



## 2016 Preventive Drug List

If your health plan includes the Preventive Drug List option, you just pay a copay for preventive care medications instead of having to meet your plan’s deductible for certain prescription drugs. Prescription drugs on the Preventive Drug List will be covered as if you already met your deductible, so you are only responsible for paying the appropriate copay. This enhanced benefit to your health plan makes it easier for you to purchase the medications you and your family need to stay healthy today – and tomorrow.

Medications on the Preventive Drug List help prevent and manage several health concerns.

Some of these conditions, if not prevented or managed, can lead to serious illnesses and complications. Following your doctor’s treatment plan, including taking prescribed medications as directed, can help you live a healthier life today, and avoid a serious illness and high health care costs in the future.

*This list contains some of the most commonly prescribed preventive care drugs and is not all-inclusive. This list does not guarantee coverage for preventive care drugs that are not listed.*

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
<b>Asthma and Other Respiratory Conditions</b>		
albuterol soln	Advair Diskus	
budesonide nebulizer soln	Advair HFA	
cromolyn sodium	Anoro Ellipta	
ipratropium bromide inhaler	Arcapta Neohaler	
ipratropium-albuterol	Arnuity Ellipta	
levalbuterol	Asmanex	
metaproterenol sulfate	Asmanex HFA	
montelukast	Breo Ellipta	
terbutaline sulfate	Brovana	
zafirlukast	Combivent Respimat	
	Dulera	
	Flovent Diskus	
	Flovent HFA	
	Foradil	
	Perforomist	
	ProAir HFA	
	ProAir Respiclick	
	QVAR	
	Serevent Diskus	
	Spiriva	
	Spiriva Respimat	
	Symbicort	
	Tudorza Pressair	

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
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**Conditions Related to Blood Clots**

anagrelide	Brilinta	Coumadin
aspirin/dipyridamole	Effient	Fragmin <b>QL</b>
cilostazol	Eliquis	
clopidogrel	Pradaxa	
dipyridamole	Xarelto	
enoxaparin <b>QL</b>		
fondaparinux <b>QL</b>		
Jantoven		
pentoxifylline		
ticlopidine		
warfarin sodium		

**Contraception**

Altavera		
Alyacen		
Amethia		
Amethia Lo		
Amethyst		
Apri		
Aranelle		
Ashlyna		
Aubra		
Aviane		
Azurette		
Balziva		
Bekyree		
Blisovi 24 FE		
Blisovi FE		
Briellyn		
Camila		
Camrese		
Camrese Lo		
Caziant		
Chateal		
Cryselle		
Cyclafem		
Cyclafem 7/7/7		
Cyred		
Dasetta		
Daysee		
Deblitane		
Delyla		
desogestrel-ethinyl estradiol		
drospirenone-ethinyl estradiol		
Elinest		

<b>Covered Generics (always your lowest copay)</b>	<b>Preferred Covered Brands (may have a reduced copay)</b>	<b>Non-Preferred Covered Brands (always your highest copay)</b>
Emoquette		
Enskyce		
Enpresse		
Errin		
Estarylla		
Falmina		
Gianvi		
Gildagia		
Gildess		
Gildess FE		
Gildess 24 FE		
Heather		
Introvale		
Jencycla		
Jolessa		
Jolivette		
Juleber		
Junel 1.5/30		
Junel 1/20		
Junel FE 1.5/30		
Junel FE 1/20		
Junel FE 24		
Kariva		
Kelnor 1/35		
Kimidess		
Kurveo		
Larin		
Larin FE		
Larin 24 FE		
Layolis		
Leena		
Lessina		
Levonest		
levonorgestrel-est estradiol		
Levora		
Lomedia 24 Fe		
Loryna		
Low-Ogestrel		
Lutera		
Lyza		
Marlissa		
medroxyprogesterone acetate		
Microgestin 1.5/30		
Microgestin 1/20		
Microgestin FE 1.5/30		

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
Microgestin FE 1/20		
Mono-Linyah		
Mononessa		
Myzilra		
Necon 0.5/35		
Necon 1/35		
Necon 1/50		
Necon 7/7/7		
Nikki		
Nora-Be		
norethindrone acetate 0.35		
norgestimate-ethinyl estradiol		
Norlyroc		
Nortrel 0.5/35		
Nortrel 1/35		
Nortrel 7/7/7		
Ocella		
Ogestrel		
Orsythia		
Philith		
Pimtrea		
Pirmella		
Portia		
Previfem		
Quasense		
Reclipsen		
Setlakin		
Sharobel		
Sprintec		
Sronyx		
Syeda		
Tarina FE		
Tilia FE		
Tri-Estarylla		
Tri-Legest FE		
Tri-Linyah		
Trinessa		
Tri-Previfem		
Tri-Sprintec		
Trivora		
Velivet		
Vestura		
Viorele		
Vyfemia		
Wera		

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
Wymzya FE		
Xulane		
Zarah		
Zenchent		
Zenchent FE		
Zeosa		
Zovia 1/35		
Zovia 1/50		

### Diabetes

acarbose	Bydureon (pens & vials)	Actoplus Met XR
chlorpropamide	Byetta	Afrezza
glimepiride	Farxiga	Apidra <b>ST</b>
glipizide	Glyxambi	Apidra SoloSTAR <b>ST</b>
glipizide ext-rel	Invokana	Avandamet
glipizide-metformin	Janumet	Avandaryl
glyburide	Janumet XR	Avandia
glyburide micronized	Januvia	Glyset
glyburide-metformin	Jentadueto	Humalog (pens & vials) <b>ST</b>
Lantus (vials)	Invokamet	Humulin (pens & vials) <b>ST</b>
Levemir (vials)	Lantus SoloSTAR	Prandimet
metformin	Levemir (pens)	Riomet
metformin ext-rel	Toujeo SoloStar	SymLinPen
nateglinide	Tradjenta	
Novolin (vials)	Victoza	
Novolog (vials)	Xigduo XR	
pioglitazone		
pioglitazone-glimepiride		
pioglitazone-metformin		
repaglinide		
repaglinide- metformin		
tolazamide		
tolbutamide		

### Diabetic Supplies

	Bayer Contour/Breeze2 diabetic products <b>QL</b>	
	Lifescan One Touch diabetic products <b>QL</b>	
	alcohol preps and lancets <b>QL</b>	
	BD insulin syringes <b>QL</b>	

### Emotional Health

amitriptyline	Latuda <b>PA</b>	
amitriptyline-chlordiazepoxide	Seroquel XR <b>PA</b>	
amitriptyline-perphenazine		
amoxapine		
aripiprazole <b>PA</b>		
bupropion		
bupropion ext-rel		

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
chlorpromazine		
citalopram		
clomipramine		
clozapine <b>PA</b>		
desipramine		
doxepin		
duloxetine		
escitalopram		
fluoxetine		
fluphenazine		
fluvoxamine		
haloperidol		
imipramine		
loxapine		
maprotiline		
mirtazapine		
nefazodone		
nortriptyline		
olanzapine <b>PA</b>		
olanzapine-fluoxetine <b>PA</b>		
paliperidone ER		
paroxetine		
paroxetine ext-rel		
perphenazine		
phenelzine		
pimozide		
protriptyline		
quetiapine <b>PA</b>		
risperidone <b>PA</b>		
sertraline		
thioridazine		
thiothixene		
tranylcypromine		
trazodone		
trifluoperazine		
venlafaxine		
venlafaxine ext-rel		
ziprasidone <b>PA</b>		

### High Blood Pressure & Other Heart Conditions

acebutolol	Azor	
acetazolamide	Benicar	
Afeditab CR	Benicar HCT	
amiloride	Bystolic	
amiloride-hctz	Coreg CR	
amiodarone	Lanoxin	

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
amlodipine	Tribenzor	
amlodipine-atorvastatin		
amlodipine-benazepril		
atenolol		
atenolol-chlorthalidone		
benazepril		
benazepril-hctz		
betaxolol		
bisoprolol fumarate		
bisoprolol-hctz		
bumetanide		
candesartan		
candesartan-hctz		
captopril		
captopril-hctz		
Cartia XT		
carvedilol		
chlorothiazide		
chlorthalidone		
clonidine tablets		
Clorpres		
digoxin		
diltiazem		
diltiazem 24 HR CD		
diltiazem ext-rel		
Dilt-XR		
disopyramide phosphate		
doxazosin		
enalapril		
enalapril-hctz		
eplerenone		
eprosartan		
felodipine ext-rel		
flecainide acetate		
fosinopril		
fosinopril-hctz		
furosemide		
guanfacine		
hydralazine		
hydrochlorothiazide		
indapamide		
irbesartan		
irbesartan-hctz		
isosorbide dinitrate/mononitrate		
isradipine		

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
K-effervescent		
Klor-Con EF		
Klor-Con M		
Klor-Con 8mEq		
Klor-Con 10mEq		
Klor-Con 20mEq		
labetalol		
lisinopril		
lisinopril-hctz		
losartan		
losartan-hctz		
Matzim LA		
methazolamide		
methyclothiazide		
methyldopa		
methyldopa-hctz		
metolazone		
metoprolol succinate ext-rel		
metoprolol tartrate		
metoprolol-hctz		
mexiletine		
minoxidil		
moexipril		
moexipril-hctz		
nadolol		
nadolol-bendroflumethiazide		
nicardipine		
Nifediac CC		
Nifedical XL		
nifedipine ext-rel		
nimodipine		
nisoldipine ext-rel		
NitroBid		
nitroglycerin		
Nitro-Time		
Pacerone		
perindopril		
pindolol		
potassium bicarbonate		
potassium chloride		
prazosin		
propafenone		
propranolol		
propranolol ext-rel		
propranolol-hctz		



<b>Covered Generics (always your lowest copay)</b>	<b>Preferred Covered Brands (may have a reduced copay)</b>	<b>Non-Preferred Covered Brands (always your highest copay)</b>
quinapril		
quinapril-hctz		
quinidine gluconate		
quinidine sulfate		
ramipril		
reserpine		
Sorine		
sotalol		
sotalol AF		
spironolactone		
spironolactone-hctz		
Taztia XT		
telmisartan		
telmisartan-amlodipine		
telmisartan-hctz		
terazosin		
timolol maleate		
toremide		
trandolapril		
trandolapril-verapamil ext-rel		
triamterene-hctz		
valsartan		
valsartan-hctz		
verapamil		
verapamil ER PM		
verapamil ext-rel		

### High Cholesterol

atorvastatin	Crestor	
cholestyramine	Simcor	
colestipol	Vytorin	
fenofibrate	Zetia	
fenofibric acid		
fluvastatin		
gemfibrozil		
lovastatin		
niacin		
niacin ext-rel		
pravastatin		
Prevalite		
simvastatin		

### Multiple Sclerosis

Glatopa <b>SPRx</b>	Ampyra <b>PA SPRx</b>	
	Avonex <b>SPRx</b>	
	Copaxone <b>SPRx</b>	

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
	Gilenya <b>PA SPRX</b>	
	Rebif <b>SPRx</b>	
	Rebif Rebidose <b>SPRx</b>	
	Tecfidera <b>PA SPRx</b>	

### Osteoporosis (a done disease)

alendronate	Miacalcin injection	Fosamax Plus D
calcitonin-salmon nasal spray		
Fortical		
ibandronate		
raloxifene		
risedronate		

### Prenatal Care (Vitamins)

all generic vitamins		
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### Seizure Conditions

carbamazepine	Dilantin	Banzel
carbamazepine ER	Qudexy XR	Celontin
clonazepam	Oxtellar XR	Diastat
divalproex delayed-rel	Trokendi XR	Onfi
divalproex ext-rel	Vimpat	Peganone
Epitol		Potiga
ethosuximide		Sabril <b>SPRx</b>
felbamate		Stavzor
gabapentin		
lamotrigine		
lamotrigine ext-rel		
lamotrigine ODT		
levetiracetam		
levetiracetam ext-rel		
oxcarbazepine		
phenobarbital		
phenytoin sodium extended		
primidone		
tiagabine		
Topiragen		
topiramate		
valproic acid		
zonisamide		

### Thyroid Modifiers

levothyroxine		
Levoxyl		
liothyronine		
methimazole		
Nature-Thyroid		
NP Thyroid		
propylthiouracil		

Covered Generics (always your lowest copay)	Preferred Covered Brands (may have a reduced copay)	Non-Preferred Covered Brands (always your highest copay)
Unithroid		
Westhroid		

## Legend

PA – This drug requires prior authorization.

ST – Requires other selected drugs to be tried first.

QL – This drug has quantity limits on amount covered.

SPRx – Specialty drug. Many plans require you to get this type of drug from a preferred Specialty Pharmacy.

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**This list is subject to change throughout the year. Please call Member Service at the phone number listed on your BlueCross BlueShield of Tennessee member ID card or visit our website at [bcbst.com](http://bcbst.com) for the most up-to-date information.**

Tagalog: Kung kailangan ninyo ang tulong sa Tagalog tumawag sa 1-800-565-9140

Chinese: 如果需要中文的帮助, 请拨打这个号码 1-800-565-9140

Navajo: Dinek'ehgo shika at'ohwol ninisingo, kwijigo holne' 1-800-565-9140

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