholestyramine Light
 Choline Fenofibrate **E**
Colestid
 Colestipol
Crestor E
 Ezetimibe
 Fenofibrate 43, 50, 67, 130, 134, 150, 200 mg Capsule **E**
 Fenofibrate 40, 48, 120, 145 mg Tablet **E**
 Fenofibrate 54, 160 mg Tablet
 Fenofibric Acid **E**
Fenoglide E
Fibricor E
 Fluvastatin
 Fluvastatin ER
 Gemfibrozil
Lescol
Lescol XL E
Lipitor E
Lipofen E
Livalo E
Lofibra E
Lopid

E May be excluded from coverage. *Coverage is provided for oral formulations. **Bold type = Brand name drug** [Plain type = Generic drug]

Listing by Therapeutic Category – Expanded List

Lovastatin
Lovaza E
Mevacor
 Niacin Extended-Release
Niacor
Niaspan
 Omega-3 Acid Ethyl Esters
Pravachol
 Pravastatin
 Prevalite
Questran
Questran Light
 Rosuvastatin
 Simvastatin
 Simvastatin/Ezetimibe
Tricor E
Triglide E
Trilipix E
Vascepa
Vytorin E
Welchol
Zetia E
Zocor

Central Nervous System - Mental Health

Abilify E
 Aripiprazole
 Chlorpromazine
 Clozapine
Clozaril
Fanapt
FazaClo
 Fluphenazine
Geodon E
 Haloperidol
Invega E
Latuda
 Loxapine
 Molindone
 Olanzapine
 Paliperidone ER
 Perphenazine
 Quetiapine
 Quetiapine ER
Rexulti
Risperdal E
 Risperidone
Saphris
Seroquel E
Seroquel XR E
 Thioridazine
 Thiothixene
 Trifluoperazine
Vraylar
Versacloz E
 Ziprasidone
Zyprexa E

Central Nervous System - Multiple Sclerosis

Aubagio
Avonex
Betaseron
Copaxone
Extavia E
Gilenya
Glatopa E
Rebif
Tecfidera
Zinbryta

Diabetes - Diabetic Supplies

Diabetic Testing - Lancets
 Insulin Needles/Syringes
OneTouch Diabetic Meters
OneTouch Diabetic Test Strips

Diabetes - Insulin

Afrezza E
Apidra
Basaglar
Humalog
Humalog Mix 50/50
Humalog Mix 75/25
Humulin 50/50
Humulin 70/30
Humulin N
Humulin R
Lantus E
Levemir
Novolin 70/30
Novolin N
Novolin R
Novolog
Novolog Mix 70/30
Soliqua
Toujeo E
Tresiba E

Diabetes - Non-Insulin

Acarbose
ACTOplus Met
ACTOplus Met XR
Actos E
Adlyxin
Alogliptin E
Alogliptin-Metformin E
Alogliptin-Pioglitazone E
 Amaryl
Avandia
Bydureon
Byetta
Cycloset
Diabeta
Duetact
Farxiga
Fortamet E
 Glimepiride
 Glipizide
 Glipizide ER
 Glipizide-Metformin
Glucophage
Glucophage XR
Glucotrol
Glucotrol XL
Glucovance
Glumetza E
 Glyburide
 Glyburide Micronized
 Glyburide-Metformin
Glynase
Glyset
Glyxambi E
Invokamet
Invokamet XR
Invokana
Janumet
Janumet XR
Januvia
Jardiance

E May be excluded from coverage. *Coverage is provided for oral formulations. **Bold type = Brand name drug** [Plain type = Generic drug]

Listing by Therapeutic Category – Expanded List

Jentadueto

Jentadueto XR

Kazano

Kombiglyze XR

Metformin

Metformin ER (generic Fortamet) **E**

Metformin ER (generic Glucophage XR)

Metformin ER (generic Glumetza) **E**

Miglitol

Nateglinide

Nesina

Onglyza

Oseni

Pioglitazone

Pioglitazone-Glimepiride

Pioglitazone-Metformin

PrandiMet

Prandin

Precose

Repaglinide

Repaglinide-Metformin

Riomet

Starlix

SymlinPen

Synjardy

Synjardy XR

Tanzeum

Tolbutamide

Trulicity

Tradjenta

Victoza

Xigduo XR E

Xultophy E

HIV

Abacavir

Abacavir-Lamivudine

Abacavir-Lamivudine-Zidovudine

Aptivus

Atripla

Combivir

Complera

Crixivan

Descovy

Didanosine

Edurant

Emtriva

Epivir

Epzicom E

Evotaz

Fuzeon

Genvoya

Intelence

Invirase

Isentress

Isentress HD

Kaletra

Lamivudine

Lamivudine-Zidovudine

Lexiva

Lopinavir-Ritonavir

Nevirapine

Nevirapine Extended-Release **E**

Norvir

Odefsey

Prezcobix

Prezista

Rescriptor

Retrovir

Reyataz

Selzentry

Stavudine

Stribild

Sustiva

Tivicay

Triumeq

Trizivir

Truvada

Videx

Videx EC

Viracept

Viramune E

Viramune XR E

Viread

Viteka

Zerit

Ziagen

Zidovudine

Immunosuppressant - Organ Rejection

Astagraf XL E

Azasan

Azathioprine

Cellcept E

Cyclosporine

Envarsus XR E

Gengraf

Imuran E

Mycophenolate

Mycophenolic Acid

Myfortic E

Neoral E

Prograf E

Rapamune E

Sandimmune E

Sirolimus

Tacrolimus

Zortress

Musculoskeletal - Osteoporosis

Actonel

Alendronate

Atelvia E

Binosto E

Boniva

Calcitonin (salmon)

Didronel

Etidronate

Evista E

Forteo

Fortical

Fosamax

Fosamax Plus D

Ibandronate

Miacalcin

Plegridy

Raloxifene

Risedronate

Tymlos

E May be excluded from coverage. *Coverage is provided for oral formulations. **Bold type = Brand name drug** [Plain type = Generic drug]

Listing by Therapeutic Category – Expanded List

Respiratory - Asthma/COPD

Accolate
Accuneb
Advair Diskus
Advair HFA
Aerospan
AirDuo Respiclick E
 Albuterol Nebulized Solution
 Albuterol Oral Tablet
Alvesco
 Aminophylline
Anoro Ellipta
Arcapta Neohaler
Arnuity Ellipta
Asmanex HFA
Asmanex Twisthaler
Atrovent HFA
Bevespi Aerosphere
Breo Ellipta
Brovana
 Budesonide
Combivent Respimat
 Cromolyn
Daliresp
Dulera E
Duoneb
Elixophyllin
Flovent Diskus
Flovent HFA
 Fluticasone/Salmeterol Respiclick
Foradil
Gastrocrom
Incruse Ellipta
 Ipratropium
 Ipratropium/Albuterol
Levalbuterol HFA
 Levalbuterol Nebulized Solution **E**
Lufyllin
 Metaproterenol

Montelukast
Perforomist
Proair HFA
Proair Respiclick
Proventil HFA
Pulmicort
Pulmicort Flexhaler
QVAR
Seebri NeoHaler
Serevent Diskus
Singulair E
Spiriva HandiHaler
Spiriva Respimat
Stiolto Respimat E
Striverdi Respimat
Symbicort
 Terbutaline
Theo-24
 Theochron
 Theophylline
 Theophylline/Guaifenesin
Tudorza Pressair
Utibron NeoHaler E
Ventolin HFA
VoSpire ER
Xopenex HFA
Xopenex Nebulized Solution E
 Zafirlukast
Zyflo
Zyflo CR

Vitamins

Pediatric Flouride Preparations (for example: Florvite, Poly-Vi-Flor, Tri-Vi-Flor) - Brand Name and Generic Products
 Prenatal Vitamins (for example: Citranatal Assure, Prenate DHA, Stuartnatal) - Brand Name and Generic Products

If you have pharmacy benefit coverage with UnitedHealthcare, you may learn more about your benefit by visiting myuhc.com® or by calling the toll-free member phone number on your ID card. If you are not currently enrolled with UnitedHealthcare for pharmacy benefit coverage, you may access myuhc.com for additional information during your open enrollment period or you may contact your employer or health plan for additional information.

Medications are categorized by common therapeutic conditions in this reference guide for ease of reference only. These categories do not determine coverage for the medication for your condition. Your benefit plan determines how these medications may be covered for you.

Where differences are noted between this reference guide and your benefit plan documents, the benefit plan documents will govern.

E May be excluded from coverage.

*Coverage is provided for oral formulations.

Bold type = Brand name drug [Plain type = Generic drug]

Clinical programs such as Notification/Prior Authorization, Step Therapy and Supply Limits may apply to listed medications based off your benefit plan.

This list is intended as a reference and may not be all-inclusive. Brand or generic availability may not be current due to changes in the market. The list will be updated annually.

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Nondiscrimination notice and access to communication services

UnitedHealthcare® does not discriminate on the basis of race, color, national origin, age, disability, or sex in its health programs or activities.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

Online: UHC_Civil_Rights@uhc.com

Mail: Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, Utah 84130

You must send the complaint within 60 days of your experience. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free phone number listed on your ID card, TTY 711, Monday through Friday, 8 a.m. to 8 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

Online: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>

Phone: Toll free **1-800-368-1019**, 1-800-537-7697 (TDD)

Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue
SW Room 509F, HHH Building
Washington, D.C. 20201

We provide free services to help you communicate with us, including letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your ID card TTY 711, Monday through Friday, 8 a.m. to 8 p.m.



Multi-language interpreter services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (**Chinese**)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(**Korean**)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является **русском (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث العربية (**Arabic**)، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniłmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia l'**italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項：日本語(**Japanese**)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。健康保険証に記載されているフリーダイヤルにお電話ください。

توجه: اگر زبان شما فارسی (**Farsi**) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xovtooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ភាសាខ្មែរ (Khmer)**សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

Díí BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániit'igo, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i. T'áá shqoqdí ninaaltsoos nit'i'izí bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'í bik'ágíí bee hodíílnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.