Preventive medications are used to prevent certain conditions from developing, or to prevent a condition from coming back. These conditions include, but are not limited to, asthma, depression, diabetes, heart attack, high blood pressure, high cholesterol, osteoporosis, prenatal nutrient deficiency and stroke.

About this drug list.
This document shows the most commonly prescribed preventive generic and brand name medications covered as of January 1, 2021. All of these medications are approved by the U.S. Food and Drug Administration (FDA). The Preventive Drug List is updated often so it’s important to know that this is not a complete list of the medications your plan covers. Not all plans consider all of the conditions and medications listed in this document to be part of the preventive program. Log in to the myCigna App, or check your plan materials, to see which medications your plan covers as preventive.

Here’s some helpful information about this drug list:
› Medications are listed alphabetically by the condition they prevent.
› Brand name medications are capitalized and generic medications are lowercase.
› Some brand name preventive medications have a generic equivalent. For these medications, the generic will be listed in parenthesis next to the brand name.

About your cost-share for preventive medications.
Not all plans offer the same cost-share for their preventive program. 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) for a preventive generic medication.
› Cover preventive generic medications at 100%, or no additional cost ($0) to you.

Log into the myCigna App or website, or check your plan materials, to learn more about the medications included in your plan’s preventive program. You can also click on “Price a Medication” to see how much your medication may cost you at the different pharmacies in your plan’s network.

Go generic and save.
Ask your doctor if a preventive generic medication may be right for you. Generics have the same strength and active ingredients as brand name medications, but often cost much less – in some cases, up to 85% less.

“Preventive medications” don’t include medications covered at 100%, or no cost ($0) to you, under the Patient Protection and Affordable Care Act (PPACA)’s preventive services coverage requirement.
Preventive Drug List

Anxiety/Depression/ Bipolar Disorder

Celexa
citalopram
escitalopram
fluoxetine
fluoxetine DR
fluvoxamine
fluvoxamine ER
paroxetine
paroxetine CR
paroxetine ER
Paxil
Paxil CR
Prozac
Sarafem
sertraline
Zoloft

Blood Pressure Related

acebutolol
acetazolamide tablet
acetazolamide ER
Aldactazide
Aldactone
aliskiren
amiloride
amiloride-HCTZ
amlodipine
amlodipine-benazepril
amlodipine-olmesartan
amlodipine-valsartan
amlodipine-valsartan-HCTZ
atenolol
atenolol-chlorthalidone
benazepril
benazepril-HCTZ
Betapace AF
betaxolol tablet
bisoprolol
bisoprolol-HCTZ
bumetanide tablet
Calan SR
candesartan
candesartan-HCTZ
captopril
captopril-HCTZ
Cardizem LA
Cardura
Cardura XL
Carospir
Cartia XT
carvedilol
carvedilol ER
Catapres
Catapres-TTS 1
Catapres-TTS 2
Catapres-TTS 3
chlorthalidone
clonidine patch, tablet

Asthma Related

Accolate
albuterol
albuterol HFA
Aneror Ellipta
Atrovent HFA
Brovana
budesonide suspension
caffeine citrate oral solution
Combivent Respimat
cromolyn nebulizer solution
Dulera
Flovent Diskus
Flovent HFA
fluticasone-salmeterol
Incruse Ellipta
ipratropium solution
ipratropium-albuterol
levalbuterol
levalbuterol concentrate
levalbuterol HFA
Lonhala Magnair
metaproterenol
montelukast
Perforomist
Pulmicort
QVAR RediHaler
Serevent Diskus
Singulair
Symbicort
terbutaline tablet

Theo-24
theophylline
theophylline anhydrous
Wixela Inhub
Xolair
Xopenex
Xopenex Concentrate
zafirlukast
zileuton ER

Coreg
Coreg CR
Corgard
Demser
Dibenzyline
diltiazem tablet
diltiazem 12hr ER
diltiazem 24hr ER
diltiazem 24hr ER (CD)
diltiazem 24hr ER (LA)
diltiazem 24hr ER (XR)
Dilt-XR
Diovan
doxyazosin
Dutoprol
Dyazide
Dyrenium
enalapril
enalapril-HCTZ
Epaned
eplerenone
eprosartan
felodipine ER
fosinopril
fosinopril-HCTZ
furosemide solution, tablet
guanfacine
Hemangeol
hydralazine tablet
hydrochlorothiazide
indapamide
Inderal LA
Inderal XL
InnoPran XL
Inspra
irbesartan
irbesartan-HCTZ
isradipine
Kapspargo Sprinkle
Katerzia
labelol tablet
Lasix
lisinopril
lisinopril-HCTZ
Lopressor
Lopressor HCT
losartan
losartan-HCTZ
Matzim LA
Maxzide
Maxzide-25 mg
methazolamide

Brand name medications are capitalized and generic medications are lowercase.
Not all plans consider all of the conditions and medications listed in this document to be part of preventive coverage. Log in to the myCigna App, or check your plan materials, to see which medications your plan covers as preventive.
Blood Pressure Related (continued)

- methyldopa
- methyldopa-HCTZ
- metolazone
- metoprolol tablet
- metoprolol ER
- metoprolol-HCTZ
- Minipress
- minoxidil tablet
- moexipril
- nadolol
- nicardipine capsule
- nifedipine
- nifedipine ER
- nimodipine
- nisoldipine
- Norvasc
- Nymalize
- olmesartan
- olmesartan-HCTZ
- olmesartan-amloidipine-HCTZ
- perindopril
- phenoxymethylamine
- pindolol
- prazosin
- Prestalia
- Procardia
- Procardia XL
- propranolol solution, tablet
- propranolol ER
- propranolol-HCTZ
- Qbrelis
- quinapril
- quinapril-HCTZ
- ramipril
- Sorine
- sotalol tablet
- sotalol AF
- Sotylize
- spironolactone
- spironolactone-HCTZ
- Sular
- Tazzia XT
- telmisartan
- telmisartan-amloidipine
- telmisartan-HCTZ
- Tenoretic
- Tenormin
- terazosin
- Tiadylt ER
- Tiazac
- timolol tablet
- Toprol XL
- torsemide
- trandolapril
- trandolapril-verapamil ER
- triamterene
- triamterene-HCTZ
- valsartan
- valsartan-HCTZ
- Vecamyl
- verapamil capsule, tablet
- verapamil ER
- verapamil ER PM
- verapamil SR
- Verelan
- Verelan PM
- Ziac

Blood Thinner Related

- Aggrenox
- aspirin-dipyridamole ER
- Brilinta
- cilostazol
- clopidogrel
- dipyridamole tablet
- Durlaza
- Effient
- Eliquis
- Jantoven
- Plavix
- Pradaxa
- prasugrel
- Savaysa
- warfarin
- Xarelto
- Zontivity

Cholesterol Related

- amlodipine-atorvastatin
- atorvastatin
- Caduet
- cholestryamine
- cholestryamine light
- colesevelam
- Colestid
- colestdipol
- ezetimibe
- ezetimibe-simvastatin
- fenofibrate
- fenofibric acid
- Fibrinor
- fluvastatin

Blood Thinner Related

- Aggrenox
- aspirin-dipyridamole ER
- Brilinta
- cilostazol
- clopidogrel
- dipyridamole tablet
- Durlaza
- Effient
- Eliquis
- Jantoven
- Plavix
- Pradaxa
- prasugrel
- Savaysa
- warfarin
- Xarelto
- Zontivity

Diabetes Related

Log in to the mycigna app or website, or check your plan materials, to learn more about how your plan covers diabetes-related preventive medications.

- acarbose
- Actoplus Met
- Actos
- Amaryl
- Avandia
- Basaglar
- Bydureon
- Byetta
- Cycloset
- Diabetic Supplies (i.e. lancets, syringes, urine test, alcohol pads)
- Duetact
- Farxiga
- gliclazide
- glipizide
- glipizide ER
- glipizide XL
- glipizide-metformin
- Glucotrol
- Glucotrol XL
- glyburide

Brand name medications are capitalized and generic medications are lowercase.
Not all plans consider all of the conditions and medications listed in this document to be part of preventive coverage. Log in to the myCigna App, or check your plan materials, to see which medications your plan covers as preventive.
Diabetes Related

(continued)
glyburide micronized
glyburide-metformin
Glynase
Glyset
Glyxambi
Humalog
Humulin
Insulin Lispro
Janumet
Janumet XR
Januvia
Jardiance
Levemir
metformin
metformin ER 500mg, 750mg
tablet
miglitol
nateglinide
Ozempic
pioglitazone
pioglitazone-glimepiride
Precose
repaglinide
Riomet
Rybelsus
Segluromet
Soliqua
Starlix
Steglatro
SymlinPen
Synjardy
Synjardy XR
Tresiba
Trijardy XR
Trulicity
Victoza
Xigduo XR
Xultophy

Prenatal Vitamins

Your plan considers all prescription strength prenatal vitamins to be “preventive.”
Log in to the myCigna App or website to see which tier your plan covers prenatal vitamins on.

Osteoporosis Related

Actonel
alendronate
Binosto
Boniva tablet
calcitonin-salmon
Evista
Forteo
Fosamax
Fosamax Plus D
ibandronate tablet
Miacalcin
raloxifene
risedronate
risedronate DR
Teriparatide
Tymlos

1. State laws in Texas and Louisiana may require your plan to cover your medication 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 from Cigna before your plan will cover it, these changes may not begin until your plan’s renewal date. To find out if these state laws apply to your plan, please call Customer Service using the number on your Cigna ID card.

2. State law in Illinois may require your plan to cover your medications at your current benefit level until your plan renews. This means that if you currently have approval through a review process for your plan to cover your medication, the drug list change(s) listed here may not affect you until your plan renewal date. If you don’t currently have approval through a coverage review process, you may continue to receive coverage at your current benefit level if your doctor requests it. To find out if this state law applies to your plan, please call Customer Service using the number on your Cigna ID card.

3. Prices shown on myCigna are not guaranteed and coverage is subject to your plan terms and conditions. Visit myCigna for more information.


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, 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
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. 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)

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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）。


Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 현재 Cigna 가입자들께서는 ID 카드 뒷면에 있는 전화번호로 연락해주십시오. 기타 다른 경우에는 1.800.244.6224 (TTY: 다이얼 711) 번으로 전화해주십시오.


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 على بطاقات الشخصية. أو اتصل ب 1.800.244.6224 (TTY: 711).

French Creole – ATANSYON: Gen sévis 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).


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).