

Chronic Medicine

**Reduced out-of-pocket costs
for the medicine you need**
2025 Advanced Control Plan



Forget your deductible – just pay your copay or coinsurance when buying certain medication.

Chronic Medicine List Advanced Control Plan

Key

UPPERCASE	Brand-name medicine
<i>lowercase italics</i>	Generic medicine

Drug class	Drug name		
ANTIANGINAL AGENTS	<i>isosorbide dinitrate</i> <i>isosorbide mononitrate er</i>	<i>nitroglycerin</i> <i>ranolazine er</i>	
ANTIASTHMATIC	AIRSUPRA <i>albuterol</i> <i>albuterol hfa</i> ANORO ELLIPTA ASMANEX HFA BREO ELLIPTA <i>breyna</i> BREZTRI AEROSPHERE <i>budesonide</i> <i>budesonide/formoterol dihydrate</i>	<i>cromolyn</i> <i>fluticasone/salmeterol</i> <i>ipratropium</i> <i>ipratropium/albuterol</i> <i>levalbuterol</i> <i>levalbuterol hfa</i> <i>montelukast</i> PULMICORT FLEXHALER SPIRIVA HANDIHALER SPIRIVA RESPIMAT STIOLTO RESPIMAT	STRIVERDI RESPIMAT <i>terbutaline</i> <i>theophylline</i> <i>theophylline er</i> TRELEGY ELLIPTA <i>wixela inhub</i> YUPELRI <i>zafirlukast</i>
ANTIDEPRESSANTS	<i>amitriptyline</i> <i>amoxapine</i> <i>bupropion</i> <i>bupropion er (sr)</i> <i>bupropion er (xl)</i> <i>citalopram</i> <i>clomipramine</i> <i>desipramine</i> <i>desvenlafaxine er</i> <i>doxepin</i>	<i>duloxetine</i> <i>escitalopram</i> <i>fluoxetine</i> <i>fluoxetine dr</i> <i>fluvoxamine</i> <i>fluvoxamine er</i> <i>imipramine</i> <i>mirtazapine</i> <i>mirtazapine odt</i> <i>nefazodone</i> <i>nortriptylin</i>	<i>paroxetine</i> <i>paroxetine er</i> <i>phenelzine</i> <i>protriptyline</i> <i>sertraline</i> <i>tranylcypromine</i> <i>trazodone</i> <i>trimipramine</i> TRINTELLIX <i>venlafaxine</i> <i>venlafaxine er</i>

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Drug class	Drug name		
ANTIDIABETIC	<i>acarbose</i>	HUMULIN R U-500 KWIKPEN	SOLIQUA 100/33
	BAQSIMI	JARDIANCE	SYMLINPEN 120
	FARXIGA	LANTUS products	SYMLINPEN 60
	FIASP products	<i>liraglutide</i>	SYNJARDY
	<i>glimepiride</i>	<i>metformin</i>	SYNJARDY XR
	<i>glipizide</i>	<i>metformin er</i>	TOUJEO products
	<i>glipizide er</i>	<i>miglitol</i>	TRESIBA products
	<i>glipizide/metformin</i>	MOUNJARO	TRIJARDY XR
	<i>glyburide</i>	<i>nateglinide</i>	TRULICITY
	<i>glyburide micronized</i>	NOVOLIN products	XIGDUO XR
	<i>glyburide/metformin</i>	NOVOLOG products	XULTOPHY
	GLYXAMBI	OZEMPIC	ZEGALOGUE
	GVOKE HYPOPEN 1-PACK	pioglitazone	ZITUVIMET
	GVOKE HYPOPEN 2-PACK	<i>pioglitazone-glimepiride</i>	ZITUVIMET XR
	GVOKE PFS	<i>pioglitazone/metformin</i>	ZITUVIO
	HUMULIN R U-500 (CONCENTRATED)	<i>repaglinide</i>	
		RYBELSUS	
ANTIHYPERLIPIDEMIC	<i>atorvastatin</i>	<i>fenofibrate micronized</i>	NEXLIZET
	<i>cholestyramine</i>	<i>fenofibric acid</i>	<i>niacin er</i>
	<i>cholestyramine light</i>	<i>fenofibric acid dr</i>	<i>omega-3-acid ethyl esters</i>
	<i>colesevelam</i>	<i>fluvastatin</i>	<i>pravastatin</i>
	<i>colestipol</i>	<i>fluvastatin er</i>	<i>prevalite</i>
	<i>ezetimibe</i>	<i>gemfibrozil</i>	<i>rosuvastatin</i>
	<i>ezetimibe/simvastatin</i>	<i>lovastatin</i>	<i>simvastatin</i>
	<i>fenofibrate</i>	NEXLETOL	VASCEPA
ANTIHYPERTENSIVE	<i>aliskiren</i>	<i>fosinopril</i>	<i>olmesartan/hctz</i>
	<i>amlodipine/benazepril</i>	<i>fosinopril/hctz</i>	<i>perindopril</i>
	<i>amlodipine/olmesartan</i>	<i>guanfacine</i>	<i>phenoxybenzamine</i>
	<i>amlodipine/valsartan</i>	<i>hydralazine</i>	<i>prazosin</i>
	<i>atenolol/chlorthalidone</i>	<i>irbesartan</i>	<i>quinapril</i>
	<i>benazepril</i>	<i>irbesartan/hctz</i>	<i>quinapril/hydrochlorothiazide</i>
	<i>benazepril/hctz</i>	<i>lisinopril</i>	<i>ramipril</i>
	<i>bisoprolol/hctz</i>	<i>lisinopril/hctz</i>	<i>telmisartan</i>
	<i>candesartan</i>	<i>losartan</i>	<i>telmisartan/amlodipine</i>
	<i>candesartan/hctz</i>	<i>losartan/hctz</i>	<i>telmisartan/hctz</i>
	<i>captopril</i>	<i>methyldopa</i>	<i>terazosin</i>
	<i>clonidine</i>	<i>metoprolol/hctz</i>	<i>trandolapril</i>
	<i>doxazosin</i>	<i>minoxidil</i>	<i>valsartan</i>
	<i>enalapril</i>	<i>moexipril</i>	<i>valsartan/hctz</i>
	<i>enalapril/hctz</i>	<i>olmesartan</i>	
	<i>eplerenone</i>	<i>olmesartan/amlodipine/hctz</i>	
ANTIPSYCHOTICS	<i>aripiprazole</i>	<i>lithium</i>	<i>quetiapine</i>
	<i>aripiprazole odt</i>	<i>lithium er</i>	<i>quetiapine er</i>
	<i>chlorpromazine</i>	<i>loxapine</i>	<i>risperidone</i>
	<i>clozapine</i>	<i>olanzapine</i>	<i>risperidone odt</i>
	<i>clozapine odt</i>	<i>olanzapine odt</i>	<i>thioridazine</i>
	<i>compro</i>	<i>paliperidone er</i>	<i>trifluoperazine</i>
	<i>fluphenazine</i>	<i>perphenazine</i>	VRAYLAR
	<i>haloperidol</i>	<i>prochlorperazine</i>	<i>ziprasidone</i>

Drug class	Drug name		
BETA BLOCKERS	<i>acebutolol</i> <i>atenolol</i> <i>betaxolol</i> <i>bisoprolol</i> <i>carvedilol</i> <i>carvedilol er</i>	<i>labetalol</i> <i>metoprolol</i> <i>metoprolol er</i> <i>nadolol</i> <i>nebivolol</i> <i>pindolol</i>	<i>propranolol</i> <i>propranolol er</i> <i>sotalol</i> <i>sotalol af</i> <i>timolol tablet</i>
CALCIUM BLOCKERS	<i>amlodipine</i> <i>cartia xt</i> <i>dilt-xr</i> <i>diltiazem</i> <i>diltiazem er</i>	<i>felodipine er</i> <i>isradipine</i> <i>nicardipine</i> <i>nifedipine</i> <i>nifedipine er</i>	<i>nimodipine</i> <i>nisoldipine er</i> <i>verapamil</i> <i>verapamil er</i> <i>verapamil sr</i>
CARDIOTONICS	<i>digoxin</i>		
DIABETIC DIAGNOSTIC PRODUCTS and SUPPLIES	ACCU-CHEK BLOOD GLUCOSE TEST STRIPS BD INSULIN SYRINGES AND PEN NEEDLES DEXCOM G6	DEXCOM G7 LANCETS, LANCET DEVICES OMNIPOD OMNIPOD 5 DX OMNIPOD DASH	RELION TRUE METRIX BLOOD GLUCOSE TEST STRIPS TRUE METRIX BLOOD GLUCOSE TEST STRIP
DIURETICS	<i>acetazolamide</i> <i>acetazolamide er</i> <i>amiloride</i> <i>amiloride/hctz</i> <i>bumetanide</i> <i>chlorthalidone</i>	<i>ethacrynic acid</i> <i>furosemide</i> <i>hctz</i> <i>indapamide</i> <i>methazolamide</i> <i>metolazone</i>	<i>spironolactone</i> <i>spironolactone/hctz</i> <i>torsemide</i> <i>triamterene</i> <i>triamterene/hctz</i>
MISCELLANEOUS CARDIOVASCULAR	<i>amlodipine/atorvastatin</i> ENTRESTO		
MISCELLANEOUS PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS	<i>chlordiazepoxide/ amitriptyline</i> <i>olanzapine/fluoxetine</i> <i>perphenazine/amitriptyline</i>		

Please remember that this is not a complete list of drugs covered under your plan. Products may be subject to plan-specific copayment or coinsurance, additional charges or other restrictions. Certain drugs, such as those for infertility, erectile dysfunction, weight loss, smoking cessation or vitamins, may not be covered by your particular pharmacy plan. Diabetic supplies may be covered under your medical plan.

To check coverage and copay information for a specific drug, please visit the website on your member ID card and log in to your member website. If you don't have access to our website, call the toll-free number on your member ID card.

Information is believed to be accurate as of the production date; however, it is subject to change.

