

2021 Preventive Medication List for Consumer Driven Health Plans Core Plus List

This is a list of **Preventive Medications** that may be covered under your plan. If your plan covers these Preventive Medications, your insurance benefit is applied before you meet your deductible.

Some medications may have other requirements or limits depending on your benefit plan and are noted below. To find out if a drug is covered, please check your plan benefits on the health plan's member website. Or, call the toll-free phone number on your health plan ID card. This list may not be all-inclusive. Brand and generic drugs may not always be available due to market changes.

This list applies to UnitedHealthcare and Oxford medical plans. It is correct as of August 1, 2020 and is subject to change after this date. The next anticipated update will occur with the next PDL cycle.

CDH preventive drug lists may also be used with non-CDH plans

Effective January 1, 2021

Therapeutic Drug Classes	Requirements & Limits
Breast Cancer Prevention	
Anastrozole	
Arimidex	E
Aromasin	
Exemestane	
Fareston	
Femara	E
Letrozole	
Soltamox	E
Tamoxifen	
Toremifene	

Therapeutic Drug Classes	Requirements & Limits
Cardiovascular/Heart Disease: Blood Clot/Platelet Therapy	
Aggrenox	
Arixtra	
Aspirin-Dipyridamole	
Bevyxxa	
Brilinta	
Cilostazol	
Clopidogrel	
Coumadin	
Dipyridamole	
Effient	E
Eliquis	

Bold type = Brand-name drug

[Plain type = Generic drug]

E = May be excluded from coverage or subject to prior authorization (sometimes referred to as precertification)

¹Coverage is provided for oral formulations

Therapeutic Drug Classes	Requirements & Limits	Therapeutic Drug Classes	Requirements & Limits
Enoxaparin		Amlodipine-Valsartan	
Fragmin		Amlodipine-Valsartan-Hydrochlorothiazide	E
Fondaparinux		Amturnide	E
Heparin		Atacand	
Jantoven		Atacand HCT	
Lovenox	E	Atenolol	
Persantine		Atenolol-Chlorthalidone	
Plavix	E	Avalide	
Pletal		Avapro	
Pradaxa		Azor	E
Prasugrel		Benazepril	
Savaysa		Benazepril-Hydrochlorothiazide	
Ticlopidine		Benicar	E
Warfarin		Benicar HCT	E
Xarelto		Betaxolol ¹	
Zontivity		Bidil	
Cardiovascular/Heart Disease: High Blood Pressure		Bisoprolol	
Accupril		Bisoprolol-Hydrochlorothiazide	
Accuretic		Bumetanide	
Acebutolol		Bystolic	E
Aceon		Byvalson	
Adalat CC		Calan	
Afeditab		Calan SR	
Aldactazide		Candesartan	
Aldactone		Candesartan-Hydrochlorothiazide	
Aliskiren		Captopril	
Altace		Captopril-Hydrochlorothiazide	
Amiloride		Cardene SR	
Amiloride-Hydrochlorothiazide		Cardizem	E
Amlodipine		Cardizem CD	E
Amlodipine-Benazepril		Cardizem LA	E
Amlodipine-Olmesartan	E	Cardura	
Amlodipine-Olmesartan-Hydrochlorothiazide	E	Carospir	
		Cartia XT	

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Therapeutic Drug Classes	Requirements & Limits	Therapeutic Drug Classes	Requirements & Limits
Carvedilol		Epaned	
Carvedilol ER	E	Eplerenone	
Catapres		Eprosartan	
Catapres TTS		Ethacrynic Acid	
Chlorothiazide		Exforge	E
Clonidine		Exforge HCT	E
Clonidine Patch		Felodipine ER	
Clorpress		Fosinopril	
Coreg		Fosinopril-Hydrochlorothiazide	
Coreg CR	E	Furosemide	
Corgard		Guanfacine	
Corzide		Hydralazine	
Covera HS		Hydrochlorothiazide	
Cozaar		Hyzaar	
Demadex		Indapamide	
Dilacor XR		Inderal	
Dilt CD		Inderal LA	E
Dilt XR		Inderal XL	E
Diltia XT		Innopran XL	E
Diltiazem		Inspra	
Diltiazem ER		Irbesartan	
Diltzac ER		Irbesartan-Hydrochlorothiazide	
Diovan	E	Isoptin SR	
Diovan HCT	E	Isradipine	
Diuril		Kaspargo	
Doxazosin		Katerzia	
Dutoprol	E	Labetalol	
Dyazide		Lasix	
Dynacirc CR		Levatol	
Dyrenium		Lisinopril	
Edarbi		Lisinopril-Hydrochlorothiazide	
Edarbyclor		Lopressor	
Edecrin		Lopressor HCT	
Enalapril		Losartan	
Enalapril-Hydrochlorothiazide		Losartan-Hydrochlorothiazide	

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Therapeutic Drug Classes	Requirements & Limits	Therapeutic Drug Classes	Requirements & Limits
Lotensin		Prestalia	E
Lotensin HCT		Prinivil	
Lotrel		Procardia	
Matzim LA		Procardia XL	
Mavik		Propranolol	
Maxzide		Propranolol-Hydrochlorothiazide	
Methyclothiazide		Qbrelis	
Methyldopa		Quinapril	
Methyldopa-Hydrochlorothiazide		Quinapril-Hydrochlorothiazide	
Metolazone		Ramipril	
Metoprolol 37.5, 75 mg	E	Reserpine	
Metoprolol-Hydrochlorothiazide		Sectral	
Metoprolol Succinate		Spirolactone	
Metoprolol Tartrate		Spirolactone-Hydrochlorothiazide	
Micardis	E	Sular	
Micardis HCT	E	Tarka	
Microzide		Taztia XT	
Midamor		Tekturna	
Minipress		Tekturna HCT	
Minoxidil		Telmisartan	
Moexipril		Telmisartan-Amlodipine	E
Moexipril-Hydrochlorothiazide		Telmisartan-Hydrochlorothiazide	
Nadolol		Tenex	
Nadolol-Bendroflumethazide		Tenoretic	E
Nicardipine		Tenormin	E
Nifedipine		Terazosin	
Nifedipine ER		Teveten	
Nimodipine		Teveten HCT	
Nisoldipine		Thalitone	
Norvasc	E	Tiazac	
Olmesartan		Timolol ¹	
Olmesartan-Hydrochlorothiazide		Toprol XL	
Perindopril		Torsemide	
Pindolol		Trandate	
Prazosin		Trandolapril	

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Therapeutic Drug Classes	Requirements & Limits
Trandolapril-Verapamil	
Triamterene	
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
Colesevelam Tablets, Powder for Suspension	E
Colestid	
Colestipol	
Crestor	E
Ezallor Sprinkle	
Ezetimibe	

Therapeutic Drug Classes	Requirements & Limits
Fenofibrate 43, 50, 67, 130, 134, 150, 200 mg Capsule	E
Fenofibrate 40, 48, 120 mg Tablet	E
Fenofibrate 54, 145, 160 mg Tablet	
Fenofibric Acid	E
Fenoglide	E
Fibracor	E
Flolipid	
Fluvastatin	
Fluvastatin ER	
Gemfibrozil	
Lescol	
Lescol XL	E
Lipitor	E
Lipofen	E
Livalo	E
Lofibra	E
Lopid	
Lovastatin	
Lovaza	E
Mevacor	
Nexleto	
Nexlizet	
Niacin Extended-Release	
Niacor	
Niaspan	
Omega-3 Acid Ethyl Esters	
Pravachol	
Pravastatin	
Prevalite	
Questran	
Questran Light	
Rosuvastatin	
Simvastatin	

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Therapeutic Drug Classes	Requirements & Limits
Simvastatin-Ezetimibe	
Tricor	E
Triglide	E
Trilipix	E
Vascepa	
Vytorin	E
Welchol	
Zetia	E
Zocor	
Zypitamag	E
Depression: Selective Serotonin Reuptake Inhibitors (SSRIs)¹	
Celexa	E
Citalopram	
Escitalopram	
Fluoxetine Capsules	
Fluoxetine 10 mg, 20 mg Tablets	
Fluoxetine 60 mg Tablets	E
Fluvoxamine	
Fluvoxamine Extended-Release	
Lexapro	E
Paroxetine	
Paroxetine Extended-Release	
Paxil	
Paxil CR	
Pexeva	E
Prozac	E
Sertraline	
Zoloft	E
Diabetes: Diabetic Supplies	
Accu-Chek Guide Meters	
Accu-Chek Guide Test Strips	
Contour Next EZ Meters	
Contour Next Meters	
Contour Next One Meters	

Therapeutic Drug Classes	Requirements & Limits
Contour Next Test Strips	
Diabetic Testing - Lancets	
Insulin Needles/Syringes	
OneTouch Diabetic Meters	
OneTouch Diabetic Test Strips	
Diabetes: Insulin	
Admelog, Admelog SoloStar	E
Afrezza	E
Apidra, Apidra SoloStar	E
Basaglar	E
Fiasp, Fiasp FlexTouch	E
Humalog	
Humalog Junior	
Humalog Mix 50/50	
Humalog Mix 75/25	
Humulin 50/50	
Humulin 70/30	
Humulin N	
Humulin R	
Insulin Aspart	E
Insulin Aspart Protamine/Insulin Aspart	E
Insulin Lispro	E
Insulin Lispro Jr.	E
Insulin Lispro Protamine/Insulin Lispro 75/25	E
Lantus	
Levemir	E
Lyumjev	E
Novolin 70/30	E
Novolin N	E
Novolin R	E
Novolog, Novolog FlexPen	E
Novolog Mix 70/30	E
Soliqua	
Toujeo	

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Therapeutic Drug Classes	Requirements & Limits
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	
Bydureon BCise	
Byetta	
Cycloset	
Diabeta	
Duetact	
Farxiga	E
Fortamet	E
Glimepiride	
Glipizide	
Glipizide ER	
Glipizide-Metformin	
Glucophage	
Glucophage XR	
Glucotrol	
Glucotrol XL	
Glucovance	
Glumetza	E
Glyburide	
Glyburide Micronized	
Glyburide-Metformin	
Glynase	

Therapeutic Drug Classes	Requirements & Limits
Glyset	
Glyxambi	
Invokamet	E
Invokamet XR	E
Invokana	E
Janumet	E
Janumet XR	E
Januvia	E
Jardiance	
Jentadueto	
Jentadueto XR	
Kazano	
Kombiglyze XR	
Metformin	
Metformin ER (generic Fortamet)	E
Metformin ER (generic Glucophage XR)	
Metformin ER (generic Glumetza)	E
Metformin Solution (generic Riomet)	
Miglitol	
Nateglinide	
Nesina	
Onglyza	
Oseni	
Ozempic	
Pioglitazone	
Pioglitazone-Glimepiride	
Pioglitazone-Metformin	
PrandiMet	
Prandin	
Precose	
Qtern	E
Repaglinide	
Repaglinide-Metformin	
Riomet	

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Therapeutic Drug Classes	Requirements & Limits
Riomet ER	
Rybelsus	
Segluromet	E
Starlix	
Steglatro	E
Steglujan	E
SymlinPen	
Synjardy	
Synjardy XR	
Tolbutamide	
Tradjenta	
Trijardy XR	
Trulicity	
Victoza	
Xigduo XR	E
Xultophy	E
Immunosuppressant: Organ Rejection	
Astagraf XL	E
Azasan	
Azathioprine	
Cellcept	E
Cyclosporine	
Envarsus XR	E
Everolimus	
Gengraf	
Imuran	E
Mycophenolate	
Mycophenolic Acid	
Myfortic	E
Neoral	E
Prograf	
Rapamune	E
Sandimmune	E
Sirolimus	

Therapeutic Drug Classes	Requirements & Limits
Tacrolimus	
Zortress	
Musculoskeletal: Osteoporosis	
Actonel	
Alendronate	
Atelvia	E
Binosto	E
Boniva	
Calcitonin (Salmon)	
Didronel	
Etidronate	
Evista	E
Forteo	E
Fortical	
Ibandronate	
Miacalcin	
Raloxifene	
Risedronate	
Teriparatide	
Tymlos	
Respiratory: Asthma/COPD	
Accolate	
Accuneb	
Advair Diskus	
Advair HFA	
Albuterol HFA (generic ProAir HFA, Proventil HFA)	
Albuterol HFA (Ventolin HFA authorized generic)	E
AirDuo RespiClick	E
Albuterol Nebulized Solution	
Albuterol Oral Tablet	
Alvesco	E
Aminophylline	
Anoro Ellipta	

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Therapeutic Drug Classes	Requirements & Limits
ArmonAir RespiClick	E
Arnuity Ellipta	
Asmanex HFA	E
Asmanex Twisthaler	E
Atrovent HFA	
Bevespi Aerosphere	
Breo Ellipta	
Brovana	
Budesonide/Formoterol (Symbicort Authorized Generic)	E
Budesonide Nebulized Solution	
Combivent Respimat	
Cromolyn	
Daliresp	
Duaklir Pressair	E
Dulera	E
Duoneb	
Elixophyllin	
Flovent Diskus	
Flovent HFA	
Fluticasone/Salmeterol Diskus	E
Fluticasone/Salmeterol RespiClick	
Foradil	
Gastrocrom	
Incruse Ellipta	E
Ipratropium	
Ipratropium/Albuterol	
Levalbuterol HFA	
Levalbuterol Nebulized Solution	
Lonhala Magnair	E
Lufyllin	
Metaproterenol	
Montelukast	
Perforomist	

Therapeutic Drug Classes	Requirements & Limits
ProAir Digihaler	E
Proair HFA	
Proair RespiClick	
Proventil HFA	
Pulmicort Flexhaler	
Pulmicort Nebulized Solution	E
QVAR Redihaler	E
Serevent Diskus	
Singulair	E
Spiriva HandiHaler	
Spiriva Respimat	
Stiolto Respimat	E
Striverdi Respimat	
Symbicort	
Terbutaline	
Theo-24	
Theophylline	
Theophylline/Guaifenesin	
Trelegy Ellipta	
Tudorza Pressair	E
Ventolin HFA	
VoSpire ER	
Xopenex HFA	
Xopenex Nebulized Solution	E
Yupelri	
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	

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

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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., or at the times listed in your health plan documents.

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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。

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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.

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UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy 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.

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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。

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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 yánit'i'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shqódí ninaaltsoos nit'izíí bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'í bik'á'ígíí 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.

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If you are not currently enrolled with UnitedHealthcare or Oxford for pharmacy benefit coverage, you may access your health plan's member website 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.

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