

High Deductible Health Plan Preventive Medication List

Premium Preferred Drug List (PDL) Closed Formulary

This benefit may be offered to high deductible health plans (HDHPs) designed for use with a health savings account (HSA). It applies only for specific large groups with the Premium PDL Closed Formulary that have elected this benefit. This list *does not* apply to plans with an “open” benefit design.

If you are not certain whether your group has this benefit option, please contact BCBSAZ. The list is subject to change at any time, without prior notice. Some medications are available at a retail copay but will still require specialty distribution limited to a maximum of a 30-day supply.

HSA-compatible HDHPs generally require members to satisfy a deductible before the plan begins to pay for any benefits. The only permitted exception to that rule is for preventive care. The plan can pay for covered preventive care benefits before the member has met the high deductible.

The medications noted as HDHP have been identified as those most likely to qualify as preventive, based on U.S. Treasury Department guidance. This list does not include every medication that might possibly be considered preventive or every condition for which a preventive medication may be prescribed.

Neither BCBSAZ nor your plan sponsor can guarantee that the U.S. Treasury Department will agree that all of these medications qualify as preventative, particularly when applied to a member’s specific medical circumstances. You or your provider may be asked to demonstrate that you are taking a specific medication for purposes regarded as preventive under Treasury Department guidance.

If your plan covers BCBSAZ designated prevention medications as a preventive benefit and you have your prescription filled at an in-network pharmacy, your plan will treat these designated medications as preventive. This means you will pay only your applicable copay or coinsurance amount, regardless of whether you have met your deductible. The BCBSAZ prevention medication benefit applies only at in-network pharmacies. If you obtain BCBSAZ designated preventative medications from an out-of-network pharmacy, your standard prescription benefits, with applicable deductible, coinsurance and copays, will apply. Your cost share payments for preventive medications will count towards your deductible.

If you want any of these listed medications to process under your standard pharmacy benefit instead of your preventive care benefit, please [click here](#). If your medications process under your standard prescription benefit, your costs for applicable coverage will apply.

Questions?

Log in to MyBlueSM to find participating retail pharmacies, review your specific benefit information, and compare medication pricing and options. If you have questions, please call us.

Member Services	Phone Number	Standard Hours of Operation
Pharmacy Benefits	1 (866) 325-1794	24/7/365
BCBSAZ	Call the number on your ID card	8:30 a.m. to 4:30 p.m. Monday - Friday

Premium PDL HSA Preventive Drug List

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CURRENT AS OF 7/1/2023

Drug	Notes
Antiasthmatic And Bronchodilator Agents	
*Adrenergic Combinations***	
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT	QL (1 diskus/30days); HDHP
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250-50 MCG/ACT, 500-50 MCG/ACT	QL (1 inhaler/month); HDHP
ADVAIR HFA	QL (1 inhaler/month); HDHP; AL (Min 3 Years)
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	HDHP
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	HDHP
BREZTRI AEROSPHERE	QL (1 inhaler/month); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)
COMBIVENT RESPIMAT	HDHP
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act</i>	QL (1 diskus/30days); HDHP
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 250-50 mcg/act, 500-50 mcg/act</i>	QL (1 inhaler/month); HDHP
<i>ipratropium-albuterol</i>	QL (18 vials/day); HDHP
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	QL (1 inhaler/month); HDHP; AL (Min 18 Years)
SYMBICORT	HDHP
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	HDHP
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT	QL (1 diskus/30days); HDHP
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 250-50 MCG/ACT, 500-50 MCG/ACT	QL (1 inhaler/month); HDHP
*Anti-Inflammatory Agents***	
<i>cromolyn sodium inhalation</i>	HDHP
*Beta Adrenergics***	
<i>albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act</i>	HDHP
<i>albuterol sulfate inhalation</i>	HDHP
<i>albuterol sulfate oral syrup</i>	HDHP
<i>arformoterol tartrate</i>	QL (60 vials/30 days); HDHP; AL (Min 18 Years)
<i>formoterol fumarate inhalation</i>	QL (60 vials/30 days); HDHP; AL (Min 18 Years)
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml</i>	HDHP
PERFOROMIST	QL (60 vials/30 days); HDHP; AL (Min 18 Years)

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Drug	Notes
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	QL (1 pack/month); HDHP
STRIVERDI RESPIMAT	QL (1 inhaler/month); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)
<i>terbutaline sulfate injection</i>	HDHP
<i>terbutaline sulfate oral</i>	HDHP
*Bronchodilators - Anticholinergics***	
ATROVENT HFA	QL (2 inhalers/30 days); HDHP
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	HDHP
<i>ipratropium bromide inhalation</i>	HDHP
SPIRIVA HANDIHALER	QL (1 cap/day); HDHP
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	HDHP
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	QL (1 inhaler/month); HDHP
YUPELRI	PA; HDHP
*Leukotriene Receptor Antagonists***	
ACCOLATE	QL (2 tabs/day); HDHP
<i>montelukast sodium oral packet</i>	QL (1 packet/day); HDHP
<i>montelukast sodium oral tablet</i>	QL (1 tab/day); HDHP
<i>montelukast sodium oral tablet chewable 4 mg</i>	QL (1 tab/day); HDHP
<i>montelukast sodium oral tablet chewable 5 mg</i>	QL (2 tabs/day); HDHP
<i>zafirlukast</i>	QL (2 tabs/day); HDHP
*Steroid Inhalants***	
ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT	QL (2 inhalers/month); HDHP
ALVESCO INHALATION AEROSOL SOLUTION 80 MCG/ACT	QL (1 inhaler/month); HDHP
ARNUITY ELLIPTA	HDHP
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	HDHP
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	HDHP
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT, 220 MCG/ACT	HDHP
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	HDHP
ASMANEX HFA	HDHP
<i>budesonide inhalation</i>	HDHP
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT	QL (1 inhaler/month); HDHP
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	QL (1 diskus/30days); HDHP
FLOVENT HFA	HDHP
PULMICORT FLEXHALER	HDHP
QVAR REDIHALER	HDHP

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Drug	Notes
Anticoagulants	
*Coumarin Anticoagulants***	
JANTOVEN	HDHP
<i>warfarin sodium oral</i>	HDHP
Antidepressants	
*Selective Serotonin Reuptake Inhibitors (Ssris)***	
<i>citalopram hydrobromide oral solution</i>	HDHP
<i>citalopram hydrobromide oral tablet</i>	HDHP
<i>escitalopram oxalate oral</i>	HDHP
<i>fluoxetine hcl oral capsule</i>	HDHP
<i>fluoxetine hcl oral solution</i>	HDHP
<i>fluoxetine hcl oral tablet 10 mg</i>	HDHP
<i>fluvoxamine maleate</i>	HDHP
<i>fluvoxamine maleate er</i>	QL (2 caps/day); HDHP
<i>paroxetine hcl er</i>	QL (1 tab/day); HDHP
<i>paroxetine hcl oral tablet 10 mg</i>	QL (1.5 tabs/day); HDHP
<i>paroxetine hcl oral tablet 20 mg</i>	QL (1 tab/day); HDHP
<i>paroxetine hcl oral tablet 30 mg</i>	QL (2 tabs/day); HDHP
<i>paroxetine hcl oral tablet 40 mg</i>	QL (45 tabs/30 days); HDHP
PAXIL ORAL SUSPENSION	HDHP
<i>sertraline hcl oral concentrate</i>	HDHP
<i>sertraline hcl oral tablet</i>	HDHP
Antidiabetics	
*Alpha-Glucosidase Inhibitors***	
<i>acarbose oral</i>	HDHP
<i>miglitol</i>	HDHP
*Antidiabetic - Amylin Analogs***	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	QL (4 pens/28 days); HDHP; AL (Min 18 Years)
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	QL (4 pens/28 days); HDHP; AL (Min 18 Years)
*Biguanides***	
<i>metformin hcl er oral tablet extended release 24 hour 500 mg</i>	QL (5 tabs/day); HDHP
<i>metformin hcl er oral tablet extended release 24 hour 750 mg</i>	QL (3 tabs/day); HDHP
<i>metformin hcl oral solution</i>	HDHP
<i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>	HDHP
RIOMET	HDHP
*Diabetic Other***	
BAQSIMI ONE PACK	QL (2 units/month); HDHP
BAQSIMI TWO PACK	QL (2 units/month); HDHP
<i>diazoxide oral</i>	HDHP
<i>glucagon emergency injection kit</i>	QL (2 kits/month); HDHP

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Drug	Notes
<i>glucagon emergency injection solution reconstituted</i>	QL (2 injections/month); HDHP
PROGLYCEM	HDHP
ZEGALOGUE SOLUTION AUTO-INJECTOR 0.6 MG/0.6ML SUBCUTANEOUS	QL (2 fills/month); DS (2 day supply max); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 6 Years)
ZEGALOGUE SOLUTION AUTO-INJECTOR 0.6 MG/0.6ML SUBCUTANEOUS	QL (2 fills/month; 2 fills per 1 month); DS (2 day supply max); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 6 Years)
ZEGALOGUE SOLUTION PREFILLED SYRINGE 0.6 MG/0.6ML SUBCUTANEOUS	QL (2 fills/month); DS (2 day supply max); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 6 Years)
ZEGALOGUE SOLUTION PREFILLED SYRINGE 0.6 MG/0.6ML SUBCUTANEOUS	QL (2 fills/month; 2 fills per 1 month); DS (2 day supply max); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 6 Years)
*Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors***	
JANUVIA	QL (1 tab/day); HDHP; AL (Min 18 Years)
TRADJENTA	HDHP
*Dipeptidyl Peptidase-4 Inhibitor-Biguanide Combinations***	
JANUMET	QL (2 tabs/day); HDHP; AL (Min 18 Years)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG	QL (1 tab/day); HDHP; AL (Min 18 Years)
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG, 50-500 MG	QL (2 tabs/day); HDHP; AL (Min 18 Years)
JENTADUETO	HDHP
JENTADUETO XR	QL (1 tab/day); HDHP; AL (Min 18 Years)
*Dopamine Receptor Agonists - Ergot Derivatives***	
CYCLOSET	HDHP
*Human Insulin***	
AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT, 60X4 & 60X8 & 60X12 UNIT, 8 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT	PA; QL (2 per day); HDHP; AL (Min 18 Years)
HUMALOG INJECTION	QL (2 per day); HDHP
HUMALOG JUNIOR KWIKPEN	QL (2 per day); HDHP
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	QL (2 per day); HDHP
HUMALOG MIX 50/50	QL (2 per day); HDHP
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	QL (2 per day); HDHP
HUMALOG MIX 75/25	QL (2 per day); HDHP
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	QL (2 per day); HDHP
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	QL (2 per day); HDHP
HUMULIN 70/30	QL (2 per day); HDHP

Drug	Notes
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	QL (2 per day); HDHP
HUMULIN N	QL (2 per day); HDHP
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	QL (2 per day); HDHP
HUMULIN R	QL (2 per day); HDHP
HUMULIN R U-500 (CONCENTRATED)	QL (2 per day); ST (Step Therapy applies; see Step Therapy Drug List); HDHP
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	QL (2 per day); ST (Step Therapy applies; see Step Therapy Drug List); HDHP
LANTUS	QL (2 per day); HDHP
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	QL (2 per day); HDHP
LYUMJEV	QL (0.5/day); HDHP
LYUMJEV KWIKPEN	QL (0.5/day); HDHP
TOUJEO MAX SOLOSTAR	QL (2 per day); HDHP
TOUJEO SOLOSTAR	QL (2 per day); HDHP
*Incretin Mimetic Agents (Glp-1 Receptor Agonists)***	
BYDUREON BCISE	QL (4 injectors/28 days); ST (Step Therapy applies; see Step Therapy Drug List); HDHP
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	QL (1 syringe/30 days); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	QL (1 syringe/30 days); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML	QL (1 pen/28 days); HDHP
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML	PA; QL (1 pen/28 days); HDHP
OZEMPIC (2 MG/DOSE)	PA; QL (1 pen/28 days); HDHP
RYBELSUS	QL (1 tab/day); ST (Step Therapy applies; see Step Therapy Drug List); HDHP
TRULICITY	QL (4 pens/28 days); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	QL (3 pen-inj/30 days); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 10 Years)
*Insulin-Incretin Mimetic Combinations***	
SOLIQUA	QL (5 pens (15 mL)/30 days); HDHP; AL (Min 18 Years)
XULTOPHY	QL (5 pens (15 mL)/30 days); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)
*Meglitinide Analogues***	
<i>nateglinide</i>	QL (3 tabs/day); HDHP

Drug	Notes
<i>repaglinide</i>	HDHP
*Sglt2 Inhibitor - Dpp-4 Inhibitor - Biguanide Comb***	
TRIJARDY XR	QL (1 tab/day); HDHP
*Sglt2 Inhibitor - Dpp-4 Inhibitor Combinations***	
GLYXAMBI	QL (1 tab/day); HDHP; AL (Min 18 Years)
*Sodium-Glucose Co-Transporter 2 (Sglt2) Inhibitors***	
FARXIGA	QL (1 tab/day); HDHP
JARDIANCE	QL (1 tab/day); HDHP
*Sodium-Glucose Co-Transporter 2 Inhibitor-Biguanide Comb***	
SYNJARDY	HDHP
SYNJARDY XR	HDHP
XIGDUO XR	HDHP
*Sulfonylurea-Biguanide Combinations***	
<i>glipizide-metformin hcl oral tablet 2.5-250 mg</i>	QL (2 tabs/day); HDHP
<i>glipizide-metformin hcl oral tablet 2.5-500 mg, 5-500 mg</i>	QL (4 tabs/day); HDHP
<i>glyburide-metformin oral tablet 1.25-250 mg</i>	QL (3 tabs/day); HDHP
<i>glyburide-metformin oral tablet 2.5-500 mg, 5-500 mg</i>	QL (4 tabs/day); HDHP
*Sulfonylureas***	
<i>glimepiride oral tablet 1 mg, 2 mg</i>	QL (3 tabs/day); HDHP
<i>glimepiride oral tablet 4 mg</i>	QL (2 tabs/day); HDHP
<i>glipizide er</i>	HDHP
<i>glipizide oral tablet 10 mg, 5 mg</i>	HDHP
<i>glipizide xl</i>	HDHP
GLUCOTROL XL	HDHP
<i>glyburide micronized</i>	HDHP
<i>glyburide oral</i>	HDHP
GLYNASE	HDHP
*Thiazolidinedione-Biguanide Combinations***	
ACTOPLUS MET ORAL TABLET 15-850 MG	QL (3 tabs/day); HDHP; AL (Min 16 Years)
<i>pioglitazone hcl-metformin hcl</i>	QL (3 tabs/day); HDHP; AL (Min 16 Years)
*Thiazolidinediones***	
<i>pioglitazone hcl</i>	QL (1 tab/day); HDHP
Antihyperlipidemics	
*Acl Inhib-Intestinal Cholesterol Absorption Inhib Comb***	
NEXLIZET	QL (1 tab/day); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)
*Adenosine Triphosphate-Citrate Lyase (Acl) Inhibitors***	
NEXLETOL	QL (1 tab/day); ST (Step Therapy applies; see Step Therapy Drug List); HDHP; AL (Min 18 Years)

Drug	Notes
*Antihyperlipidemics - Misc.**	
<i>icosapent ethyl</i>	HDHP
<i>omega-3-acid ethyl esters</i>	QL (4 caps/day); HDHP; AL (Min 18 Years)
VASCEPA	PA; HDHP
*Bile Acid Sequestrants**	
<i>cholestyramine light</i>	HDHP
<i>cholestyramine oral</i>	HDHP
<i>colesevelam hcl oral tablet</i>	QL (6 tabs/day); HDHP
<i>colestipol hcl</i>	HDHP
PREVALITE	HDHP
*Fibric Acid Derivatives**	
<i>fenofibrate oral tablet 145 mg, 160 mg</i>	QL (1 tab/day); HDHP
<i>fenofibrate oral tablet 48 mg</i>	QL (2 tabs/day); HDHP
<i>fenofibric acid oral capsule delayed release</i>	QL (1 cap/day); HDHP; AL (Min 18 Years)
<i>gemfibrozil oral</i>	HDHP
LOPID	HDHP
TRILIPIX	QL (1 cap/day); HDHP; AL (Min 18 Years)
*Hmg Coa Reductase Inhibitors**	
<i>atorvastatin calcium oral tablet 10 mg</i>	QL (1.5 tabs/day); HDHP
<i>atorvastatin calcium oral tablet 20 mg, 40 mg</i>	QL (45 tabs/30 days); HDHP
<i>atorvastatin calcium oral tablet 80 mg</i>	QL (1 tab/day); HDHP
<i>lovastatin oral tablet 10 mg, 20 mg</i>	HDHP
<i>lovastatin oral tablet 40 mg</i>	QL (2 tabs/day); HDHP
<i>pravastatin sodium oral tablet 10 mg, 20 mg, 80 mg</i>	QL (1 tab/day); HDHP
<i>pravastatin sodium oral tablet 40 mg</i>	QL (2 tabs/day); HDHP
<i>rosuvastatin calcium</i>	QL (1 tab/day); HDHP
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	QL (1 tab/day); HDHP
<i>simvastatin oral tablet 80 mg</i>	PA; QL (1 tab/day); HDHP
*Intest Cholest Absorp Inhib-Hmg Coa Reductase Inhib Comb**	
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg</i>	QL (1 tab/day); HDHP
<i>ezetimibe-simvastatin oral tablet 10-80 mg</i>	PA; QL (1 tab/day); HDHP
*Intestinal Cholesterol Absorption Inhibitors**	
<i>ezetimibe</i>	QL (1 tab/day); HDHP
*Nicotinic Acid Derivatives**	
<i>niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 750 mg</i>	QL (2 tabs/day); HDHP
<i>niacin er (antihyperlipidemic) oral tablet extended release 500 mg</i>	QL (3 tabs/day); HDHP
Antihypertensives	
*Ace Inhibitor & Calcium Channel Blocker Combinations**	
<i>amlodipine besy-benazepril hcl</i>	HDHP
<i>trandolapril-verapamil hcl er</i>	HDHP

Drug	Notes
*Ace Inhibitors & Thiazide/Thiazide-Like***	
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG	HDHP
<i>benazepril-hydrochlorothiazide</i>	HDHP
<i>captopril-hydrochlorothiazide</i>	HDHP
<i>enalapril-hydrochlorothiazide</i>	HDHP
<i>fosinopril sodium-hctz</i>	HDHP
<i>lisinopril-hydrochlorothiazide</i>	HDHP
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	HDHP
<i>quinapril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg</i>	HDHP
VASERETIC	HDHP
*Ace Inhibitors***	
ACCUPRIL	HDHP
<i>benazepril hcl oral</i>	HDHP
<i>captopril oral</i>	HDHP
<i>enalapril maleate oral tablet</i>	HDHP
<i>fosinopril sodium</i>	HDHP
<i>lisinopril oral</i>	HDHP
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	HDHP
<i>moexipril hcl</i>	HDHP
<i>perindopril erbumine</i>	HDHP
<i>quinapril hcl</i>	HDHP
<i>ramipril</i>	HDHP
<i>trandolapril</i>	HDHP
*Angiotensin II Receptor Antag & Ca Channel Blocker Comb***	
<i>amlodipine besylate-valsartan</i>	QL (1 tab/day); HDHP
<i>amlodipine-olmesartan</i>	QL (1 tab/day); HDHP
<i>telmisartan-amlodipine</i>	HDHP
*Angiotensin II Receptor Antag & Thiazide/Thiazide-Like***	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	QL (1 tab/day); HDHP
EDARBYCLOR	HDHP
<i>irbesartan-hydrochlorothiazide</i>	QL (1 tab/day); HDHP
<i>losartan potassium-hctz</i>	HDHP
<i>olmesartan medoxomil-hctz oral tablet 20-12.5 mg</i>	QL (1.5 tabs/day); HDHP
<i>olmesartan medoxomil-hctz oral tablet 40-12.5 mg, 40-25 mg</i>	QL (1 tab/day); HDHP
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 80-12.5 mg</i>	QL (2 tabs/day); HDHP
<i>valsartan-hydrochlorothiazide oral tablet 320-12.5 mg, 320-25 mg</i>	QL (1 tab/day); HDHP
*Angiotensin II Receptor Antagonists***	
<i>candesartan cilexetil</i>	HDHP
EDARBI	QL (1 tab/day); HDHP; AL (Min 18 Years)
<i>irbesartan oral tablet 150 mg</i>	QL (45 tabs/30 days); HDHP
<i>irbesartan oral tablet 300 mg</i>	QL (1 tab/day); HDHP

Drug	Notes
<i>irbesartan oral tablet 75 mg</i>	QL (1.5 tabs/day); HDHP
<i>losartan potassium oral</i>	HDHP
<i>olmesartan medoxomil oral tablet 20 mg</i>	QL (45 tabs/30 days); HDHP
<i>olmesartan medoxomil oral tablet 40 mg</i>	QL (1 tab/day); HDHP
<i>olmesartan medoxomil oral tablet 5 mg</i>	QL (3 tabs/day); HDHP
<i>telmisartan</i>	HDHP
<i>valsartan oral tablet 160 mg, 40 mg, 80 mg</i>	QL (2 tabs/day); HDHP
<i>valsartan oral tablet 320 mg</i>	QL (1 tab/day); HDHP
*Angiotensin II Receptor Ant-Ca Channel Blocker-Thiazides***	
<i>amlodipine-valsartan-hctz</i>	QL (1 tab/day); HDHP
<i>olmesartan-amlodipine-hctz</i>	HDHP
*Antiadrenergics - Centrally Acting***	
<i>clonidine hcl oral</i>	HDHP
<i>guanfacine hcl oral</i>	HDHP
<i>methyl dopa oral</i>	HDHP
*Antiadrenergics - Peripherally Acting***	
CARDURA	HDHP
<i>doxazosin mesylate oral</i>	HDHP
MINIPRESS	HDHP
<i>prazosin hcl oral</i>	HDHP
<i>terazosin hcl oral</i>	HDHP
*Antihypertensives - Misc.***	
VECAMYL	HDHP
*Beta Blocker & Diuretic Combinations***	
<i>atenolol-chlorthalidone</i>	HDHP
<i>bisoprolol-hydrochlorothiazide</i>	HDHP
<i>metoprolol-hydrochlorothiazide</i>	HDHP
TENORETIC 100	HDHP
TENORETIC 50	HDHP
*Direct Renin Inhibitors***	
<i>aliskiren fumarate</i>	QL (1 tab/day); HDHP; AL (Min 18 Years)
TEKTURNA	QL (1 tab/day); HDHP; AL (Min 18 Years)
*Selective Aldosterone Receptor Antagonists (Saras)***	
<i>eplerenone oral tablet 25 mg</i>	QL (1 tab/day); HDHP
<i>eplerenone oral tablet 50 mg</i>	QL (2 tabs/day); HDHP
INSPIRA ORAL TABLET 25 MG	QL (1 tab/day); HDHP
INSPIRA ORAL TABLET 50 MG	QL (2 tabs/day); HDHP
*Vasodilators***	
<i>hydralazine hcl oral</i>	HDHP
<i>minoxidil oral</i>	HDHP

Drug	Notes
Beta Blockers	
*Alpha-Beta Blockers***	
<i>carvedilol</i>	HDHP
<i>labetalol hcl oral</i>	HDHP
*Beta Blockers Cardio-Selective***	
<i>acebutolol hcl oral</i>	HDHP
<i>atenolol oral</i>	HDHP
<i>betaxolol hcl oral tablet 10 mg</i>	QL (1.5 tabs/day); HDHP
<i>betaxolol hcl oral tablet 20 mg</i>	QL (1 tab/day); HDHP
<i>bisoprolol fumarate oral</i>	HDHP
LOPRESSOR ORAL	HDHP
<i>metoprolol succinate er</i>	HDHP
<i>metoprolol tartrate oral</i>	HDHP
*Beta Blockers Non-Selective***	
BETAPACE AF ORAL TABLET 120 MG	QL (2 tabs/day); HDHP
BETAPACE AF ORAL TABLET 160 MG, 80 MG	HDHP
HEMANGEOL	HDHP
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	HDHP
<i>pindolol</i>	HDHP
<i>propranolol hcl er</i>	HDHP
<i>propranolol hcl oral</i>	HDHP
<i>sotalol hcl (af)</i>	HDHP
<i>sotalol hcl oral</i>	HDHP
SOTYLIZE	HDHP
<i>timolol maleate oral</i>	HDHP
Calcium Channel Blockers	
*Calcium Channel Blockers***	
<i>amlodipine besylate oral</i>	HDHP
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	HDHP
CARTIA XT	HDHP
<i>diltiazem hcl er beads</i>	HDHP
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg</i>	HDHP
<i>diltiazem hcl er oral capsule extended release 12 hour 60 mg, 90 mg</i>	HDHP
<i>diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	HDHP
<i>diltiazem hcl oral</i>	HDHP
<i>dilt-xr</i>	HDHP
<i>felodipine er</i>	HDHP
<i>isradipine</i>	HDHP
<i>nifedipine er</i>	HDHP
<i>nifedipine er osmotic release</i>	HDHP

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Drug	Notes
<i>nifedipine oral</i>	HDHP
<i>nimodipine oral</i>	HDHP
NYMALIZE ORAL SOLUTION 6 MG/ML	HDHP
TAZTIA XT	HDHP
TIADYLT ER	HDHP
TIAZAC	HDHP
<i>verapamil hcl er oral capsule extended release 24 hour</i>	HDHP
<i>verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg</i>	HDHP
<i>verapamil hcl oral</i>	HDHP
VERELAN	HDHP
VERELAN PM	HDHP
Diuretics	
*Diuretic Combinations***	
MAXZIDE	HDHP
MAXZIDE-25	HDHP
<i>spironolactone-hctz</i>	HDHP
<i>triamterene-hctz oral capsule 37.5-25 mg</i>	HDHP
<i>triamterene-hctz oral tablet</i>	HDHP
*Loop Diuretics***	
<i>bumetanide oral</i>	HDHP
BUMEX ORAL TABLET 0.5 MG	HDHP
EDECRIN	HDHP
<i>ethacrynic acid oral</i>	HDHP
<i>furosemide oral solution 10 mg/ml, 8 mg/ml</i>	HDHP
<i>furosemide oral tablet</i>	HDHP
<i>toremide oral</i>	HDHP
*Potassium Sparing Diuretics***	
ALDACTONE	HDHP
<i>spironolactone oral tablet</i>	HDHP
*Thiazides And Thiazide-Like Diuretics***	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	HDHP
DIURIL	HDHP
<i>hydrochlorothiazide oral</i>	HDHP
<i>indapamide oral</i>	HDHP
<i>metolazone</i>	HDHP
THALITONE	HDHP
Endocrine And Metabolic Agents - Misc.	
*Bisphosphonates***	
ACTONEL ORAL TABLET 150 MG	QL (1 tab/month); HDHP
ACTONEL ORAL TABLET 35 MG	QL (4 tabs/28 days); HDHP
<i>alendronate sodium oral solution</i>	QL (75 ml/week); HDHP

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Drug	Notes
<i>alendronate sodium oral tablet 10 mg, 5 mg</i>	QL (1 tab/day); HDHP
<i>alendronate sodium oral tablet 35 mg, 70 mg</i>	QL (4 tabs/28 days); HDHP
FOSAMAX ORAL TABLET 70 MG	QL (4 tabs/28 days); HDHP
<i>ibandronate sodium oral</i>	QL (1 tab/month); HDHP
<i>risedronate sodium oral tablet 150 mg</i>	QL (1 tab/month); HDHP
<i>risedronate sodium oral tablet 30 mg, 5 mg</i>	QL (1 tab/day); HDHP
<i>risedronate sodium oral tablet 35 mg</i>	QL (4 tabs/28 days); HDHP
*Calcitonins***	
<i>calcitonin (salmon) injection</i>	HDHP
<i>calcitonin (salmon) nasal</i>	QL (1 bottle (3.7mL)/30 days); HDHP; AL (Min 16 Years)
MIACALCIN INJECTION	HDHP
*Selective Estrogen Receptor Modulators (Serms)***	
OSPHENA	PA; HDHP
Hematological Agents - Misc.	
*Direct-Acting P2y12 Inhibitors***	
BRILINTA	HDHP
*Hematorheologic Agents***	
<i>pentoxifylline er</i>	HDHP
*Phosphodiesterase Iii Inhibitors***	
<i>cilostazol</i>	QL (2 tabs/day); HDHP
*Platelet Aggregation Inhibitor Combinations***	
<i>aspirin-dipyridamole er</i>	HDHP
*Platelet Aggregation Inhibitors***	
<i>dipyridamole oral</i>	HDHP
*Protease-Activated Receptor-1 (Par-1) Antagonists***	
ZONTIVITY	QL (1 tab/day); HDHP; AL (Min 16 Years)
*Quinazoline Agents***	
AGRYLIN	HDHP
<i>anagrelide hcl</i>	HDHP
*Thienopyridine Derivatives***	
<i>clopidogrel bisulfate oral tablet 300 mg</i>	QL (1 dose); HDHP
<i>clopidogrel bisulfate oral tablet 75 mg</i>	QL (1 tab/day); HDHP
EFFIENT	QL (1 tab/day); HDHP; AL (Min 16 Years)
<i>prasugrel hcl</i>	QL (1 tab/day); HDHP; AL (Min 16 Years)
Vasopressors	
*Anaphylaxis Therapy Agents***	
ADRENALIN INJECTION	HDHP
<i>epinephrine (anaphylaxis)</i>	HDHP
<i>epinephrine injection solution auto-injector</i>	QL (2 units/month; 1 fill per 1 month); HDHP

Drug	Notes
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	QL (2 units/month; 1 fill per 1 month); HDHP
SYMJEPI	QL (2 units/month; 1 fill per 1 month); HDHP
*Vasopressors***	
<i>epinephrine injection solution 1 mg/ml, 10 mg/10ml</i>	HDHP
<i>epinephrine pf injection solution</i>	HDHP

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ADVAIR HFA	4	<i>cholestyramine</i>	10	<i>glyburide micronized</i>	9
AFREZZA	7	<i>cholestyramine light</i>	10	<i>glyburide-metformin</i>	9
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<i>amlodipine-olmesartan</i>	11	<i>diltiazem hcl</i>	13	HUMALOG MIX 75/25 KWIKPEN	7
<i>amlodipine-valsartan-hctz</i>	12	<i>diltiazem hcl er</i>	13	HUMULIN 70/30	7
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