

# 2019 PREVENTIVE GENERICS 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 medications your plan covers as of January 1, 2019.\* Medications are listed alphabetically by the condition they prevent. **The Preventive Generics 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.**

**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**<sup>®</sup> 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.\*\*

Together, all the way.<sup>®</sup>



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

# Preventive Generics Drug List

## Asthma related

albuterol  
budesonide  
caffeine citrate  
cromolyn  
fluticasone-salmeterol  
ipratropium  
ipratropium-albuterol  
levalbuterol  
levalbuterol concentrate  
levalbuterol HFA  
metaproterenol  
montelukast  
terbutaline  
Theochron  
theophylline  
zafirlukast  
zileuton ER

## Blood pressure related

acebutolol  
acetazolamide  
Afedstab CR  
amiloride  
amiloride-HCTZ  
amlodipine  
amlodipine-benazepril  
amlodipine-olmesartan  
amlodipine-valsartan  
amlodipine-valsartan-HCTZ  
atenolol  
atenolol-chlorthalidone  
benazepril  
benazepril-HCTZ  
betaxolol  
bisoprolol  
bisoprolol-HCTZ  
bumetanide  
candesartan  
candesartan-HCTZ  
captopril  
captopril-HCTZ  
Cartia XT  
carvedilol  
carvedilol ER  
chlorothiazide

chlorthalidone  
clonidine  
diltiazem  
diltiazem 12hr ER  
diltiazem 24hr CD  
diltiazem 24hr ER  
diltiazem ER  
Dilt-XR  
doxazosin  
enalapril  
enalapril-HCTZ  
eplerenone  
eprosartan  
felodipine ER  
fosinopril  
fosinopril-HCTZ  
furosemide  
guanfacine  
hydralazine  
hydrochlorothiazide  
indapamide  
irbesartan  
irbesartan-HCTZ  
isradipine  
labetalol  
lisinopril  
lisinopril-HCTZ  
losartan  
losartan-HCTZ  
Matzim LA  
methazolamide  
methyclothiazide  
methyldopa tablet  
methyldopa-HCTZ  
metolazone  
metoprolol  
metoprolol ER-HCTZ  
metoprolol-HCTZ  
minoxidil  
moexipril  
moexipril-HCTZ  
nadolol  
nadolol-bendroflumethiazide  
nicardipine  
nifedipine  
nifedipine ER

nimodipine  
nisoldipine  
olmesartan  
olmesartan-amlodipine-HCTZ  
olmesartan-HCTZ  
perindopril  
phenoxybenzamine  
pindolol  
prazosin  
propranolol  
propranolol ER  
propranolol-HCTZ  
quinapril  
quinapril-HCTZ  
ramipril  
Sorine  
sotalol  
sotalol AF  
spironolactone  
spironolactone-HCTZ  
Taztia XT  
telmisartan  
telmisartan-amlodipine  
telmisartan-HCTZ  
terazosin  
timolol  
torseamide  
trandolapril  
trandolapril-verapamil ER  
triamterene-HCTZ  
valsartan  
valsartan-HCTZ  
Vecamyl  
verapamil  
verapamil ER  
verapamil ER PM  
verapamil SR

## Blood thinner related

aspirin-dipyridamole ER  
cilostazol  
clopidogrel  
dipyridamole  
Jantoven  
prasugrel  
warfarin

Brand name medications are capitalized and generic medications are lowercase

## Cholesterol related

amlodipine-atorvastatin  
atorvastatin  
cholestyramine  
cholestyramine light  
colesevelam  
colestipol  
ezetimibe  
ezetimibe-simvastatin  
fenofibrate  
fenofibric acid  
fluvastatin ER  
fluvastatin  
gemfibrozil  
lovastatin  
niacin ER  
Niacor  
omega-3 ethyl esters  
pravastatin  
Prevalite  
rosuvastatin  
simvastatin  
TriKlo

## 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  
alogliptin  
alogliptin-metformin  
alogliptin-pioglitazone  
chlorpropamide  
glimepiride  
glipizide  
glipizide ER  
glipizide XL  
glipizide-metformin  
glyburide  
glyburide micronized  
glyburide-metformin  
metformin  
metformin ER  
miglitol  
nateglinide

pioglitazone  
pioglitazone-glimepiride  
pioglitazone-metformin  
repaglinide  
repaglinide-metformin  
tolazamide  
tolbutamide

## Osteoporosis related

alendronate  
calcitonin-salmon  
etidronate  
ibandronate  
raloxifene  
risedronate  
risedronate DR

## Prenatal vitamins

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

Brand name medications are capitalized and generic medications are lowercase



\* 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.

\*\* 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.

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 complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Cigna does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

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](mailto: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](mailto: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 (شماره تلفن ویژه ناشنوايان: شماره 711 را شماره‌گیری کنید).