

Blue Shield Performance Drug Formulary

Value-based tier drugs

Select Blue Shield pharmacy plans have a value-based tier drug benefit.¹

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 Performance Drug Formulary*, visit blueshieldca.com/pharmacy.

Asthma		
Anti-asthmatics		
Advair Diskus		
Advair HFA		
albuterol		
Anoro Ellipta		
arformoterol tartrate		
Asmanex/Asmanex HFA		
Breo Ellipta		
Breyna		
budesonide		
budesonide-formoterol		
Incruse Ellipta		
ipratropium-albuterol		
ipratropium-bromide		
ipratropium bromide HFA		
levalbuterol		
montelukast		
Qvar Redihaler		
Spiriva Respimat		
Striverdi Respimat		
Symbicort		
theophylline		
theophylline er		
Trelegy Ellipta		
zafirlukast		
Asthma supplies		
Spacer		
Diabetes		
Anti-diabetic drugs		
acarbose		
dapagliflozin		
dapagliflozin-base-metformin er		
Fiasp		
glimepiride		
glipizide/glipizide er		
glipizide-metformin		
glyburide		
glyburide micronized		
glyburide-metformin		
Glyxambi		
Humulin R (concentrate) vial		
Humulin R KwikPen		
insulin glargine-yfgn (Civica NDC only)		
Janumet/Janumet XR		
Januvia		
Jardiance		
Levemir		
Lyumjev		
metformin		
metformin er ³		
Mounjaro		
nateglinide		
Novolin		
Novolog		
Ozempic		
pioglitazone		
pioglitazone-metformin		
repaglinide		
Rybelsus		
sitagliptin phosphate		
sitagliptin phosphate-metformin		
sitagliptin phosphate-metformin er		
Synjardy/Synjardy XR		
Toujeo Solostar		
Tresiba		
Trijardy XR		
Trulicity		
Diabetic supplies		
Accu-Chek test strips		
Accu-Chek meters		
Insulin syringes and needles		
Lancets		
High blood pressure		
Ace inhibitors		
benazepril		
captopril		
enalapril		
fosinopril		
isradipine		
lisinopril		
moexipril		
nisoldipine		
perindopril		
quinapril		
ramipril		
trandolapril		
Anti-hypertensives		
amlodipine-atorvastatin		
amlodipine-benazepril		
amlodipine-olmesartan		
amlodipine-valsartan		
amlodipine-valsartan-hctz		

atenolol-chlorthalidone
benazepril-hctz
bisoprolol-hctz
candesartan
candesartan-cilexetil
candesartan-cilexetil-hctz
captopril-hctz
clonidine
doxazosin
enalapril-hctz
fosinopril-hctz
guanfacine
hydralazine
irbesartan
irbesartan-hctz
lisinopril-hctz
losartan
losartan-hctz
methyldopa
methyldopa-hctz
minoxidil
olmesartan
olmesartan-amlodipine-hctz
prazosin
propranolol-hctz
quinapril-hctz
telmisartan
telmisartan-amlodipine
telmisartan-hctz
terazosin
valsartan tablet
valsartan-hctz

Beta-blockers
acebutolol
atenolol
betaxolol
bisoprolol
carvedilol
labetalol
metoprolol succinate
metoprolol tartrate
nadolol
nebivolol
pindolol
propranolol
propranolol er
timolol maleate (oral)
Calcium channel blockers
amlodipine
Cartia XT
diltiazem
diltiazem er
felodipine er
Matzim LA
nicardipine
nifedipine
nifedipine er
Taztia XT
Tiadyt ER
verapamil
verapamil er
Diuretics
amiloride
amiloride-hctz

chlorothiazide
chlorthalidone
eplerenone
hydrochlorothiazide
indapamide
metolazone
spironolactone
spironolactone-hctz
triamterene-hctz
High cholesterol
Dyslipidemics
atorvastatin
cholestyramine
colesevelam
colestipol
ezetimibe
ezetimibe-simvastatin
fenofibrate ²
fenofibrate-micronized ²
fenofibric acid (choline)
fluvastatin
gemfibrozil
lovastatin
niacin
niacin er
omega-3 acid ethyl esters
pravastatin
prevalite
rosuvastatin
simvastatin

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.

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