High-Deductible Health Plans (HDHP) Preventive Drug List for Blue Shield Drug Standard Formulary

This is a list of preventive medications that may be covered under your plan as allowed by federal regulations. If your plan covers these medications, your insurance benefit is applied before you meet your deductible.

HDHP Preventive 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.

If you have any questions about this pharmacy benefit, please check your *Evidence of Coverage* or *Certificate of Insurance*/Policy for specific plan information or call the customer service number on your Blue Shield member ID card. To access the Blue Shield Drug Standard formulary, visit **blueshieldca.com/formulary**.

| ASTHMA |
|-------------------------|
| Inhaled corticosteroids |
| Advair HFA |
| Breo Ellipta |
| budesonide |
| Flovent |
| fluticasone-salmeterol |
| Qvar RediHaler |
| Symbicort |
| wixela inhub |
| Inhaler supplies |
| Aerochamber |
| OptiChamber |

| DIABETES |
|------------------------|
| Antidiabetic drugs |
| acarbose |
| Farxiga |
| glimepiride |
| glipizide/glipizide er |
| glipizide-metformin |
| glyburide |
| glyburide micronized |
| glyburide-metformin |
| Glyxambi |
| Humalog vial and pen |
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| Humulin vial |
|---|
| insulin lispro 100u/ml vial and pen |
| Janumet/Janumet XR |
| Januvia |
| Jardiance |
| Lantus vial and pen |
| Lyumjev |
| metformin |
| metformin er (generic Glucophage XR) |
| nateglinide |
| Ozempic |
| pioglitazone |
| pioglitazone-metformin |
| repaglinide |
| repaglinide-metformin |
| Rybelsus |
| Synjardy/Synjardy XR |
| Toujeo Solostar |
| Tresiba |
| Trulicity |
| Victoza |
| Xigduo XR |
| Diabetic supplies |
| Accu-Chek test strips |
| Insulin syringes and needles |
| Lancets |
| |

| HEART DISEASE |
|------------------------|
| ACE inhibitors |
| benazepril |
| captopril |
| enalapril |
| fosinopril |
| lisinopril |
| perindopril |
| quinapril |
| ramipril |
| trandolapril |
| Beta-blockers |
| acebutolol |
| atenolol |
| betaxolol |
| bisoprolol |
| Bystolic |
| carvedilol |
| labetalol |
| metoprolol succinate |
| metoprolol tartrate |
| nadolol |
| propranolol |
| timolol maleate (oral) |
| Statins |
| atorvastatin |
| fluvastatin |
| lovastatin |
| pravastatin |
| rosuvastatin |
| simvastatin |

Some strengths or dosage forms may not be covered. Combination products of drugs on this list may also be included. Generic name drugs are identified in all lower case; brand-name drugs begin with a capital letter.

This list is effective January 2022 and is subject to change. Last updated September 2021.

