Starting January 1, 2021

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 medications covered as of January 1, 2021. All of these medications are approved by the U.S. Food and Drug Administration (FDA). Medications are listed alphabetically by the condition they prevent.

The Preventive Generics 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.

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.

“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 Generics Drug List

**ASTHMA**
budesonide

**BONE DISEASE AND FRACTURES**
alendronate
ibandronate
raloxifene
risedronate
zoledronic acid 5mg

**CAVITIES**
sodium fluoride rinse, gel cream, paste, tabs and drops
stannous fluoride rinse and gel

**CHOLESTEROL LOWERING**
(HMG-COA Reductase Inhibitors)
atorvastatin
fluvastatin
lovastatin
pravastatin
rosuvastatin
simvastatin

**CHOLESTEROL LOWERING**
(Other Agents)
cholestyramine
cholestyramine light
colesvelam
colestipol
ezetimibe
ezetimibe/simvastatin
fenfibrate
fenofibrinic acid
gemfibrozil
niacin
prevalite

**COLONOSCOPY PREPARATION**
polyethylene glycol

**DEPRESSION**
citalopram
escitalopram
fluoxetine
fluvoxamine
paroxetine
paroxetine er
sertraline

**DIABETES**
acarbose
glimepiride
glipizide ER
glipizide/metformin
glyburide
glyburide/metformin
metformin ER
miglitol
nateglinide
pioglitazone
pioglitazone/glimepiride
pioglitazone/metformin
repaglinide
repaglinide/metformin

**HEART DISEASE AND STROKE (Blood Thinners)**
aspirin 81mg, 325mg
aspirin-dipyridamole ER
clopidogrel
dipyridamole
prasugrel
warfarin

**HIGH BLOOD PRESSURE**
(Angiotensin II Receptor Antagonists)
candesartan
eprosartan
irbesartan
losartan
olmesartan
telmisartan
valsartan

**HIGH BLOOD PRESSURE**
(Angiotensin II Receptor Antagonists/Diuretic Combinations)
candesartan/HCTZ
irbesartan/HCTZ
losartan/HCTZ
olmesartan/HCTZ
telmisartan/HCTZ
valsartan/HCTZ

**HIGH BLOOD PRESSURE**
(Beta Blockers)
acebutolol
atenolol
betaxolol
bisoprolol
metoprolol succinate
metoprolol tartrate
nadolol
pindolol
propranolol
timolol

**HIGH BLOOD PRESSURE**
(Ace Inhibitors/Diuretic Combinations)
benazepril/captopril/enalapril/fosinopril/lisinopril/moexipril/perindopril/quinapril/ramipril/trandolapril

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.
HIGH BLOOD PRESSURE
(Calcium Channel Blockers)
amlodipine
diltiazem ER
felodipine ER
isradipine
nicardipine
nifedipine ER
nisoldipine ER
tiadylt ER
verapamil

HIGH BLOOD PRESSURE
(Diuretics)
chlorothiazide
chlorthalidone
hydrochlorothiazide
indapamidemetolazone

HIGH BLOOD PRESSURE
(Other Combinations)
amiodipine/atorvastatin
amlodipine/benazepril
amlodipine/olmesartan
amlodipine/olmesartan/HCTZ
amlodipine/telmisartan
amlodipine/valsartan
amlodipine/valsartan/HCTZ
tranolapril/verapamil

MALARIA
atovaquone/proguanil
chloroquine
mefloquine

OBESITY
benzphetamine
diethylpropion
phendimetrazine
phentermine

SMOKING-CESSATION
bupropion SR 150mg
nicotine gum, lozenges and patches

VITAMINS OR MINERALS
folic acid
generic prenatal vitamins
generic pediatric multivitamins
with fluoride

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.
Cigna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Cigna does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Cigna:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact customer service at the toll-free number shown on your ID card, and ask a Customer Service Associate for assistance.

If you believe that Cigna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by sending an email to ACAGrievance@Cigna.com or by writing to the following address:

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)
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）。

Vietnamese - XIN LUU Y: Quy vi duoc cap dietch vu try giup ve ngung ngu mien phi. Danh cho khach hang hien tai cua Cigna, vui long goi so o mat sau the Hoi vien. Canh truong hop khac xin goi so 1.800.244.6224 (TTY: Quay so 711).

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


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 – توجه: خدمات كمك زبانية، بدون تبرع أو رسوم، متاحة للعملاء الحاليين لـ Cigna. تُفضل أن تتم الاتصال بـ 1.800.244.6224 (TTY: 711).