

Preventive Medicine List

In addition to a healthy lifestyle, preventive medications can help people avoid many illnesses and conditions. The prescription portion of the Key Medical Plan includes select preventive medications that can help support you and your family's goal of ongoing good health. In order for these medications to be covered as preventive drugs under the Plan, however, you must obtain your medications through the Plan's prescription drug program that is administered by Express Scripts.

This list contains examples of your plan's preventive medications that meet the interpretation of the U.S. Department of Treasury's clinical guidance and includes therapeutic categories. The medications are categorized based on the medical conditions that they are used to prevent. This is not an all-inclusive list; only examples of medicines in each category are listed. Coverage prior to the deductible being met may not be provided for every dosage form of a listed medication. Please contact Member Services at 800.849.9138 if you have questions. This list is periodically reviewed by clinical experts. Medications may be added to or removed from the list based on different factors, including the intended purpose of the medication and its availability.

In certain situations, medications marked with (†) on this list are not covered unless you first receive approval through a coverage review (prior authorization). This review uses plan rules based on FDA-approved prescribing and safety information, clinical guidelines, and uses that are considered reasonable, safe, and effective. There are other medications that may be covered, but with limits (for example, only for a certain amount or for certain uses), unless you receive approval through a coverage review. During this review, Express Scripts asks your doctor for more information than what is on the prescription before the medication may be covered under your plan. If you fill or refill a prescription for one of these medications and do not first obtain your plan's approval, you will have to pay the full cost of the medication instead of just a coinsurance.

This list includes medications always used for prevention and sometimes for treatment.

Coverage prior to the deductible being met may not be provided for every dosage form of a listed medicine.

Please note: When feasible, brand names are shown in capitals in each category. If generic is available, it is listed in lowercase next to the brand name. If only generics are available (for example, brands are no longer available), they will only be listed in lowercase.

Preventive Medicine List

ASTHMA/COPD

ACCOLATE (zafirlukast)
 ADVAIR DISKUS[†]
 ADVAIR HFA[†]
 AEROSPAN[†]
 AIRDUO RESPICLICK
 albuterol
 ANORO ELLIPTA
 ARMONAIR RESPICLICK
 (fluticasone/salmeterol)
 ARCAPTA NEOHALER
 ARNUITY ELLIPTA
 ASMANEX HFA
 ASMANEX TWISTHALER
 ATROVENT HFA
 BEVESPI AEROSPHERE
 BREO ELLIPTA[†]
 budesonide
 CINQAIR[†]
 COMBIVENT RESPIMAT
 cromolyn oral inhalation
 DALIRESP[†]
 DULERA[†]
 DUONEB (ipratropium/albuterol)
 FASENRA[†]
 FLOVENT DISKUS
 FLOVENT HFA
 FORADIL
 INCRUSE ELLIPTA
 Inhaler assistive devices
 ipratropium oral inhalation
 LONHALA MAGNAIR
 metaproterenol
 montelukast
 Nebulizers
 NUCALA[†]
 PROAIR HFA
 PROAIR RESPICLICK
 QVAR
 SEEBRI NEOHALER
 SEREVENT DISKUS
 SPIRIVA RESPIMAT
 STIOLTO RESPIMAT
 STRIVERDI RESPIMAT
 SYMBICORT[†]
 terbutaline
 THEO-24, THEOCRON
 (theophylline)
 TRELEGY ELLIPTA
 TUDORZA PRESSAIR

UTIBRON NEOHALER
 VENTOLIN HFA
 XOLAIR[†]
 zileuton ER

BONE DISEASE AND FRACTURES

ACTONEL[†], ATELVIA[†] (risedronate)
 BONIVA[†] (ibandronate)
 DUAVEE
 EVISTA (raloxifene)
 FOSAMAX[†], FOSAMAX D[†],
 BINOSTO[†] (alendronate)
 RECLAST[†] (zoledronic acid)

CAVITIES

CLINPRO
 GEL-KAM
 PHOS-FLUR
 PREVIDENT
 Sodium fluoride rinse, gel,
 cream, paste, tabs and drops
 Stannous fluoride rinse and gel

COLONOSCOPY PREPARATION*

CLENPIQ
 COLYTE, GOLYTELY, NULYTELY
 (polyethylene glycol)
 MOVIPREP
 OSMOPREP
 PLENVU
 PREPOPIK
 SUPREP

DIABETES

INSULINS

AFREZZA
 BASAGLAR
 HUMALOG
 HUMULIN
 LANTUS SOLOSTAR
 LEVEMIR
 TOUJEO SOLOSTAR
 TRESIBA

INSULIN/GLP-I RECEPTOR AGONIST COMBINATIONS

SOLIQUA
 XULTOPHY

NON-INSULIN MEDICINES

ACTOS[†] (pioglitazone)
 ACTOPLUS MET, DUETACT, OSENI
 (pioglitazone combinations)[†]
 AMARYL (glimepiride)
 AVANDIA[†]
 AVANDAMET[†]
 BYETTA[†]
 BYDUREON[†]
 chlorpropamide
 CYCLOSET
 dextrose
 FARXIGA[†]
 FORTAMET[†], GLUCOPHAGE[†]
 (metformin)
 GLUCOTROL XL (glipizide)
 glipizide/metformin
 GLYNASE (glyburide)
 GLUCOVANCE (glyburide/
 metformin)
 GLYSET (miglitol)
 GLYXAMBI[†]
 INVOKAMET[†]
 INVOKAMET XR[†]
 INVOKANA[†]
 JANUVIA
 JANUMET
 JANUMET XR
 JARDIANCE[†]
 JENTADUETO
 JENTADUETO XR
 Lancets
 Needles
 OZEMPIC[†]
 PRANDIN (repaglinide)
 PRECOSE (acarbose)
 repaglinide/metformin
 SEGLUROMET[†]
 STARLIX (nateglinide)
 STEGLATRO[†]
 STEGLUJAN[†]
 SYMLINPEN[†]
 SYNJARDY[†]
 SYNJARDY XR[†]
 Syringes
 Test strips
 TRADJENTA
 TRULICITY[†]
 XIGDUO XR[†]

Preventive Medicine List

HEART DISEASE AND STROKE

BLOOD THINNER MEDICINES

aspirin, 81 mg & 325 mg*
 AGGRENOX
 (aspirin/dipyridamole ER)
 BEVYXXA
 BRILINTA
 clopidogrel
 COUMADIN (warfarin)
 DURLAZA ER
 EFFIENT (prasugrel)
 ELIQUIS†
 PERSANTINE (dipyridamole)
 ticlopidine
 XARELTO†
 ZONTIVITY†

CHOLESTEROL LOWERING MEDICINES

HMG-COA REDUCTASE INHIBITORS*

atorvastatin
 LESCOL† (fluvastatin)
 LIVALO†
 lovastatin
 PRAVACHOL† (pravastatin)
 rosuvastatin
 simvastatin

OTHER AGENTS

ANTARA (fenofibrate)
 COLESTID (colestipol)
 ezetimibe
 ezetimibe/simvastatin
 LIPOFEN
 LOFIBRA
 LOPID (gemfibrozil)
 NIASPAN (niacin)
 PRALUENT†
 PREVALITE, QUESTRAN
 (cholestyramine)
 TRILIPIX DR (fenofibric acid)
 WELCHOL (colesevelam)

HIGH BLOOD PRESSURE

ACE INHIBITORS

ACCUPRIL (quinapril)
 ACEON (perindopril)
 ALTACE (ramipril)
 captopril
 fosinopril
 LOTENSIN (benazepril)
 MAVIK (trandolapril)
 moexipril
 PRINIVIL, ZESTRIL (lisinopril)
 VASOTEC (enalapril)

ACE INHIBITORS/DIURETIC COMBINATIONS

ACCURETIC (quinapril/HCTZ)
 captopril/HCTZ
 fosinopril/HCTZ
 LOTENSIN HCT (benazepril/HCTZ)
 moexipril/HCTZ
 VASERETIC (enalapril/HCTZ)
 ZESTORETIC (lisinopril/HCTZ)
 LOTENSIN HCT (benazepril/HCTZ)

ANGIOTENSIN II RECEPTOR ANTAGONISTS

candesartan
 EDARBI†
 irbesartan
 losartan
 olmesartan
 telmisartan
 valsartan

ANGIOTENSIN II RECEPTOR ANTAGONISTS/DIURETIC COMBINATIONS

candesartan/HCTZ
 EDARBYCLOR†
 irbesartan/HCTZ
 losartan/HCTZ
 olmesartan/HCTZ
 telmisartan/HCTZ
 valsartan/HCTZ

BETA BLOCKERS

acebutolol
 betaxolol
 bisoprolol
 BYSTOLIC
 CORGARD (nadolol)
 INNOPRAN XL (propranolol)
 TENORMIN (atenolol)
 TOPROL XL, LOPRESSOR
 (metoprolol)

BETA BLOCKER/DIURETIC COMBINATIONS

CORZIDE
 (nadolol/bendroflumethiazide)
 LOPRESSOR HCT
 (metoprolol/HCTZ)
 propranolol/HCTZ
 TENORETIC
 (atenolol/chlorthalidone)
 ZIAC (bisoprolol/HCTZ)

CALCIUM CHANNEL BLOCKERS

ADALAT CC, PROCARDIA XL
 (nifedipine)
 amlodipine
 CALAN, VERELAN (verapamil)
 CARDIZEM LA, TIAZAC ER
 (diltiazem)
 felodipine ER
 isradapine
 nicardipine
 SULAR ER (nisoldipine)

DIURETICS

chlorothiazide
 chlorthalidone
 hydrochlorothiazide
 indapamide
 metolazone

Preventive Medicine List

OTHER HIGH BLOOD PRESSURE MEDICINE COMBINATIONS

amlodipine/benazepril
amlodipine/olmesartan
amlodipine/olmesartan/HCTZ
amlodipine/valsartan[†]
amlodipine/valsartan/HCTZ[†]
BYVALSON
CADUET
(amlodipine/atorvastatin)[†]
PRESTALIA
TARKA (trandolapril/verapamil)
TWYNSTA[†]
(amlodipine/telmisartan)

MALARIA

chloroquine
mefloquine
PRIMAQUINE
MALARONE (atovaquone/
proguanil)

MISC ANTIVIRALS

TRUVADA 200MG/300MG
PREVYMIS
SYNAGIS[†]

MIGRAINE PREVENTION

AIMOVIG

OBESITY[†]

ADIPEX-P (phentermine)
BELVIQ
BELVIQ XR
CONTRAVE
diethylpropion
REGIMEX (benzphetamine)
LOMAIRA
phendimetrazine
SAXENDA
XENICAL

SMOKING-CESSATION*

CHANTIX
NICOTROL
NICODERM CQ
Nicotine gum, lozenges and
patches
ZYBAN (bupropion SR 150mg)

IMMUNIZATION:*

Anthrax, BCG, Cholera, Diphtheria,
Haemophilus Influenza B,
Hepatitis A and B, Human
Papillomavirus, Influenza,
Japanese Encephalitis, Measles,
Meningococcal, Mumps, Pertussis,
Pneumococcal, Poliovirus, Rabies,
Rotavirus, Rubella, Tetanus,
Typhoid, Varicella, Yellow Fever,
Zoster

VITAMINS OR MINERALS

folic acid*
Prenatal vitamins
Pediatric multivitamins with
fluoride*

*Please note that some of these medicines are also subject to the Affordable Care Act (ACA) and may be covered by your plan at 100%.

[†]Prior Authorization may be required before medication will be covered.

Express Scripts manages your prescription benefit for your employer, plan sponsor, or health plan. For specific questions on coverage, please call the phone number on your member ID card or visit our website express-scripts.com.

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