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 preferred brand medications covered as of January 1, 2021. All of these medications are approved by the U.S. Food and Drug Administration (FDA). The Preventive Generics and Preferred Brands 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 Generics and Preferred Brands Drug List

**Anxiety/Depression/ Bipolar Disorder**
citalopram
escitalopram
fluoxetine
fluoxetine DR
fluvoxamine
fluvoxamine ER
paroxetine
paroxetine CR
paroxetine ER
sertraline

**Blood Pressure Related**
acebutolol
acetazolamide capsule, tablet
acetazolamide ER
aliskiren
amlodipine
amlodipine-benazepril
amlodipine-olmesartan
amlodipine-valsartan
amlodipine-valsartan-HCTZ
atenolol
atenolol-chlorthalidone
benazepril
benazepril-HCTZ
betaxolol tablet
bisoprolol
bisoprolol-HCTZ
bumetanide tablet
Bystolic
candesartan
candesartan-HCTZ
captopril
captopril-HCTZ
Cartia XT
carvedilol
carvedilol ER
chlorothalidone
clonidine patch, tablet
Demser
diltiazem 12hr ER
diltiazem 24hr ER
diltiazem 24hr ER (cd)
diltiazem 24hr ER (la)
diltiazem 24hr ER (xr)
diltiazem tablet
Dilt-XR
Diaril
doxazosin
Dyrenium
enalapril
enalapril-HCTZ
eprenone
felodipine ER
fosinopril
fosinopril-HCTZ
furosemide solution, tablet
guanfacine
hydralazine tablet
hydrochlorothiazide
indapamide
irbesartan
irbesartan-HCTZ
isradipine
labetalol tablet
lisinopril
lisinopril-HCTZ
losartan
losartan-HCTZ
Matzim LA
methazolamide
methylodopa
methylodopa-HCTZ
metolazone
metoprolol ER
metoprolol tablet
metoprolol-HCTZ
minoxidil tablet
moexipril
nadolol
nicardipine capsule
nifedipine
nifedipine ER
nimodipine
nisoldipine
olmesartan
olmesartan-HCTZ
olmesartan-amlodipine-HCTZ
perindopril
phenoxybenzamine
pindolol
prazosin
propranolol tablet, solution
propranolol ER
propranolol-HCTZ
quinapril
quinapril-HCTZ
ramipril
Sorine
sotalol
sotalol AF
spironolactone
spironolactone-HCTZ
Taztia XT
Tekturna HCT
telmisartan
telmisartan-amlodipine
telmisartan-HCTZ
terazosin

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)
- Tiadylt ER
- timolol tablet
- torsemide
- trandolapril
- trandolapril-verapamil ER
- triamterene
- triamterene-HCTZ
- valsartan
- valsartan-HCTZ
- Vecamyl
- verapamil capsule pellet, tablet
- verapamil ER
- verapamil ER PM
- verapamil SR

Blood Thinner Related
- aspirin-dipyridamole ER
- Brilinta
- cilostazol
- clopidogrel
- dipyridamole tablet
- Eliquis
- Jantoven
- prasugrel
- warfarin
- Xarelto

Cholesterol Related
- amlodipine-atorvastatin
- atorvastatin
- cholestryamine
- cholestryamine light
- colesevelam
- colestipol
- ezetimibe
- ezetimibe-simvastatin
- fenofibrate
- fenofibric acid
- fluvastatin
- fluvastatin ER
- gemfibrozil
- lovastatin
- niacin 500mg tablet
- niacin ER tablet
- Niacor
- omega-3 acid ethyl esters
- pravastatin
- Prevalite
- rosuvastatin
- simvastatin
- Vascepa
- metformin
- metformin ER 500 mg, 750 mg tablet
- miglitol
- nateglinide
- Onglyza
- Ozempic
- pioglitazone
- pioglitazone-glimepiride
- pioglitazone-metformin
- QTERN
- repaglinide
- Rybelsus
- Segluromet
- Soliqua
- Steglatro
- SymlinPen
- Synjardy
- Synjardy XR
- Tresiba
- Trijardy XR
- Trulicity
- Victoza
- Xigduo XR
- Xultophy

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
- Basaglar
- Bydureon
- Byetta
- Diabetic Supplies (i.e. lancets, syringes, urine test, alcohol pads)
- Farxiga
- glimepiride
- glipizide
- glipizide ER
- glipizide XL
- glipizide-metformin
- glyburide
- glyburide micronized
- glyburide-metformin
- Glyxambi
- Humalog
- Humulin
- Invokamet
- Invokamet XR
- Invokana
- Janumet
- Janumet XR
- Januvia
- Jardiance
- Levemir

Osteoporosis Related
- alendronate
- calcitonin-salmon Forteo
- ibandronate tablet
- raloxifene
- risedronate
- risedronate DR
- Tymlos

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.

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.
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, and 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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All Cigna products and services are provided exclusively by or through operating subsidiaries of Cigna Corporation, including Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, Cigna Behavioral Health, Inc., Cigna Health Management, Inc., and HMO or service company subsidiaries of Cigna Health Corporation and Cigna Dental Health, Inc. The Cigna name, logos, and other Cigna marks are owned by Cigna Intellectual Property, Inc. ATTENTION: If you speak languages other than English, 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). ATENCIÓN: Si usted habla un idioma que no sea inglés, tiene a su disposición servicios gratuitos de asistencia lingüística. 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).
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 LƯU Ý: Quý vị có thể sử dụng dịch vụ hỗ trợ ngôn ngữ, miễn phí. Đối với khách hàng hiện tại của Cigna, vui lòng gọi số ở mặt sau thẻ. Đối với khách hàng khác, vui lòng gọi 1.800.244.6224 (TTY: 请拨打 711)。

Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 현재 Cigna 가입자님들께서는 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).


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。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).


Persian (Farsi) – توجه: خدمات کمک زبانی، به صورت رایگان به شما ارائه می‌شود. برای مشتریان فعال Cigna، لطفاً با شماره‌های کد در پشت کارت شناسایی شماست تماس بگیرید. در غیر اینصورت با شماره 1.800.244.6224 تماس بگیرید (شماره تلفن ویژه ناشنوایان: شماره 711 را شماره‌گیری کنید).