

# Health Savings Plan (HSP) and Hybrid Plan Preventive Therapy Drug List

Keeping in good health depends on taking and finishing your preventive medications just as your doctor prescribed. Your benefit plan wants to make this as easy and affordable for you as possible. That's why you do not need to meet a deductible for preventive prescriptions. Instead, your prescription benefits are paid right away for all medications on the CVS Caremark® Preventive Drug List. **You'll pay 20% of the cost of most preventive medications and there will be no cost to you for generic medicines on this list. Also, all drugs for diabetes, including insulin and diabetes supplies, are covered at 100% (subject to Value Formulary coverage).** This no-deductible preventive drug list not only saves you money but is an important step in helping prevent more serious health issues in the future. Check **Caremark.com** for specific drug costs.

January 2024

## ANTI-INFECTIVES

### ANTIRETROVIRAL AGENTS

*emtricitabine/tenofovir disoproxil fumarate 200/300 mg*  
DESCOVY

## ANTICOAGULANTS/ ANTIPLATELETS

### ANTICOAGULANTS

*dabigatran*  
*enoxaparin*  
*fondaparinux*  
*Jantoven*  
*warfarin*  
ELIQUIS  
XARELTO

### PLATELET AGGREGATION INHIBITORS

*clopidogrel*  
*dipyridamole*  
*dipyridamole ext-rel/aspirin*  
*prasugrel*

## ANTICONVULSANTS

*carbamazepine*  
*carbamazepine ext-rel*  
*clobazam*  
*clonazepam*  
*divalproex sodium delayed-rel*  
*divalproex sodium ext-rel*  
*ethosuximide*  
*felbamate*  
*lacosamide*  
*lamotrigine*  
*lamotrigine ext-rel*  
*levetiracetam*  
*levetiracetam ext-rel*  
*methsuximide*  
*oxcarbazepine*  
*phenobarbital*  
*phenytoin*  
*phenytoin sodium extended*

*primidone*  
*rufinamide*  
*tiagabine*  
*topiramate*  
*topiramate ext-rel*  
*valproic acid*  
*vigabatrin*  
*zonisamide*  
Epitol  
Phenytek

## CARDIOVASCULAR CONDITIONS - OTHER

### ANTIARRHYTHMIC AGENTS

*amiodarone*  
*disopyramide*  
*dofetilide*  
*flecainide*  
*propafenone*  
*propafenone ext-rel*  
*sotalol*  
*sotalol AF*  
*Pacerone*

### ORAL ANTIANGINAL AGENTS

*isosorbide dinitrate*  
*isosorbide mononitrate*  
*isosorbide mononitrate ext-rel*

*SL and chewable formulations are not included on this list.*

### TRANSDERMAL/TOPICAL ANTIANGINAL AGENTS

*nitroglycerin transdermal*

## CORONARY ARTERY DISEASE

### ANTIHYPERLIPIDEMICS

*atorvastatin*  
*cholestyramine*  
*colesevelam*  
*colestipol*

*ezetimibe*  
*fenofibrate*  
*fenofibric acid*  
*fenofibric acid delayed-rel*  
*fluvastatin*  
*fluvastatin ext-rel*  
*gemfibrozil*  
*lovastatin*  
*niacin ext-rel*  
*Pitavastatin*  
*pravastatin*  
*rosuvastatin*  
*simvastatin*  
*Prevalite*  
REPATHA  
VASCEPA

### COMBINATION ANTIHYPERLIPIDEMICS

*amlodipine/atorvastatin*  
*ezetimibe/simvastatin*

## DIABETES

### DIAGNOSTIC AGENTS AND SUPPLIES

ACCU-CHEK AVIVA PLUS STRIPS AND KITS  
ACCU-CHEK GUIDE STRIPS AND KITS  
ACCU-CHEK SMARTVIEW STRIPS AND KITS  
BD INSULIN SYRINGES AND NEEDLES  
DEXCOM CONTINUOUS GLUCOSE MONITORING SYSTEM  
OMNIPOD 5 INSULIN INFUSION PUMP  
OMNIPOD DASH INSULIN INFUSION PUMP  
OMNIPOD INSULIN INFUSION PUMP  
ONETOUCH LANCETS, LANCING DEVICE  
ONETOUCH ULTRA STRIPS AND KITS  
ONETOUCH VERIO STRIPS AND KITS  
V-GO INSULIN INFUSION PUMPS

### INJECTABLE DIABETES AGENTS

FIASP

Please note: This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.

This document contains content that is copyrighted by CVS Caremark and reprinted with permission. CVS Caremark is a registered trademark of CVS Pharmacy, Inc. 106-1047278 011024

HUMULIN R U-500  
LANTUS  
NOVOLIN  
NOVOLOG  
OZEMPIC  
RYBELSUS  
SOLIQUA  
SYMLINPEN  
TRESIBA  
TRULICITY  
VICTOZA

*Over-the-Counter (OTC) products require a prescription. Coverage may vary by plan.*

#### **ORAL DIABETES AGENTS**

*acarbose*  
*alogliptin*  
*alogliptin/metformin*  
*alogliptin/pioglitazone*  
*glimepiride*  
*glipizide*  
*glipizide ext-rel*  
*glipizide/metformin*  
*metformin*  
*metformin ext-rel*  
*miglitol*  
*nateglinide*  
*pioglitazone*  
*pioglitazone/glimepiride*  
*pioglitazone/metformin*  
*repaglinide*  
*saxagliptin*  
*saxagliptin/metformin ext-rel*  
FARXIGA  
GLYXAMBI  
JARDIANCE  
SYNJARDY  
SYNJARDY XR  
TRIJARDY XR  
XIGDUO XR

#### **HEMATOLOGIC AGENTS**

ADVATE  
ADYNOVATE  
AFSTYLA  
ELOCTATE  
ESPEROCT  
HEMLIBRA  
JIVI  
KOGENATE FS  
KOVALTRY  
NOVOEIGHT  
NUWIQ  
XYNTHA

#### **HYPERTENSION**

##### **ACE INHIBITORS/ANGIOTENSIN II RECEPTOR ANTAGONISTS AND COMBINATION AGENTS**

*amlodipine/benazepril*  
*benazepril*  
*benazepril/hydrochlorothiazide*  
*candesartan*  
*candesartan/hydrochlorothiazide*  
*captopril*  
*captopril/hydrochlorothiazide*  
*enalapril*  
*enalapril/hydrochlorothiazide*  
*fosinopril*  
*fosinopril/hydrochlorothiazide*  
*irbesartan*  
*irbesartan/hydrochlorothiazide*  
*lisinopril*  
*lisinopril/hydrochlorothiazide*  
*losartan*  
*losartan/hydrochlorothiazide*  
*moexipril*  
*olmesartan*  
*olmesartan/hydrochlorothiazide*  
*perindopril*  
*quinapril*  
*quinapril/hydrochlorothiazide*  
*ramipril*  
*telmisartan*  
*telmisartan/hydrochlorothiazide*  
*trandolapril*  
*trandolapril/verapamil ext-rel*  
*valsartan*  
*valsartan/hydrochlorothiazide*

##### **BETA-BLOCKERS AND COMBINATION AGENTS**

*acebutolol*  
*atenolol*  
*atenolol/chlorthalidone*  
*betaxolol*  
*bisoprolol*  
*bisoprolol/hydrochlorothiazide*  
*carvedilol*  
*carvedilol phosphate ext-rel*  
*labetalol*  
*metoprolol*  
*metoprolol succinate ext-rel*  
*metoprolol/hydrochlorothiazide*  
*nadolol*  
*nebivolol*  
*pindolol*  
*propranolol*  
*propranolol ext-rel*  
*timolol maleate*

##### **CALCIUM CHANNEL BLOCKERS AND COMBINATION AGENTS**

*amlodipine*  
*diltiazem*

*diltiazem ext-rel*  
*diltiazem XR*  
*felodipine ext-rel*  
*isradipine*  
*Levamlodipine*  
*nicardipine*  
*nifedipine*  
*nifedipine ext-rel*  
*nisoldipine ext-rel*  
*verapamil*  
*verapamil ext-rel*  
Cartia XT  
Dilt-XR  
Matzim LA  
Taztia XT

#### **DIURETICS**

*amiloride/hydrochlorothiazide*  
*chlorthalidone*  
*hydrochlorothiazide*  
*indapamide*  
*spironolactone/hydrochlorothiazide*  
*triamterene/hydrochlorothiazide*  
THALITONE

#### **OTHER ANTIHYPERTENSIVE AGENTS**

*Aliskiren*  
*amlodipine/olmesartan*  
*amlodipine/telmisartan*  
*amlodipine/valsartan/*  
*hydrochlorothiazide*  
*clonidine*  
*clonidine transdermal*  
*guanfacine*  
*hydralazine*  
*Methyldopa*  
*minoxidil*  
*olmesartan/amlodipine/*  
*hydrochlorothiazide*

#### **IMMUNIZING AGENTS**

##### **ALLERGENIC EXTRACTS**

ORALAIR

##### **IMMUNIZATIONS**

VACCINES – ALL

#### **MENTAL HEALTH**

##### **ANTIDEPRESSANTS**

*amitriptyline*  
*amoxapine*  
*bupropion*  
*bupropion ext-rel*  
*citalopram*  
*desipramine*  
*desvenlafaxine ext-rel*  
*doxepin*  
*duloxetine delayed-rel*  
*escitalopram*  
*fluoxetine*

*Please note:* This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.

This document contains content that is copyrighted by CVS Caremark and reprinted with permission. CVS Caremark is a registered trademark of CVS Pharmacy, Inc.  
106-1047278 011024

*fluoxetine delayed-rel*  
*imipramine HCl*  
*imipramine pamoate*  
*mirtazapine*  
*nortriptyline*  
*paroxetine HCl*  
*paroxetine HCl ext-rel*  
*phenelzine*  
*protriptyline*  
*sertraline*  
*tranylcypromine*  
*trazodone*  
*trimipramine*  
*venlafaxine*  
*venlafaxine ext-rel*  
*vilazodone*

#### **ANTIMANIC**

*lithium carbonate*  
*lithium carbonate ext-rel*

#### **ANTIPSYCHOTICS**

*aripiprazole*  
*asenapine*  
*chlorpromazine*  
*clozapine*  
*fluphenazine*  
*fluphenazine decanoate*  
*haloperidol*  
*loxapine*  
*lurasidone*  
*olanzapine*  
*olanzapine orally disintegrating tabs*  
*paliperidone*  
*perphenazine*  
*quetiapine*  
*quetiapine ext-rel*  
*risperidone*  
*thioridazine*  
*thiothixene*  
*trifluoperazine*  
*ziprasidone*  
ARISTADA

#### **OBSESSIVE COMPULSIVE DISORDER**

*clomipramine*  
*fluvoxamine*  
*fluvoxamine ext-rel*

#### **OSTEOPOROSIS**

*alendronate*  
*calcitonin*  
*calcitonin/salmon*  
*ibandronate*  
*raloxifene*  
*risedronate*  
*teriparatide*  
*zoledronic acid 5 mg/100 mL*  
FORTEO  
PROLIA

TYMLOS

### **PREVENTIVE CARE SERVICES**

#### **AGENTS FOR CHEMICAL DEPENDENCY**

*acamprosate calcium*  
*buprenorphine sublingual*  
*buprenorphine/naloxone sublingual*  
*disulfiram*  
*naltrexone*  
VIVITROL

#### **BOWEL PREPARATIONS**

*peg 3350/electrolytes*  
*sodium sulfate/potassium sulfate/ magnesium sulfate*  
Gavilyte  
CLENPIQ

#### **SMOKING DETERRENTS**

*bupropion ext-rel*  
*nicotine polacrilex*  
*nicotine transdermal*  
*varenicline*

*Over-the-Counter (OTC) products require a prescription. Coverage may vary by plan.*

### **RESPIRATORY DISORDERS**

#### **RESPIRATORY AGENTS**

*budesonide suspension*  
*cromolyn sodium nebulizer solution*  
*fluticasone furoate/vilanterol ellipta*  
*fluticasone/salmeterol*  
*montelukast*  
*zafirlukast*  
*zileuton ext-rel*  
Wixela Inhub  
FASENRA  
NUCALA  
PULMICORT FLEXHALER  
SPIRIVA RESPIMAT 1.25 mcg  
SYMBICORT  
TEZSPIRE

#### **SUPPLIES**

PEAK FLOW METERS  
SPACER DEVICES  
SPACER SUPPLIES

### **VARIOUS CONDITIONS**

#### **ANTI-MALARIAL AGENTS**

*atovaquone/proguanil*  
*chloroquine*  
*Primaquine*

#### **DENTAL CARIES PREVENTION**

*sodium fluoride*

PEDIATRIC MULTIVITAMINS WITH FLUORIDE – ALL GENERIC MARKETED PRODUCTS

#### **HEREDITARY ANGIOEDEMA AGENTS**

ORLADEYO  
TAKHZYRO

#### **IMMUNOSUPPRESSIVE AGENTS**

*cyclosporine caps*  
*Everolimus*  
*mycophenolate mofetil*  
*mycophenolate sodium delayed-rel*  
*sirolimus*  
*tacrolimus*  
Gengraf  
ASTAGRAF XL  
CELLCEPT  
ENVARUS XR  
MYFORTIC  
NEORAL  
NULOJIX  
PROGRAF  
RAPAMUNE  
SANDIMMUNE  
ZORTRESS

#### **MULTIPLE SCLEROSIS AGENTS**

*dimethyl fumarate delayed-rel*  
*Fingolimod*  
*glatiramer*  
AVONEX  
BETASERON  
COPAXONE  
KESIMPTA  
MAYZENT  
OCREVUS  
REBIF  
TYSABRI  
VUMERITY  
ZEPOSIA

### **WOMEN'S HEALTH**

#### **ANTIESTROGENS**

*tamoxifen*

#### **AROMATASE INHIBITORS**

*anastrozole*  
*exemestane*  
*letrozole*

#### **CONTRACEPTIVES**

CONTRACEPTIVES - ALL GENERIC PRESCRIPTION FORMULATIONS  
*Over-the-Counter (OTC) emergency contraceptive products require a prescription. Coverage may vary by plan.*

#### **PRENATAL VITAMINS**

PRENATAL VITAMINS – GENERIC PRODUCTS