

# PreventiveRx<sup>SM</sup> Drug List: PreventiveRx Plus Plan (National)



PreventiveRx covers drugs that may keep you healthy because they may prevent illness and other health conditions. You can get the products on this list at low or no cost to you depending on your benefit.

This list includes only prescription products. Brand-name drugs are listed with a first capital letter. Non-brand drugs (generics) are in lowercase letters.

Most brand-name drugs that have a generic equivalent available are not covered under this Preventive Rx benefit.

All drugs\* listed below are covered for plans with the National Drug List. If your plan has a different drug list, please check to see if these drugs are included on your drug list. PreventiveRx Plus drugs are only covered if they are included on your specific drug list.

\*Some drugs may be excluded from your benefits. Please refer to your Certificate or Evidence for Coverage for coverage limitations and exclusions.

<b>Asthma</b>	Coumadin Eliquis heparin warfarin Xarelto	Jentadueto XR Lantus Lantus Solostar Levemir Levemir Flexpen Levemir FlexTouch metformin hcl metformin hcl er (Generic for Glucophage XR) miglitol nateglinide Ozempic pioglitazone pioglitazone- glimepiride pioglitazone- metformin repaglinide repaglinide- metformin Symlin Synjardy Synjardy XR tolazamide tolbutamide Toujeo Tradjenta Trulicity Victoza	amlodipine/ valsartan/ hctz atenolol atenolol/ chlorthalidone benazepril hcl benazepril hcl/ hctz betaxolol hcl Bidil bisoprolol fumarate bisoprolol fumarate/ hctz bumetanide candesartan candesartan/ hctz captopril captopril/ hctz Cartia XT carvedilol carvedilol er chlorothiazide chlorthalidone clonidine tabs, patches Clorpres 0.1, 0.2mg digitek digoxin Dilatrate SR diltiazem cd diltiazem hcl diltiazem hcl er doxazosin mesylate enalapril maleate enalapril/ hctz eplerenone eprosartan ethacrynic acid tabs felodipine er fosinopril sodium fosinopril/ hctz furosemide guanfacine hcl
<b>Blood clots</b>	Brilinta	glyburide, micronized Humalog Humalog KwikPen Humulin Humulin KwikPen Janumet Janumet XR Januvia Jardiance Jentadueto	Heart health and high blood pressure acebutolol hcl acetazolamide afeditab cr amiloride hcl amiloride/ hctz amlodipine besylate amlodipine/ benazepril amlodipine/ olmesartan amlodipine/ valsartan

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hydralazine hcl	nifedipine	terazosin hcl	<b>Osteoporosis</b>
hydrochlorothiazide	nifedipine er	timolol maleate tablet	alendronate sodium
indapamide	nimodipine	torsemide	amabelz
irbesartan	nisoldipine er	trandolapril	calcitonin- salmon
irbesartan/ hctz	Nitro-Bid	trandolapril/	Climara Pro
Isordil 40mg	Nitro-Dur 0.3, 0.8mg/ hr	verapamil	Combipatch
isosorbide dinitrate	nitroglycerin	triamterene/ hctz	estradiol tab, patch
isosorbide dinitrate er	nitroglycerin 400 mcg spray	valsartan	estradiol/
isosorbide mononitrate	nitroglycerin er	valsartan/ hctz	norethindrone acetate
isosorbide mononitrate er	nitroglycerin lingual	verapamil hcl	estropipate
isradipine	nitroglycerin sl tabs	verapamil hcl er	Fosamax Plus D
labetalol hcl	olmesartan	<b>High cholesterol</b>	ibandronate sodium
Lanoxin	olmesartan/ hctz	atorvastatin	tablets
lisinopril	olmesartan/	atorvastatin/	Jevantique
lisinopril/ hctz	amlodipine/ hctz	amlodipine	Jinteli
losartan	perindopril	cholestyramine	medroxypregesterone acetate
losartan/ hctz	pindolol	cholestyramine light	Menest
Matzim LA	prazosin hcl	colestipol hcl	norethindrone-ethin estradiol
methazolamide	propranolol hcl	colesevelam	Premarin tablets
methyclothiazide	propranolol hcl er	ezetimibe	Premphase
methylldopa	propranolol/ hctz	ezetimibe-simvastatin	Prempro
methylldopa/ hctz	quinapril hcl	fenofibrate (43, 67, 130, 134, 200 mg capsules & 40, 48, 54, 120, 145, 160mg tablets)	raloxifene
metolazone	quinapril/ hctz	fenofibric acid	risedronate
metoprolol succinate er	ramipril	fluvastatin	<b>Stroke</b>
metoprolol tartrate	Ranexa	gemfibrozil	aspirin-dipyridamole
metoprolol tart/ hctz	sorine	lovastatin	ER
minoxidil	sotalol hcl	niacin ER	cilostazol
moexipril hcl	sotalol hcl af	pravastatin	clopidogrel bisulfate
moexipril/ hctz	spironolactone	rosuvastatin	dipyridamole
nadolol	spironolactone/ hctz	Prevalite	prasugrel
nadolol/ bendroflumethiazide	Taztia XT	simvastatin	
nicardipine hcl	telmisartan	Welchol 3.75 Gram Oral Powder Packet	

*This list may change without notice which may affect your benefit coverage. To be sure your medication is covered under the PreventiveRx benefit, call the member services number located on your ID card.*

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. Copies of Colorado network access plans are available on request from member services or can be obtained by going to anthem.com/co/networkaccess. In Connecticut: Anthem Health Plans, Inc. In Georgia: Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE<sup>®</sup> Managed Care, Inc. (RIT), Healthy Alliance<sup>®</sup> Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Nevada: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc., dba HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwritten by Matthew Thornton Health Plan, Inc. In Ohio: Community Insurance Company. In Virginia: Anthem Health Plans of Virginia, Inc. trades as Anthem Blue Cross and Blue Shield in Virginia, and its service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area east of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCBSWI), underwrites or administers PPO and indemnity policies and underwrites the out of network benefits in POS policies offered by Compcare Health Services Insurance Corporation (Compcare) or Wisconsin Collaborative Insurance Corporation (WCIC). Compcare underwrites or administers HMO or POS policies; WCIC underwrites or administers Well Priority HMO or POS policies. Independent licensees of the Blue Cross and Blue Shield Association. ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. 05509MUMENABS Rev. 1/1/2019

# Get help in your language

Curious to know what all this says? We would be too. Here's the English version:

You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY/TDD: 711)

Separate from our language assistance program, we make documents available in alternate formats for members with visual impairments. If you need a copy of this document in an alternate format, please call the customer service telephone number on the back of your ID card.

## Spanish

Tiene el derecho de obtener esta información y ayuda en su idioma en forma gratuita. Llame al número de Servicios para Miembros que figura en su tarjeta de identificación para obtener ayuda. (TTY/TDD: 711)

## Chinese

您有權使用您的語言免費獲得該資訊和協助。請撥打您的 ID 卡上的成員服務號碼尋求協助。(TTY/TDD: 711)

## Vietnamese

Quý vị có quyền nhận miễn phí thông tin này và sự trợ giúp bằng ngôn ngữ của quý vị. Hãy gọi cho số Dịch Vụ Thành Viên trên thẻ ID của quý vị để được giúp đỡ. (TTY/TDD: 711)

## Korean

귀하에게는 무료로 이 정보를 얻고 귀하의 언어로 도움을 받을 권리가 있습니다. 도움을 얻으려면 귀하의 ID 카드에 있는 회원 서비스 번호로 전화하십시오. (TTY/TDD: 711)

## Tagalog

May karapatan kayong makuha ang impormasyon at tulong na ito sa ginagamit ninyong wika nang walang bayad. Tumawag sa numero ng Member Services na nasa inyong ID card para sa tulong. (TTY/TDD: 711)

## Russian

Вы имеете право получить данную информацию и помочь на вашем языке бесплатно. Для получения помощи звоните в отдел обслуживания участников по номеру, указанному на вашей идентификационной карте. (TTY/TDD: 711)

## Arabic

يمكن لك الحصول على هذه المعلومات والمساعدة بلغتك مجاناً. اتصل برقم خدمات الأعضاء الموجود على بطاقة التعريف الخاصة بك للمساعدة.  
(711 :TDD/TTY)

## Armenian

Դուք իրավունք ունեք Ձեր լեզվով անվճար ստանալ այս տեղեկատվությունը և ցանկացած օգնություն։  
Օգնություն ստանալու համար զանգահարեք Անդամների սպասարկման կենտրոն՝ Ձեր ID քարտի վրա նշված  
համարով։ (TTY/TDD: 711)

## Farsi

شما این حق را دارید که این اطلاعات و کمکها را به صورت رایگان به زبان خودتان دریافت  
کنید. برای دریافت کمک به شماره مرکز خدمات اعضاء که بر روی کارت شناسایی‌تان درج شده  
است، تماس بگیرید. (TTY/TDD: 711)

## French

Vous avez le droit d'accéder gratuitement à ces informations et à une aide dans votre langue. Pour cela, veuillez appeler le numéro des Services destinés aux membres qui figure sur votre carte d'identification. (TTY/TDD: 711)

#### Japanese

この情報と支援を希望する言語で無料で受けることができます。支援を受けるには、IDカードに記載されているメンバーサービス番号に電話してください。(TTY/TDD: 711)

#### Haitian

Ou gen dwa pou resevwa enfòmasyon sa a ak asistans nan lang ou pou gratis. Rele nimewo Manm Sèvis la ki sou kat idantifikasyon ou a pou jwenn èd. (TTY/TDD: 711)

#### Italian

Ha il diritto di ricevere queste informazioni ed eventuale assistenza nella sua lingua senza alcun costo aggiuntivo. Per assistenza, chiama il numero dedicato ai Servizi per i membri riportato sul suo libretto. (TTY/TDD: 711)

#### Polish

Masz prawo do bezpłatnego otrzymania niniejszych informacji oraz uzyskania pomocy w swoim języku. W tym celu skontaktuj się z Działem Obsługi Klienta pod numerem telefonu podanym na karcie identyfikacyjnej. (TTY/TDD: 711)

#### Punjabi

ਤੁਹਾਨੂੰ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਇਹ ਜਾਣਕਾਰੀ ਅਤੇ ਮਦਦ ਮੁਫਤ ਵਿੱਚ ਪ੍ਰਾਪਤ ਕਰਨ ਦਾ ਅਧਿਕਾਰ ਹੈ। ਮਦਦ ਲਈ ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ ਉੱਤੇ ਮੈਂਬਰ ਸਰਵਿਸਿਜ਼ ਨੰਬਰ ਤੇ ਕਾਲ ਕਰੋ। (TTY/TDD: 711)

#### Navajo

Bee ná ahóótí' t'áá ni nizaad k'ehjí niká a'doowoít'áá jiik'e. Naaltsoos bee atah nílinígíí bee néchó'dólzingo nanitínígíí bécsh bee hane'i bikáá' áají' hodíilnih. Naaltsoos bee atah nílinígíí bee néchó'dólzingo nanitínígíí bécsh bee hane'i bikáá' áají' hodíilnih. (TTY/TDD: 711)

#### **It's important we treat you fairly**

That's why we follow federal civil rights laws in our health programs and activities. We don't discriminate, exclude people, or treat them differently on the basis of race, color, national origin, sex, age or disability. For people with disabilities, we offer free aids and services. For people whose primary language isn't English, we offer free language assistance services through interpreters and other written languages. Interested in these services? Call the Member Services number on your ID card for help (TTY/TDD: 711). If you think we failed to offer these services or discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a complaint with our Compliance Coordinator in writing to Compliance Coordinator, P.O. Box 27401, Mail Drop VA2002-N160, Richmond, VA 23279. Or you can file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights at 200 Independence Avenue, SW; Room 509F, HHH Building, Washington, D.C. 20201 or by calling 1-800-368-1019 (TDD: 1- 800-537-7697) or online at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>. Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.