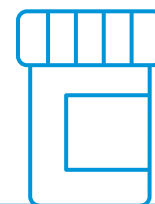


Blue Shield Plus Drug Formulary

Value-Based Tier Drugs



Select Blue Shield pharmacy plans have a Value-Based Tier Drug benefit¹

Value-Based Tier Drugs are specific preventive drugs taken when risk factors are present for a disease that has not manifested (or is asymptomatic), or to prevent the occurrence of a disease from which an individual has recovered.

Value-Based Tier Drugs are select generic and brand-name drugs that are FDA-approved for high blood pressure, high cholesterol, diabetes, and asthma. These drugs are covered at no charge, or at an otherwise reduced member cost share.

The following is a list of Value-Based Tier Drugs² used to treat these select chronic conditions. This list is current as of the date printed below and is subject to change.

To access the Blue Shield Plus Drug Formulary, visit blueshieldca.com/pharmacy.

Asthma	Flovent	Symbicort
Anti-asthmatics	fluticasone-salmeterol	Striverdi Respimat
Advair Diskus	formoterol fumarate	terbutaline
Advair HFA	Incruse Ellipta	Theo-24
albuterol	ipratropium-albuterol	theophylline
Anoro Ellipta	ipratropium-bromide	theophylline er
arformoterol tartrate	levalbuterol	Trelegy Ellipta
Arnuity Ellipta	metaproterenol	wixela inhub
Atrovent HFA	montelukast	zafirlukast
Breo Ellipta	Pulmicort-Flexhaler	Asthma supplies
budesonide	Qvar Redihaler	Aerochamber
Combivent	Serevent Diskus	OptiChamber
cromolyn inhaler	Spiriva	

High cholesterol	fenofibrate	niacin er
Dyslipidemics	fenofibrate-micronized	omega-3 acid ethyl esters
atorvastatin	fenofibric acid	pravastatin
cholestyramine	fenofibric acid (choline)	prevalite
colesevelam	fluvastatin	rosuvastatin
colestipol	fluvastatin er	simvastatin
ezetimibe	gemfibrozil	
ezetimibe-simvastatin	lovastatin	

High blood pressure	losartan-hctz	propranolol
Ace inhibitors	methyldopa	timolol maleate (oral)
benazepril	methyldopa-hctz	Calcium channel blockers
captopril	metoprolol-hctz	Afeditab CR
enalapril	minoxidil	amlodipine
fosinopril	olmesartan	Cartia XT
lisinopril	olmesartan-amlodipine-hctz	diltiazem
moexipril	olmesartan-hctz	diltiazem er
perindopril	prazosin	felodipine er
quinapril	propranolol-hctz	isradipine
ramipril	quinapril-hctz	Matzim LA
Anti-hypertensives	telmisartan	nicardipine
aliskiren	telmisartan-amlodipine	nifedipine
amlodipine-atorvastatin	telmisartan-hctz	nifedipine er
amlodipine-benazepril	terazosin	Taztia XT
amlodipine-olmesartan	trandolapril	Tiadyt ER
amlodipine-valsartan	trandolapril-verapamil er	verapamil
amlodipine-valsartan-hctz	valsartan	verapamil er
atenolol-chlorthalidone	valsartan-hctz	Diuretics
benazepril-hctz	Beta-blockers	amiloride
bisoprolol-hctz	acebutolol	amiloride-hctz
candesartan	atenolol	chlorothiazide
captopril-hctz	betaxolol	chlorthalidone
clonidine	bisoprolol	eplerenone
doxazosin	carvedilol	hydrochlorothiazide
enalapril-hctz	carvedilol er	indapamide
fosinopril-hctz	labetalol	methylclothiazide
guanfacine	metoprolol succinate	metolazone
hydralazine	metoprolol tartrate	spironolactone
irbesartan	nadolol	spironolactone-hctz
irbesartan-hctz	nadolol-bendroflumethiazide	triamterene
lisinopril-hctz	nebivolol	triamterene-hctz
losartan	pindolol	

Diabetes		
Anti-diabetic drugs	Humulin vial	Rybelsus
	insulin lispro 100u/ml vial & pen	Synjardy/Synjardy XR
acarbose	Janumet/Janumet XR	Toujeo Solostar
Actoplus Met XR	Januvia	tolazamide
alogliptin	Jardiance	tolbutamide
alogliptin-metformin	Lantus vial & pen	Tresiba
alogliptin-pioglitazone	Levemir	Trulicity
chlorpropamide	Lyumjev	Victoza
Farxiga	metformin, metformin er ³	Xigduo XR
glimepiride	miglitol	Diabetic supplies
glipizide/glipizide er	nateglinide	Accu-chek test strips
glipizide-metformin	Ozempic	Insulin syringes and needles
glyburide	pioglitazone	Lancets
glyburide-metformin	pioglitazone-metformin	
Glyxambi	repaglinide	
Humalog vial & pen	repaglinide-metformin	

Blue Shield of California is an independent member of the Blue Shield Association. A52403 (8/22)

Last updated August 2022

1. Refer to your *Evidence of Coverage* or Certificate of Insurance to determine if you have a Value-Based Tier Drug benefit.
2. Generic drugs begin with lowercase letters and brand-name drugs begin with capital letters. In addition, this list does not include all the drugs that are included in your outpatient prescription drug benefit. Some strengths or dosage forms may not be covered. Combination products of drugs on this list may also be included.
3. Generic Glucophage XR only.