

# 2025 Preventive Medication list for consumer-driven health plans (CDH)

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.

This list has most of the medications in each therapeutic class. Some of them may not be covered by your plan. To find out if a drug is covered or if utilization management programs, such as prior authorization and/or step therapy (referred to as First Start in New Jersey) programs apply, please check your health plan's member website or call the toll-free phone number on your member ID card. This may not be a full list. Brand and generic drugs may not always be available due to market changes.

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

**Effective September 1, 2025**

| Therapeutic Drug Classes        |
|---------------------------------|
| <b>Breast Cancer Prevention</b> |
| Anastrozole                     |
| <b>Arimidex</b>                 |
| <b>Aromasin</b>                 |
| Exemestane                      |
| <b>Fareston</b>                 |
| <b>Femara</b>                   |
| Letrozole                       |
| <b>Soltamox</b>                 |
| Tamoxifen                       |
| Toremifene                      |

| Therapeutic Drug Classes                                         |
|------------------------------------------------------------------|
| <b>Cardiovascular/Heart Disease: Blood Clot/Platelet Therapy</b> |
| <b>Arixtra</b>                                                   |
| Aspirin-Dipyridamole                                             |
| <b>Brilinta</b>                                                  |
| Cilostazol                                                       |
| Clopidogrel                                                      |
| <b>Coumadin</b>                                                  |
| Dabigatran                                                       |
| Dipyridamole                                                     |
| <b>Effient</b>                                                   |

**Bold type = Brand-name drug**

[Plain type = Generic drug]

<sup>1</sup>Coverage is provided for oral formulations.

<sup>2</sup>SSRIs are included only for employer groups who have specifically requested coverage.

| Therapeutic Drug Classes                                 |  |
|----------------------------------------------------------|--|
| <b>Eliquis</b>                                           |  |
| Enoxaparin                                               |  |
| Fondaparinux                                             |  |
| <b>Fragmin</b>                                           |  |
| Heparin                                                  |  |
| Jantoven                                                 |  |
| <b>Lovenox</b>                                           |  |
| <b>Plavix</b>                                            |  |
| <b>Pradaxa</b>                                           |  |
| <b>Pradaxa Pak</b>                                       |  |
| Prasugrel                                                |  |
| <b>Savaysa</b>                                           |  |
| Ticlopidine                                              |  |
| Warfarin                                                 |  |
| <b>Xarelto</b>                                           |  |
| <b>Zontivity</b>                                         |  |
| <b>Cardiovascular/Heart Disease: High Blood Pressure</b> |  |
| <b>Accupril</b>                                          |  |
| <b>Accuretic</b>                                         |  |
| Acebutolol                                               |  |
| <b>Aldactazide</b>                                       |  |
| <b>Aldactone</b>                                         |  |
| Aliskiren                                                |  |
| <b>Altace</b>                                            |  |
| Amiloride                                                |  |
| Amiloride-Hydrochlorothiazide                            |  |
| Amlodipine                                               |  |
| Amlodipine-Benazepril                                    |  |
| Amlodipine-Olmesartan                                    |  |
| Amlodipine-Olmesartan-Hydrochlorothiazide                |  |
| Amlodipine-Valsartan                                     |  |
| Amlodipine-Valsartan-Hydrochlorothiazide                 |  |
| <b>Atacand</b>                                           |  |

| Therapeutic Drug Classes        |  |
|---------------------------------|--|
| <b>Atacand HCT</b>              |  |
| Atenolol                        |  |
| Atenolol-Chlorthalidone         |  |
| <b>Avalide</b>                  |  |
| <b>Avapro</b>                   |  |
| <b>Azor</b>                     |  |
| Benazepril                      |  |
| Benazepril-Hydrochlorothiazide  |  |
| <b>Benicar</b>                  |  |
| <b>Benicar HCT</b>              |  |
| Betaxolol <sup>1</sup>          |  |
| <b>Bidil</b>                    |  |
| Bisoprolol                      |  |
| Bisoprolol-Hydrochlorothiazide  |  |
| Bumetanide                      |  |
| <b>Bystolic</b>                 |  |
| Candesartan                     |  |
| Candesartan-Hydrochlorothiazide |  |
| Captopril                       |  |
| Captopril-Hydrochlorothiazide   |  |
| <b>Cardizem</b>                 |  |
| <b>Cardizem CD</b>              |  |
| <b>Cardizem LA</b>              |  |
| <b>Cardura</b>                  |  |
| <b>Carospir</b>                 |  |
| Cartia XT                       |  |
| Carvedilol                      |  |
| Carvedilol ER                   |  |
| <b>Catapres TTS</b>             |  |
| Chlorothiazide                  |  |
| Clonidine                       |  |
| <b>Clonidine ER</b>             |  |
| Clonidine Patch                 |  |

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| Therapeutic Drug Classes       |  |
|--------------------------------|--|
| <b>Conjupri</b>                |  |
| <b>Coreg</b>                   |  |
| <b>Coreg CR</b>                |  |
| <b>Cozaar</b>                  |  |
| Dilt XR                        |  |
| Diltiazem                      |  |
| Diltiazem ER                   |  |
| <b>Diovan</b>                  |  |
| <b>Diovan HCT</b>              |  |
| <b>Diuril</b>                  |  |
| Doxazosin                      |  |
| <b>Dyrenium</b>                |  |
| <b>Edarbi</b>                  |  |
| <b>Edarbyclor</b>              |  |
| <b>Edecrin</b>                 |  |
| Enalapril                      |  |
| Enalapril-Hydrochlorothiazide  |  |
| <b>Epaned</b>                  |  |
| Eplerenone                     |  |
| Eprosartan                     |  |
| Ethacrynic Acid                |  |
| <b>Exforge</b>                 |  |
| <b>Exforge HCT</b>             |  |
| Felodipine ER                  |  |
| Fosinopril                     |  |
| Fosinopril-Hydrochlorothiazide |  |
| Furosemide                     |  |
| Guanfacine                     |  |
| Hydralazine                    |  |
| Hydrochlorothiazide            |  |
| <b>Hyzaar</b>                  |  |
| Indapamide                     |  |
| <b>Inderal LA</b>              |  |

| Therapeutic Drug Classes         |  |
|----------------------------------|--|
| <b>Inderal XL</b>                |  |
| <b>Innopran XL</b>               |  |
| <b>Inspira</b>                   |  |
| Irbesartan                       |  |
| Irbesartan - Hydrochlorothiazide |  |
| Isradipine                       |  |
| <b>Kapspargo</b>                 |  |
| <b>Katerzia</b>                  |  |
| Labetalol                        |  |
| <b>Lasix</b>                     |  |
| <b>Levamlodipine</b>             |  |
| Lisinopril                       |  |
| Lisinopril-Hydrochlorothiazide   |  |
| <b>Lopressor</b>                 |  |
| Losartan                         |  |
| Losartan-Hydrochlorothiazide     |  |
| <b>Lotensin</b>                  |  |
| <b>Lotensin HCT</b>              |  |
| <b>Lotrel</b>                    |  |
| Matzim LA                        |  |
| Methyldopa                       |  |
| Methyldopa-Hydrochlorothiazide   |  |
| Metolazone                       |  |
| Metoprolol 375, 75 mg            |  |
| Metoprolol Succinate             |  |
| Metoprolol Tartrate              |  |
| Metoprolol-Hydrochlorothiazide   |  |
| <b>Micardis</b>                  |  |
| <b>Micardis HCT</b>              |  |
| Minoxidil                        |  |
| Moexipril                        |  |
| Moexipril-Hydrochlorothiazide    |  |
| Nadolol                          |  |

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| Therapeutic Drug Classes           |  |
|------------------------------------|--|
| Nadolol-Bendroflumethazide         |  |
| Nebivolol                          |  |
| <b>Nexiclon XR</b>                 |  |
| Nicardipine                        |  |
| Nifedipine                         |  |
| Nifedipine ER                      |  |
| Nimodipine                         |  |
| Nisoldipine                        |  |
| <b>Norliqva</b>                    |  |
| <b>Norvasc</b>                     |  |
| Olmesartan                         |  |
| Olmesartan-Hydrochlorothiazide     |  |
| Perindopril                        |  |
| Pindolol                           |  |
| Prazosin                           |  |
| <b>Prestalia</b>                   |  |
| <b>Procardia XL</b>                |  |
| Propranolol                        |  |
| Propranolol-Hydrochlorothiazide    |  |
| <b>Qbrelis</b>                     |  |
| Quinapril                          |  |
| Quinapril-Hydrochlorothiazide      |  |
| Ramipril                           |  |
| Reserpine                          |  |
| <b>Soaanz</b>                      |  |
| Spironolactone                     |  |
| Spironolactone Suspension          |  |
| Spironolactone-Hydrochlorothiazide |  |
| <b>Sular</b>                       |  |
| Taztia XT                          |  |
| <b>Tekturna</b>                    |  |
| Telmisartan                        |  |
| Telmisartan-Amlodipine             |  |

| Therapeutic Drug Classes                              |  |
|-------------------------------------------------------|--|
| Telmisartan-Hydrochlorothiazide                       |  |
| <b>Tenoretic</b>                                      |  |
| <b>Tenormin</b>                                       |  |
| Terazosin                                             |  |
| <b>Thalitone</b>                                      |  |
| <b>Tiazac</b>                                         |  |
| Timolol <sup>1</sup>                                  |  |
| <b>Toprol XL</b>                                      |  |
| Torsemide                                             |  |
| Trandolapril                                          |  |
| Trandolapril-Verapamil                                |  |
| Triamterene                                           |  |
| Triamterene-Hydrochlorothiazide                       |  |
| <b>Tribenzor</b>                                      |  |
| <b>Tryvio</b>                                         |  |
| Valsartan                                             |  |
| Valsartan-Hydrochlorothiazide                         |  |
| <b>Valsartan Solution</b>                             |  |
| <b>Vaseretic</b>                                      |  |
| <b>Vasotec</b>                                        |  |
| Verapamil                                             |  |
| Verapamil ER                                          |  |
| Verelan                                               |  |
| <b>Verelan PM</b>                                     |  |
| <b>Zestoretic</b>                                     |  |
| <b>Zestril</b>                                        |  |
| <b>Cardiovascular/Heart Disease: High Cholesterol</b> |  |
| <b>Altoprev</b>                                       |  |
| <b>Atorvaliq Suspension</b>                           |  |
| Atorvastatin                                          |  |
| Cholestyramine                                        |  |
| Cholestyramine Light                                  |  |
| Choline Fenofibrate                                   |  |

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| Therapeutic Drug Classes                   |
|--------------------------------------------|
| Colesevelam Tablets, Powder for Suspension |
| <b>Colestid</b>                            |
| Colestipol                                 |
| <b>Crestor</b>                             |
| <b>Ezallor Sprinkle</b>                    |
| Ezetimibe                                  |
| <b>Ezetimibe/Rosuvastatin</b>              |
| Fenofibrate Capsule                        |
| Fenofibrate Tablet                         |
| Fenofibric Acid                            |
| <b>Fenoglide</b>                           |
| <b>Fibracor</b>                            |
| <b>Flolipid</b>                            |
| Fluvastatin                                |
| Fluvastatin ER                             |
| Gemfibrozil                                |
| Icosapent                                  |
| <b>Lescol XL</b>                           |
| <b>Lipitor</b>                             |
| <b>Lipofen</b>                             |
| <b>Livalo</b>                              |
| <b>Lopid</b>                               |
| Lovastatin                                 |
| <b>Lovaza</b>                              |
| <b>Nexletol</b>                            |
| <b>Nexlizet</b>                            |
| Niacin Extended-Release                    |
| <b>Niacor</b>                              |
| Omega-3 Acid Ethyl Esters                  |
| Pitavastatin                               |
| Pravastatin                                |
| Prevalite                                  |
| <b>Questran</b>                            |

| Therapeutic Drug Classes                     |
|----------------------------------------------|
| <b>Questran Light</b>                        |
| Rosuvastatin                                 |
| Simvastatin                                  |
| Simvastatin/Ezetimibe                        |
| <b>Tricor</b>                                |
| <b>Trilipix</b>                              |
| <b>Vascepa</b>                               |
| <b>Vytorin</b>                               |
| <b>Welchol</b>                               |
| <b>Zetia</b>                                 |
| <b>Zocor</b>                                 |
| <b>Zypitamag</b>                             |
| <b>Central Nervous System: Mental Health</b> |
| <b>Abilify</b>                               |
| <b>Abilify Mycite</b>                        |
| Aripiprazole                                 |
| Asenapine                                    |
| <b>Caplyta</b>                               |
| Chlorpromazine                               |
| Clozapine                                    |
| <b>Clozaril</b>                              |
| <b>Cobenfy</b>                               |
| <b>Fanapt</b>                                |
| Fluphenazine                                 |
| <b>Geodon</b>                                |
| Haloperidol                                  |
| <b>Invega</b>                                |
| <b>Latuda</b>                                |
| Loxapine                                     |
| Lurasidone                                   |
| <b>Lybalvi</b>                               |
| Molindone                                    |
| Olanzapine                                   |

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| Therapeutic Drug Classes                          |
|---------------------------------------------------|
| <b>Opipza</b>                                     |
| Paliperidone ER                                   |
| Perphenazine                                      |
| Quetiapine                                        |
| Quetiapine ER                                     |
| <b>Rexulti</b>                                    |
| <b>Risperdal</b>                                  |
| Risperidone                                       |
| <b>Saphris</b>                                    |
| <b>Secuado</b>                                    |
| <b>Seroquel</b>                                   |
| <b>Seroquel XR</b>                                |
| Thioridazine                                      |
| Thiothixene                                       |
| Trifluoperazine                                   |
| <b>Vraylar</b>                                    |
| <b>Versacloz</b>                                  |
| Ziprasidone                                       |
| Zyprexa                                           |
| <b>Central Nervous System: Multiple Sclerosis</b> |
| <b>Aubagio</b>                                    |
| <b>Avonex</b>                                     |
| <b>Bafiertam</b>                                  |
| <b>Betaseron</b>                                  |
| Copaxone                                          |
| Dimethyl Fumarate                                 |
| Extavia                                           |
| Fingolimod                                        |
| <b>Gilenya</b>                                    |
| Glatiramer Acetate                                |
| Glatopa                                           |
| <b>Kesimpta</b>                                   |
| <b>Mavenclad</b>                                  |

| Therapeutic Drug Classes                                                       |
|--------------------------------------------------------------------------------|
| <b>Mayzent</b>                                                                 |
| <b>Plegridy</b>                                                                |
| <b>Ponvory</b>                                                                 |
| <b>Rebif</b>                                                                   |
| <b>Tascenso ODT</b>                                                            |
| <b>Tecfidera</b>                                                               |
| Teriflunomide                                                                  |
| <b>Vumerity</b>                                                                |
| <b>Zeposia</b>                                                                 |
| <b>Depression: Selective Serotonin Reuptake Inhibitors (SSRIs)<sup>2</sup></b> |
| <b>Celexa</b>                                                                  |
| <b>Citalopram Capsules</b>                                                     |
| Citalopram Tablets                                                             |
| Escitalopram                                                                   |
| Fluoxetine                                                                     |
| Fluvoxamine                                                                    |
| Fluvoxamine Extended-Release                                                   |
| <b>Lexapro</b>                                                                 |
| Paroxetine                                                                     |
| Paroxetine Extended-Release                                                    |
| <b>Paxil</b>                                                                   |
| <b>Paxil CR</b>                                                                |
| <b>Prozac</b>                                                                  |
| <b>Sertraline Capsules</b>                                                     |
| Sertraline Tablets                                                             |
| <b>Zoloft</b>                                                                  |
| <b>Diabetes: Diabetic Supplies</b>                                             |
| <b>Accu-Chek Guide Meters</b>                                                  |
| <b>Accu-Chek Guide Test Strips</b>                                             |
| Continuous Glucose Monitors                                                    |
| <b>Contour Next EZ Meters</b>                                                  |
| <b>Contour Next Meters</b>                                                     |

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[Plain type = Generic drug]

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| Therapeutic Drug Classes                             |
|------------------------------------------------------|
| <b>Contour Next One Meters</b>                       |
| <b>Contour Next Test Strips</b>                      |
| Diabetic Testing - Lancets                           |
| Insulin Needles/Syringes                             |
| <b>Omnipod 5 (Gen 5), Kits &amp; Pods</b>            |
| <b>OneTouch Ultra Test Strips</b>                    |
| <b>OneTouch Verio Meter</b>                          |
| <b>OneTouch Verio Test Strips</b>                    |
| <b>Diabetes: Insulin</b>                             |
| <b>Admelog, Admelog SoloStar</b>                     |
| <b>Afrezza</b>                                       |
| <b>Apidra, Apidra SoloStar</b>                       |
| <b>Basaglar</b>                                      |
| <b>Basaglar Tempo</b>                                |
| <b>Fiasp, Fiasp FlexTouch</b>                        |
| <b>Fiasp Pumpcart</b>                                |
| <b>Humalog</b>                                       |
| <b>Humalog Junior</b>                                |
| <b>Humalog Mix 50/50</b>                             |
| <b>Humalog Mix 75/25</b>                             |
| <b>Humalog Tempo</b>                                 |
| <b>Humulin 50/50</b>                                 |
| <b>Humulin 70/30</b>                                 |
| <b>Humulin N</b>                                     |
| <b>Humulin R</b>                                     |
| <b>Insulin Aspart</b>                                |
| <b>Insulin Aspart Protamine/Insulin Aspart</b>       |
| <b>Insulin Degludec, Insulin Degludec FlexTouch</b>  |
| <b>Insulin Glargine</b>                              |
| <b>Insulin Lispro</b>                                |
| <b>Insulin Lispro Jr.</b>                            |
| <b>Insulin Lispro Protamine/Insulin Lispro 75/25</b> |
| <b>Lantus</b>                                        |

| Therapeutic Drug Classes       |
|--------------------------------|
| <b>Levemir</b>                 |
| <b>Lyumjev</b>                 |
| <b>Lyumjev Tempo</b>           |
| <b>Novolin 70/30</b>           |
| <b>Novolin N</b>               |
| <b>Novolin R</b>               |
| <b>Novolog</b>                 |
| <b>Novolog Mix 70/30</b>       |
| <b>Rezvoglar</b>               |
| <b>Semglee</b>                 |
| <b>Soliqua</b>                 |
| <b>Toujeo</b>                  |
| <b>Tresiba</b>                 |
| <b>Diabetes: Non-Insulin</b>   |
| Acarbose                       |
| <b>ACTOplus Met</b>            |
| <b>Actos</b>                   |
| <b>Alogliptin</b>              |
| <b>Alogliptin-Metformin</b>    |
| <b>Alogliptin-Pioglitazone</b> |
| <b>Amaryl</b>                  |
| <b>Bexagliflozin</b>           |
| <b>Brenzavvy</b>               |
| <b>Bydureon BCise</b>          |
| <b>Byetta</b>                  |
| <b>Cycloset</b>                |
| <b>Dapagliflozin</b>           |
| <b>Dapagliflozin/Metformin</b> |
| <b>Duetact</b>                 |
| <b>Farxiga</b>                 |
| Glimepiride                    |
| Glipizide                      |
| Glipizide ER                   |

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| Therapeutic Drug Classes |
|--------------------------|
| Glipizide-Metformin      |
| <b>Glucophage XR</b>     |
| <b>Glucotrol XL</b>      |
| <b>Glumetza</b>          |
| Glyburide                |
| Glyburide Micronized     |
| Glyburide-Metformin      |
| <b>Glyxambi</b>          |
| <b>Invokamet</b>         |
| <b>Invokamet XR</b>      |
| <b>Invokana</b>          |
| <b>Janumet</b>           |
| <b>Janumet XR</b>        |
| <b>Januvia</b>           |
| <b>Jardiance</b>         |
| <b>Jentadueto</b>        |
| <b>Jentadueto XR</b>     |
| <b>Kombiglyze XR</b>     |
| Liraglutide              |
| Metformin                |
| Metformin ER             |
| Metformin Solution       |
| Miglitol                 |
| <b>Mounjaro</b>          |
| Nateglinide              |
| <b>Onglyza</b>           |
| <b>Ozempic</b>           |
| Pioglitazone             |
| Pioglitazone-Glimepiride |
| Pioglitazone-Metformin   |
| <b>Qtern</b>             |
| Repaglinide              |
| Repaglinide-Metformin    |

| Therapeutic Drug Classes       |
|--------------------------------|
| <b>Riomet</b>                  |
| <b>Rybelsus</b>                |
| Saxagliptin                    |
| Saxagliptin-Metformin          |
| <b>Segluromet</b>              |
| <b>Sitagliptin/Metformin</b>   |
| <b>Steglatro</b>               |
| <b>Steglujan</b>               |
| <b>SymlinPen</b>               |
| <b>Synjardy</b>                |
| <b>Synjardy XR</b>             |
| Tolbutamide                    |
| <b>Tradjenta</b>               |
| <b>Trijardy XR</b>             |
| <b>Trulicity</b>               |
| <b>Victoza</b>                 |
| <b>Xigduo XR</b>               |
| <b>Xultophy</b>                |
| <b>Zituvio</b>                 |
| <b>Zituvimet</b>               |
| <b>Zituvimet XR</b>            |
| <b>HIV</b>                     |
| Abacavir                       |
| Abacavir-Lamivudine            |
| Abacavir-Lamivudine-Zidovudine |
| <b>Aptivus</b>                 |
| Atazanavir                     |
| <b>Atripla</b>                 |
| <b>Biktarvy</b>                |
| <b>Cimduo</b>                  |
| <b>Complera</b>                |
| Darunavir                      |
| <b>Delstrigo</b>               |

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[Plain type = Generic drug]

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| Therapeutic Drug Classes                              |
|-------------------------------------------------------|
| <b>Descovy</b>                                        |
| Didanosine                                            |
| <b>Dovato</b>                                         |
| <b>Edurant</b>                                        |
| Efavirenz                                             |
| Efavirenz-Emtricitabine-Tenofovir Disoproxil Fumarate |
| Efavirenz-Lamivudine                                  |
| Emtricitabine                                         |
| Emtricitabine-Tenofovir Disoproxil Fumarate           |
| <b>Emtriva</b>                                        |
| <b>Epivir</b>                                         |
| Etravirine                                            |
| <b>Evotaz</b>                                         |
| Fosamprenavir                                         |
| <b>Fuzeon</b>                                         |
| <b>Genvoya</b>                                        |
| <b>Intelence</b>                                      |
| <b>Isentress</b>                                      |
| <b>Isentress HD</b>                                   |
| <b>Juluca</b>                                         |
| <b>Kaletra</b>                                        |
| Lamivudine                                            |
| Lamivudine-Zidovudine                                 |
| <b>Lexiva</b>                                         |
| Lopinavir-Ritonavir                                   |
| Maraviroc                                             |
| Nevirapine                                            |
| Nevirapine Extended-Release                           |
| <b>Norvir Tablet</b>                                  |
| <b>Odefsey</b>                                        |
| <b>Pifeltro</b>                                       |
| <b>Prezcobix</b>                                      |

| Therapeutic Drug Classes                  |
|-------------------------------------------|
| <b>Prezista</b>                           |
| <b>Retrovir</b>                           |
| <b>Reyataz</b>                            |
| <b>Ritonavir</b>                          |
| <b>Rukobia</b>                            |
| <b>Selzentry</b>                          |
| Stavudine                                 |
| <b>Stribild</b>                           |
| <b>Sunlenca</b>                           |
| <b>Sustiva</b>                            |
| <b>Symfi</b>                              |
| <b>Symfi Lo</b>                           |
| <b>Symtuza</b>                            |
| Tenofovir                                 |
| <b>Tivicay</b>                            |
| <b>Tivicay PD</b>                         |
| <b>Triumeq</b>                            |
| <b>Triumeq PD</b>                         |
| <b>Truvada</b>                            |
| <b>Viracept</b>                           |
| <b>Viread</b>                             |
| <b>Vocabria</b>                           |
| <b>Ziagen</b>                             |
| Zidovudine                                |
| <b>Immunosuppressant: Organ Rejection</b> |
| <b>Astagraf XL</b>                        |
| <b>Azasan</b>                             |
| Azathioprine                              |
| <b>Cellcept</b>                           |
| Cyclosporine                              |
| <b>Envarsus XR</b>                        |
| Everolimus                                |

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

<sup>1</sup>Coverage is provided for oral formulations

<sup>2</sup>SSRIs are included only for employer groups who have specifically requested coverage.



| Therapeutic Drug Classes             |
|--------------------------------------|
| Gengraf                              |
| <b>Imuran</b>                        |
| Mycophenolate                        |
| Mycophenolic Acid                    |
| <b>Myfortic</b>                      |
| <b>Myhibbin</b>                      |
| <b>Neoral</b>                        |
| <b>Prograf</b>                       |
| <b>Rapamune</b>                      |
| <b>Sandimmune</b>                    |
| Sirolimus                            |
| Tacrolimus                           |
| <b>Zortress</b>                      |
| <b>Musculoskeletal: Osteoporosis</b> |
| <b>Actonel</b>                       |
| Alendronate                          |
| <b>Atelvia</b>                       |
| <b>Binosto</b>                       |
| Calcitonin (salmon)                  |
| Etidronate                           |
| <b>Evista</b>                        |
| <b>Forteo</b>                        |
| <b>Fosamax</b>                       |
| <b>Fosamax Plus D</b>                |
| Ibandronate                          |
| <b>Miacalcin</b>                     |
| Raloxifene                           |
| Risedronate                          |
| <b>Teriparatide</b>                  |
| Teriparatide                         |
| <b>Tymlos</b>                        |
| <b>Respiratory: Asthma/COPD</b>      |
| <b>Accolate</b>                      |

| Therapeutic Drug Classes                                                |
|-------------------------------------------------------------------------|
| <b>Advair Diskus</b>                                                    |
| <b>Advair HFA</b>                                                       |
| <b>AirDuo RespiClick</b>                                                |
| <b>Airsupra</b>                                                         |
| Albuterol HFA (generic <b>ProAir HFA, Proventil HFA, Ventolin HFA</b> ) |
| Albuterol Nebulized Solution                                            |
| Albuterol Oral Tablet                                                   |
| <b>Alvesco</b>                                                          |
| Aminophylline                                                           |
| <b>Anoro Ellipta</b>                                                    |
| Arformoterol Nebulized Solution                                         |
| <b>Arnuity Ellipta</b>                                                  |
| <b>Asmanex HFA</b>                                                      |
| <b>Asmanex Twisthaler</b>                                               |
| <b>Atrovent HFA</b>                                                     |
| <b>Bevespi Aerosphere</b>                                               |
| <b>Breo Ellipta</b>                                                     |
| <b>Breztri Aerosphere</b>                                               |
| <b>Brovana</b>                                                          |
| Budesonide/Formoterol                                                   |
| Budesonide Nebulized Solution                                           |
| <b>Combivent Respimat</b>                                               |
| Cromolyn                                                                |
| <b>Daliresp</b>                                                         |
| <b>Duaklir Pressair</b>                                                 |
| <b>Dulera</b>                                                           |
| <b>Elixophyllin</b>                                                     |
| <b>Fluticasone Diskus</b>                                               |
| <b>Fluticasone HFA</b>                                                  |
| Fluticasone/Salmeterol Diskus                                           |
| <b>Fluticasone/Salmeterol HFA</b>                                       |
| Fluticasone/Salmeterol RespiClick                                       |

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

<sup>1</sup>Coverage is provided for oral formulations

<sup>2</sup>SSRIs are included only for employer groups who have specifically requested coverage.



| Therapeutic Drug Classes              |
|---------------------------------------|
| <b>Fluticasone/Vilanterol Ellipta</b> |
| Formoterol Nebulized Solution         |
| <b>Gastrocrom</b>                     |
| <b>Incruse Ellipta</b>                |
| Ipratropium                           |
| Ipratropium/Albuterol                 |
| <b>Levalbuterol HFA</b>               |
| Levalbuterol Nebulized Solution       |
| Metaproterenol                        |
| Montelukast                           |
| <b>Ohtuvayre</b>                      |
| <b>Perforomist</b>                    |
| <b>Proair RespiClick</b>              |
| <b>Pulmicort Flexhaler</b>            |
| <b>Pulmicort Nebulized Solution</b>   |
| <b>QVAR Redihaler</b>                 |
| Roflumilast                           |
| <b>Serevent Diskus</b>                |
| <b>Singulair</b>                      |
| <b>Spiriva HandiHaler</b>             |
| <b>Spiriva Respimat</b>               |
| <b>Stiolto Respimat</b>               |
| <b>Striverdi Respimat</b>             |
| <b>Symbicort</b>                      |
| Terbutaline                           |
| <b>Theo-24</b>                        |
| Theophylline                          |
| Theophylline/Guaifenesin              |
| Tiotropium Handihaler                 |
| <b>Trelegy Ellipta</b>                |
| <b>Tudorza Pressair</b>               |
| <b>Ventolin HFA</b>                   |
| <b>Yupelri</b>                        |

| Therapeutic Drug Classes                                                                                             |
|----------------------------------------------------------------------------------------------------------------------|
| <b>Xopenex HFA</b>                                                                                                   |
| <b>Xopenex Nebulized Solution</b>                                                                                    |
| Zafirlukast                                                                                                          |
| <b>Zyflo</b>                                                                                                         |
| <b>Vitamins</b>                                                                                                      |
| Pediatric Fluoride 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       |

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

<sup>1</sup>Coverage is provided for oral formulations

<sup>2</sup>SSRIs are included only for employer groups who have specifically requested coverage.



## Notice of Availability of Language Assistance Services and Alternate Formats

**ATTENTION:** Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. TTY: 711

**ATENCIÓN:** Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro. TTY: 711

**ملاحظة:** إذا كنت تتحدث **اللغة العربية (Arabic)**، ستوفر لك خدمات المساعدة اللغوية المجانية والمراسلات

المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة. اتصل بالرقم المجاني المدون على بطاقة تعريف العضو خاصتك.

**ចំណាំ:** ប្រសិនបើអ្នកនិយាយ**ភាសាខ្មែរ (Khmer)** សេវាជំនួយភាសាភាគតិចផ្ទៃ  
និងការទំនាក់ទំនងភាគតិចផ្ទៃក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។  
ទូរសព្ទមកលេខភាគតិចនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

**请注意：**如果您说**中文 (Chinese)**，我们可以为您提供免费语言协助服务以及大字印刷本等其他格式的免费通信。请致电您的会员身份卡上的免付费电话号码。

**請注意：**如果您說**中文 (Chinese)**，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

**ATTENTION:** Si vous parlez **français (French)**, des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

**ATANSYON:** Si w pale **Kreyòl Ayisyen (Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòm la disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

**ACHTUNG:** Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlose Sprachassistentendienste und kostenlose Kommunikation in anderen Formaten, wie zum Beispiel große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

**ध्यान दें:** यदि आप **हिंदी (Hindi)** बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ्त संचार, जैसे कि बड़े प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

**LUS TSEEM CEEB:** Yog tias koj hais **lus Hmoob (Hmong)**, muaj cov kev pab cuam txhais lus thiab muaj kev sib txuas lus pab dawb ua lwm hom ntawv, xws li luam ua ntawv loj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

**ATENSION:** No agsasaoka iti **Ilocano (Ilocano)**, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

**ATTENZIONE:** se parla **italiano (Italian)**, può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

**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や、拡大文字など他の形式での無料のコミュニケーションをご利用いただけます。会員証に記載されているフリーダイヤルにお電話ください。

**알림 사항:** 한국어(**Korean**)를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

**BAA'ÁKONÍNÍZIN:** Diné (**Navajo**) saad bee yáníłti'go, t'áá jíík'eh saad bee áka'e'eyeed bee áka'anída'wo'í dóó nááná łahgo át'éego bee hadadilyaa bee ahxíł hane'í, díí nitsaago bee ak'eda'ashchínígíí, náhóló. Bee atah nil'íní ninaaltsoos nítł'izí bee nééhoziní bąąh t'áá hiik'eh bee hane'í námboo bee hodíilnih.

**توجه:** اگر به زبان **فارسی (Farsi)** صحبت می‌کنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالب‌های دیگر، مانند چاپ بزرگ، در دسترس شما هستند. با شماره رایگان مندرج روی کارت شناسایی عضویت‌تان تماس بگیرید.

**UWAGA:** Dla osób mówiących po **polsku (Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

**ATENÇÃO:** se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

**ВНИМАНИЕ!** Если вы говорите на **русском языке (Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

**FIIRO GAAR AH:** Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda bilaashka ah iyo isgaarsiino bilaash ah oo qaabab kale ah, sida far waaweyn, ayaa diyaar kuu ah. Ka wac lambarka wicitaanka bilaashka ah kaarkaaga aqoonsiga xubinta.

**PAUNAWA:** Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

**LƯU Ý:** Nếu quý vị nói **Tiếng Việt (Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ định danh thành viên của quý vị.

## Learn more



Call the toll-free phone number on your member ID card to speak with customer service.



Visit the member website listed on your member ID card to look up the price of drugs covered by your plan, find lower-cost options and more.

**United  
Healthcare**

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. Exclusions and utilization management programs, such as Prior Authorization - Notification, Prior Authorization - Medical Necessity and/or Step Therapy (referred to as First Start in New Jersey) programs may apply. Please refer to plan benefit documents. Review your benefit plan documents to see what medications are covered under your plan. Where differences are noted between this list and your benefit plan documents, the benefit plan documents will govern. Please refer to myuhc.com for information on specific drugs included in these programs or call the member phone number listed on your health plan ID card.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Health Plan coverage provided by or through a UnitedHealthcare company. Administrative services provided by United HealthCare Services, Inc. or its affiliates.