

Preventive Medication Program

Small Group
Plans

Generics and Brands Drug List
Coverage as of January 1, 2025

Your plan's Preventive Medication Program includes generic and brand-name medications. Preventive medications are used to keep certain conditions from developing or from coming back.

About this drug list

This is a list of the most commonly prescribed preventive medications as of January 1, 2025.

Here's some helpful information about this drug list:

- Medications are listed alphabetically by condition.
- Generics are listed in all lowercase letters and brand-name medications are listed in all capital letters. Most brands that have a generic equivalent aren't part of the preventive medication program.
- **This drug list doesn't include preventive medications that are covered at no cost-share (\$0) under the Patient Protection and Affordable Care Act (PPACA)'s preventive services coverage requirement.**
- **This drug list is updated often, so it isn't a full list of preventive generic and brand-name medications.** Also, your plan's preventive medication program may not include all of these medications and/or conditions. Log in to the **myCigna® App**¹ or **myCigna.com**[®], or check your plan materials, to see what's included in your plan's program.

Your cost-share for preventive medications

Not all plans offer the same cost-share for their preventive medication program. For example, some plans may require you to pay a copay, coinsurance and/or deductible for preventive medications; other plans may not.

Log in to the **myCigna App** or **myCigna.com** and use the Price a Medication tool to see how much your medication costs.²

Go generic and save



Ask your doctor if a preventive generic medication may be right for you. Generics work in the same way and provide the same clinical benefit as their brand-name versions, but often cost much less – in some cases, up to 85% less.³

Preventive Medication Program Drug List

Some plans may not include all of these medications and/or conditions in their preventive medication program.

Log in to the **myCigna App** or **myCigna.com** or check your plan materials to see which medications your plan includes in the program and how much they cost.

Anxiety/Depression/ Bipolar Disorder

citalopram oral solution, tablet
escitalopram
fluoxetine
fluoxetine dr
fluvoxamine
fluvoxamine er
paroxetine
sertraline oral concentrate, tablet

Asthma Related

acetylcysteine 10%, 20% vial
albuterol
albuterol hfa
ALVESCO
ANORO ELLIPTA
arformoterol
ARNUIITY ELLIPTA
ASMANEX HFA
ASMANEX TWISTHALER
BREO ELLIPTA
breyna
budesonide nebulizer suspension
budesonide-formoterol
cromolyn nebulizer solution
DULERA
fluticasone-salmeterol 100-50, 250-50, 500-50
formoterol
INCRUSE ELLIPTA
INHALER AND NEBULIZER ASSISTIVE DEVICE

ipratropium inhalation solution
ipratropium-albuterol
levalbuterol concentrate, inhalation solution
LEVALBUTEROL HFA
montelukast
PEAK FLOW METER
QVAR REDIHALER
roflumilast
STRIVERDI RESPIMAT
terbutaline tablet
theophylline
theophylline er
TRELEGY ELLIPTA
wixela inhub
XOLAIR
zafirlukast
zileuton er

Blood Pressure Related

acebutolol
amlodipine
amlodipine-benazepril
amlodipine-olmesartan
amlodipine-valsartan
amlodipine-valsartan-hctz
atenolol
atenolol-chlorthalidone
benazepril
benazepril-hctz
betaxolol tablet
bisoprolol
bisoprolol-hctz

candesartan
candesartan-hctz
captopril
captopril-hctz
cartia xt
chlorthalidone
dilt xr
diltiazem tablet
diltiazem 12hr er
diltiazem 24hr er
diltiazem 24hr er (cd)
diltiazem 24hr er (la)
diltiazem 24hr er (xr)
enalapril
enalapril-hctz
eprosartan
felodipine er
fosinopril
fosinopril-hctz
hydrochlorothiazide
indapamide
irbesartan
irbesartan-hctz
isradipine
lisinopril
lisinopril-hctz
losartan
losartan-hctz
matzim la
metolazone
metoprolol tablet
metoprolol er
metoprolol-hctz

Blood Pressure Related *(Cont.)*

moexipril
nadolol
nicardipine capsule
nifedipine
nifedipine er
nisoldipine er
olmesartan
olmesartan-amlodipine-hctz
olmesartan-hctz
perindopril
pindolol
propranolol oral solution, tablet
propranolol er
propranolol-hctz
quinapril
quinapril-hctz
ramipril
taztia xt
telmisartan
telmisartan-amlodipine
telmisartan-hctz
tiadylt er
timolol tablet
trandolapril
trandolapril-verapamil er
valsartan tablet
valsartan-hctz
verapamil tablet
verapamil er
verapamil er pm
verapamil sr

Blood Thinner Related

adult aspirin regimen
aspirin
aspirin ec
aspirin regimen
aspirin-dipyridamole er

BAYER CHEWABLE ASPIRIN
BRILINTA
children's aspirin
clopidogrel
dabigatran
dipyridamole tablet
ecotrin
ELIQUIS
jantoven
low dose aspirin ec
PRADAXA IIO MG
prasugrel
SAVAYSA
st. joseph aspirin
st. joseph aspirin ec
warfarin
XARELTO

Bowel Prep Products for Colorectal Cancer Screenings

gavilyte-c
gavilyte-g
gavilyte-n
OSMOPREP
peg 3350-electrolyte
peg3350-sodium sulfate-sodium
chloride-potassium chloride
sodium ascorbate-ascorbic acid
peg-prep
sodium sulfate-potassium sulfate-
magnesium sulfate

Cholesterol Related

amlodipine-atorvastatin
atorvastatin
cholestyramine
cholestyramine light
colesevelam
colestipol
ezetimibe

ezetimibe-simvastatin
fenofibrate capsule, tablet
fenofibric acid
fluvastatin
fluvastatin er
gemfibrozil
icosapent ethyl
lovastatin
niacin er
pravastatin
prevalite
REPATHA
rosuvastatin
simvastatin

Diabetes Related

IST TIER UNIFINE PENTIP
IST TIER UNIFINE PENTIP PLUS
acarbose
ADVOCATE PEN NEEDLE
ADVOCATE SYRINGE
APIDRA
APIDRA SOLOSTAR
AUTOSOFT 30 INFUSION SET PACK
AUTOSOFT XC INFUSION SET PACK
BASAGLAR
BD LUER-LOK SYRINGE
BYDUREON BCISE
BYETTA
CYCLOSET
DEXCOM G6 RECEIVER, SENSOR,
TRANSMITTER
DEXCOM G7 RECEIVER, SENSOR
diabetic needle
diabetic syringe
EASY COMFORT PEN NEEDLE
EASY TOUCH UNI-SLIP SYRINGE
FARXIGA
FREESTYLE LIBRE I4 DAY READER,
SENSOR

Diabetes Related (Cont.)

FREESTYLE LIBRE 2 READER, SENSOR
FREESTYLE LIBRE 3 READER, SENSOR
glimepiride
glipizide 5 mg, 10 mg tablet
glipizide er
glipizide xl
glipizide-metformin
GLUCOMETER
glyburide
glyburide micronized
glyburide-metformin
HUMALOG
HUMULIN 70-30
HUMULIN N
HUMULIN R
ILET INFUSION KIT-INSET
ILET INFUSION-CONTACT DETACH
INPEN (FOR FIASP, HUMALOG OR
NOVOLOG)
insulin administrative supplies
INSULIN ASPART
INSULIN LISPRO
INSULIN PUMP SUPPLIES
insulin pump syringe
JANUMET
JANUMET XR
JANUVIA
JARDIANCE
JENTADUETO
JENTADUETO XR
lancing device/lancets
MAGELLAN INSULIN SAFETY
SYRINGE
metformin
metformin er
miglitol
MISC. DIABETES SUPPLIES (e.g.
control solution, sensors,
transmitters)

MONOJECT INSULIN SAFETY
SYRINGE
nateglinide
NOVOLOG
OMNIPOD 5 DEXG7G6 INTRO (GEN 5)
OMNIPOD 5 DEXG7G6 PODS (GEN 5)
OMNIPOD 5 G6-G7 INTRO KIT (GEN5)
OMNIPOD 5 G6-G7 PODS (GEN 5)
OMNIPOD CLASSIC PDM KIT (GEN 3)
OMNIPOD DASH INTRO KIT (GEN 4)
OMNIPOD GO PODS
ONETOUCH LANCET
pen needles
pioglitazone
pioglitazone-glimepiride
pioglitazone-metformin
repaglinide
saxagliptin
saxagliptin-metformin er
SURE-FINE PEN NEEDLE
SYMLINPEN
SYNJARDY
SYNJARDY XR
TANDEM MOBI AUTOSOFT 30
SUPPLY
TANDEM MOBI AUTOSOFT XC
SUPPLY
TANDEM MOBI TRUSTEEL SUPPLY
TEST STRIP
TRADJENTA
TRESIBA
TRULICITY
TRUSTEEL INFUSION SET PACK
urine diabetic test strip
XIGDUO XR

Malaria

atovaquone-proguanil
chloroquine

mefloquine
PRIMAQUINE

Migraine Prevention

EMGALITY PEN, SYRINGE

Miscellaneous Antivirals

BEYFORTUS
DESCOVY
emtricitabine-tenofovir 200 mg-
300 mg
PREVYMIS TABLET

Osteoporosis Related

alendronate
BINOSTO
DUAVEE
ibandronate tablet
raloxifene
risedronate
risedronate dr

Prenatal Vitamins

bal-care dha
BRAINSTRONG PRENATAL
classic prenatal
c-nate dha
complete natal dha
completenate
kpn
MINI PRENATAL
m-natal plus
mynatal
mynatal plus
mynatal-z
newgen
ONE A DAY WOMEN'S PRENATAL
DHA
one daily prenatal
ONE-A-DAY PRENATAL

Prenatal Vitamins (Cont.)

ONE-A-DAY PRENATAL-I
perry prenatal
pnv 29-I
pnv-dha + docusate
pnv-select
pr natal 400, 430
pr natal 400 ec, 430 ec
prenal true
prenaissance
prenaissance plus
prenatal
PRENATAL I9
prenatal complete
PRENATAL FORMULA-DHA
PRENATAL GUMMIES
PRENATAL MULTI
prenatal multi-dha
PRENATAL MULTIVITAMIN
PRENATAL MULTIVITAMIN-DHA
prenatal one daily
prenatal plus
PRENATAL PLUS VITAMIN-MINERAL
PRENATAL PLUS-DHA
prenatal vitamin
PRENATAL VITAMIN + DHA
prenatal vitamin plus low iron
preplus
pretab
R-NATAL OB
se-natal-I9
SIMILAC PRENATAL
STUART ONE
trinatal rx I
ULTRA PRENATAL PLUS DHA
VITAFOL-OB
wesnatal dha complete
wesnate dha
westab plus

Prescription Vitamins

DAVIMET WITH FLUORIDE
denta 5000 plus sensitive
FLORIVA
fluoride

FLUORIDEX
FLUORIDEX SENSITIVITY RELIEF
FLUORIMAX 5000
FLUORIMAX 5000 SENSITIVE
folic acid
ludent fluoride
multi-vitamin w-fluoride-iron
multivitamin-fluoride
multivitamin-iron-fluoride
sodium fluoride
sodium fluoride 5000 dry mouth
sodium fluoride enamel protect
sodium fluoride sensitive
sodium fluoride-potassium nitrate
tri-vitamin-fluoride
tri-vite-fluoride
vitamins a, c, d and fluoride

Quit Smoking Medications

bupropion sr 150 mg tablet
NICODERM CQ
NICORETTE
nicotine gum, lozenge, patch
NICOTROL
NICOTROL NS
quit 2
quit 4
stop smoking aid
varenicline

Vaccines

ABRYSVO
ACTHIB
ADACEL TDAP
AFLURIA
AREXVY
BEXSERO
BOOSTRIX TDAP
CAPVAXIVE
COMIRNATY
DAPTACEL DTAP
DIPHTHERIA-TETANUS TOXOIDS-PED
ENGERIX-B
FLUAD
FLUARIX
FLUBLOK

FLUCELVAX
FLULAVAL
FLUMIST
FLUZONE
FLUZONE HIGH-DOSE
GARDASIL 9
HAVRIX
HEPLISAV-B
HIBERIX
INFANRIX DTAP
IPOL
JANSSEN COVID
KINRIX
MENACTRA
MENQUADFI
MENVEO A-C-Y-W-I35-DIP
M-M-R II VACCINE
MODERNA COVID
MRESVIA
NOVAVAX COVID
PEDIARIX
PEDVAXHIB
PENBRAYA
PENTACEL
PFIZER COVID
PNEUMOVAX 23
PREHEVBRIO
PREVNAR 20
PRIORIX
PROQUAD
QUADRACEL DTAP-IPV
RECOMBIVAX HB
ROTARIX
ROTATEQ
SHINGRIX
SPIKEVAX COVID
TDVAX
TENIVAC
TRUMENBA
TWINRIX
VAQTA
VARIVAX
VAXELIS
VAXNEUVANCE



1. App/online store terms and mobile phone carrier/data charges apply. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com.
2. Prices shown on myCigna are not guaranteed and coverage is subject to your plan terms and conditions. Visit myCigna for more information.
3. U.S. Food and Drug Administration (FDA) website, "Generic Drugs: Questions and Answers." Last updated 03/16/21. [fda.gov/drugs/questions-answers/generic-drugs-questions-answers](https://www.fda.gov/drugs/questions-answers/generic-drugs-questions-answers).

Para obtener ayuda en español llame al número en su tarjeta de Cigna Healthcare.

Cigna Healthcare 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 Healthcare does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna Healthcare 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 Healthcare. 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 U.S. Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. 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.

Product availability may vary by location and plan type and is subject to change. All health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna Healthcare representative.

All Cigna Healthcare products and services are provided exclusively by or through operating subsidiaries of The Cigna Group.

Discrimination is against the law

Medical coverage

Cigna Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, gender identity or sexual orientation. Cigna Healthcare does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, gender identity or sexual orientation.

Cigna Healthcare:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact customer service at the toll-free number shown on your ID card, and ask a Customer Service Associate for assistance.



Cigna Healthcare products and services are provided exclusively by or through operating subsidiaries of The Cigna Group, including Cigna Health and Life Insurance Company, Connecticut General Life Insurance Company, Evernorth Behavioral Health, Inc, Evernorth Care Solutions, Inc, and HMO or service company subsidiaries of Cigna Health Corporation, including Cigna HealthCare of Arizona, Inc, Cigna HealthCare of California, Inc, Cigna HealthCare of Colorado, Inc, Cigna HealthCare of Connecticut, Inc, Cigna HealthCare of Florida, Inc, Cigna HealthCare of Georgia, Inc, Cigna HealthCare of Illinois, Inc, Cigna HealthCare of Indiana, Inc, Cigna HealthCare of St. Louis, Inc, Cigna HealthCare of North Carolina, Inc, Cigna HealthCare of New Jersey, Inc, Cigna HealthCare of South Carolina, Inc, Cigna HealthCare of Tennessee, Inc, and Cigna Health Care of Texas, 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). ATENCION: 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).

If you believe that Cigna Healthcare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by sending an email to **ACAGrievance@Cigna.com** or by writing to the following address:

Cigna Healthcare

Nondiscrimination Complaint Coordinator
P.O. Box 188016 Chattanooga, TN 37422

If you need assistance filing a written grievance, please call the number on the back of your ID card or send an email to **ACAGrievance@Cigna.com**. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, DC 20201
1.800.368.1019, 800.537.7697 (TDD)

Complaint forms are available at
<https://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html>

Proficiency of Language Assistance Services

English – ATTENTION: Language assistance services, free of charge, are available to you. For current Cigna Healthcare 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 Healthcare, 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 Healthcare 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 LỜI ỨNG: Quý vị được cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Dành cho khách hàng hiện tại của Cigna Healthcare, vui lòng gọi số ở mặt sau thẻ Hội viên. Các trường hợp khác xin gọi số 1.800.244.6224 (TTY: Quay số 711).

Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 현재 Cigna Healthcare 가입자님들께서는 ID 카드 뒷면에 있는 전화번호로 연락해주시십시오. 기타 다른 경우에는 1.800.244.6224 (TTY: 다이얼 711)번으로 전화해주시십시오.

Tagalog – PAUNAWA: Makakakuha ka ng mga serbisyo sa tulong sa wika nang libre. Para sa mga kasalukuyang customer ng Cigna Healthcare, tawagan ang numero sa likuran ng iyong ID card. O kaya, tumawag sa 1.800.244.6224 (TTY: I-dial ang 711).

Russian – ВНИМАНИЕ: вам могут предоставить бесплатные услуги перевода. Если вы уже участвуете в плане Cigna Healthcare, 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).

Arabic – برجاء الانتباه خدمات الترجمة المجانية متاحة لكم. لعملاء Cigna Healthcare الحاليين برجاء الاتصال بالرقم المدون علي ظهر بطاقتكم الشخصية. او اتص ب 1.800.244.6224 (TTY: اتصل ب 711).

French Creole – ATANSYON: Gen sèvis èd nan lang ki disponib gratis pou ou. Pou kliyan Cigna Healthcare yo, rele nimewo ki dèyè kat ID ou. Sinon, rele nimewo 1.800.244.6224 (TTY: Rele 711).

French – ATTENTION: Des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes un client actuel de Cigna Healthcare, veuillez appeler le numéro indiqué au verso de votre carte d'identité. Sinon, veuillez appeler le numéro 1.800.244.6224 (ATS : composez le numéro 711).

Portuguese – ATENÇÃO: Tem ao seu dispor serviços de assistência linguística, totalmente gratuitos. Para clientes Cigna Healthcare 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 Healthcare 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 Healthcare 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。その他の方は、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 Healthcare 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).

German – ACHTUNG: Die Leistungen der Sprachunterstützung stehen Ihnen kostenlos zur Verfügung. Wenn Sie gegenwärtiger Cigna Healthcare-Kunde sind, rufen Sie bitte die Nummer auf der Rückseite Ihrer Krankenversicherungskarte an. Andernfalls rufen Sie 1.800.244.6224 an (TTY: Wählen Sie 711).

Persian (Farsi) – توجه: خدمات کمک زبانی، به صورت رایگان به شما ارائه می شود. برای مشتریان فعلی Cigna Healthcare، لطفاً با شماره ای که در پشت کارت شناسایی شماست تماس بگیرید. در غیر اینصورت با شماره 1.800.244.6224 (شماره تلفن ویژه ناشنوایان: شماره 711 را شماره گیری کنید).