

# Preventive Therapy Drug List

Treatments marked in **red** text with an asterisk (\*) require trial and failure of preferred, covered options or approval via prior authorization to be covered. Please refer to the CVS Caremark® Performance Drug List for preferred medication options that are available.

(01/01/21)

## ANTI-INFECTIVES

### ANTIRETROVIRAL AGENTS

*emtricitabine/tenofovir disoproxil fumarate 200/300 mg*  
DESCOVY  
TRUVADA 200/300 mg

## ANTICOAGULANTS/

### ANTIPLATELETS

#### ANTICOAGULANTS

*enoxaparin*  
*fondaparinux*  
*warfarin*  
Jantoven  
ARIXTRA  
ELIQUIS  
FRAGMIN  
LOVENOX  
PRADAXA\*  
SAVAYSA\*  
XARELTO

#### PLATELET AGGREGATION INHIBITORS

*aspirin 81 mg*  
*clopidogrel*  
*dipyridamole*  
*dipyridamole ext-rel/aspirin*  
*prasugrel*  
AGGRENOX  
ASPIRIN/OMEPRAZOLE DELAYED-REL\*  
BRILINTA  
DURLAZA\*  
EFFIENT  
PLAVIX\*  
YOSPRALA\*  
ZONTIVITY\*

Over-the-Counter (OTC) products require a prescription.  
Coverage may vary by plan.

## ANTICONVULSANTS

*carbamazepine*  
*carbamazepine ext-rel*  
*clobazam*  
*clonazepam*  
*divalproex sodium delayed-rel*  
*divalproex sodium ext-rel*  
*ethosuximide*  
*felbamate*  
*lamotrigine*  
*lamotrigine ext-rel*

*levetiracetam*  
*levetiracetam ext-rel*  
*oxcarbazepine*  
*phenobarbital*  
*phenytoin*  
*phenytoin sodium extended*  
*Primidone*  
*rufinamide*  
*tiagabine*  
*topiramate*  
*topiramate ext-rel*  
*valproic acid*  
*vigabatrin*  
*zonisamide*  
*Epitol*  
APTIOM  
BANZEL  
BRIVICTA  
CARBATROL  
CELONTIN  
DEPAKOTE  
DEPAKOTE ER  
DIACOMIT  
DILANTIN  
FELBATOL  
FINTEPLA  
FYCOMPA  
GABITRIL  
KEPPRA  
KEPPRA XR  
KLONOPIN  
LAMICTAL  
LAMICTAL XR  
LAMICTAL ODT  
MYSOLINE  
ONFI\*  
OXTELLAR XR  
PEGANONE  
PHENYTEK  
QUDEXY XR  
ROWEEPPRA  
SABRIL\*  
TEGRETOL  
TEGRETOL-XR  
TOPAMAX  
TRILEPTAL  
TROKENDI XR  
VIMPAT  
XCOPRI  
ZARONTIN  
ZONEGRAN\*

## CARDIOVASCULAR CONDITIONS - OTHER

### ANTIARRHYTHMIC AGENTS

*amiodarone*  
*disopyramide*  
*dofetilide*  
*flecainide*  
*propafenone*  
*propafenone ext-rel*  
*sotalol*  
*sotalol AF*  
Pacerone  
BETAPACE\*  
BETAPACE AF\*  
MULTAQ  
NORPACE  
NORPACE CR  
RYTHMOL SR  
SORINE  
SOTYLIZE  
TIKOSYN

### ORAL ANTIANGINAL AGENTS

*isosorbide dinitrate (except 40mg)*  
*isosorbide mononitrate*  
*isosorbide mononitrate ext-rel\**  
DILATRATE-SR  
ISORDIL

SL and chewable formulations are not included on this list.

### TRANSDERMAL/TOPICAL ANTIANGINAL AGENTS

*nitroglycerin transdermal*  
Minitran  
NITRO-BID  
NITRO-DUR

## CORONARY ARTERY DISEASE

### ANTIHYPERTENSIVES

*atorvastatin*  
*cholestyramine*  
*colestevlam*  
*colestipol*  
*ezetimibe*  
*Fenofibrate – except for 120 mg tab\**  
*fenofibric acid delayed-rel*  
*fluvastatin*  
*fluvastatin ext-rel*  
*gemfibrozil*  
*lovastatin*  
*niacin ext-rel*  
*pravastatin*

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rosuvastatin  
simvastatin  
*Niacor*\*  
Prevalite  
ALTOPREV\*  
ANTARA  
COLESTID  
CRESTOR\*  
EZALLOR SPRINKLE\*  
FENOFIBRATE 160 mg  
FENOFIBRIC ACID\*  
FENOGLIDE – *except for 120 mg tab*\*  
FIBRICOR  
FLOLIPID\*  
LESCOL XL\*  
LIPITOR\*  
LIPOFEN  
LIVALO\*  
LOPID  
NIASPAN  
PRAVACHOL  
QUESTRAN/QUESTRAN LIGHT  
TRICOR\*  
TRIGLIDE  
TRILIPIX  
VASCEPA  
WELCHOL  
ZETIA\*  
ZOCOR  
ZYPITAMAG\*

#### COMBINATION ANTIHYPERLIPIDEMICS

*amlodipine/atorvastatin*  
*ezetimibe/simvastatin*  
CADUET  
VYTORIN

#### DIABETES

##### DIAGNOSTIC AGENTS AND SUPPLIES

BLOOD GLUCOSE MONITORS  
*Plan restrictions may apply*  
BLOOD GLUCOSE STRIPS  
*Plan restrictions may apply*  
INSULIN SYRINGES, INFUSION SETS,  
AND NEEDLES  
*Plan restrictions may apply*

*Over-the-Counter (OTC) products require a prescription.  
Coverage may vary by plan.*

##### INHALED DIABETES AGENTS

AFREZZA\*

##### INJECTABLE DIABETES AGENTS

ADLYXIN\*  
ADMELOG\*  
APIDRA\*  
BASAGLAR KWIKPEN  
BYDUREON\*  
BYETTA\*  
FIASP

HUMALOG\*  
HUMULIN\*  
INSULIN LISPRO\*  
LANTUS\*  
LEVEMIR  
LYUMJEV\*  
MYXREDLIN\*  
NOVOLIN  
NOVOLOG  
OZEMPIC  
SEMGLEE\*  
SOLIQUA  
SYMLINPEN  
TOUJEO  
TRESIBA  
TRULICITY  
VICTOZA  
XULTOPHY

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##### ORAL DIABETES AGENTS

*acarbose*  
*Alogliptin*\*  
*alogliptin/metformin*\*  
*alogliptin/pioglitazone*\*  
*glimepiride*  
*glipizide*  
*glipizide ext-rel*  
*glipizide/metformin*  
*metformin*  
*metformin ext-rel*  
*miglitol*  
*nateglinide*  
*pioglitazone*  
*pioglitazone/glimepiride*  
*pioglitazone/metformin*  
*repaglinide*  
*tolbutamide*  
ACTOPLUS MET  
ACTOPLUS MET XR  
ACTOS\*  
AMARYL  
DUETACT  
FARXIGA  
FORTAMET\* – *and its generics*\*  
GLUCOTROL  
GLUCOTROL XL  
GLUMETZA\* – *and its generics*\*  
GLYSET  
GLYXAMBI  
INVOKAMET\*  
INVOKAMET XR\*  
INVOKANA\*  
JANUMET  
JANUMET XR  
JANUVIA  
JARDIANCE  
JENTADUETO\*  
JENTADUETO XR\*  
KAZANO\*

KOMBIGLYZE XR\*  
METAGLIP  
NESINA\*  
ONGLYZA\*  
OSENI\*  
PRECOSE  
QTERN\*  
RIOMET\*  
RIOMET ER  
RYBELSUS  
SEGLUROMET\*  
STARLIX  
STEGLATRO\*  
STEGLUJAN\*  
SYNJARDY  
SYNJARDY XR  
TRADJENTA\*  
TRIJARDY XR\*  
XIGDUO XR

#### HEMATOLOGIC AGENTS

ADVATE  
ADYNOVATE  
AFSTYLA  
ALPHANATE  
ALPHANINE SD  
ALPROLIX\*  
BENEFIX  
COAGADEX  
CORIFACT  
ELOCTATE\*  
ESPEROCT\*  
FEIBA  
HEMOFIL M  
HUMATE-P  
IDELVION  
IXINITY  
JIVI  
KOATE-DVI  
KOGENATE FS  
KOVALTRY  
MONONINE  
NOVOEIGHT  
NUWIQ  
PROFILNINE SD  
RECOMBINATE  
RIXUBIS  
TRETEN  
XYNTHA

#### HYPERTENSION

##### ACE INHIBITORS/ANGIOTENSIN II RECEPTOR ANTAGONISTS AND COMBINATION AGENTS

*amlodipine/benazepril*  
*benazepril*  
*benazepril/hydrochlorothiazide*  
*candesartan*  
*candesartan/hydrochlorothiazide*  
*captopril*  
*captopril/hydrochlorothiazide*  
*enalapril*

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enalapril/hydrochlorothiazide  
fosinopril  
fosinopril/hydrochlorothiazide  
irbesartan  
irbesartan/hydrochlorothiazide  
lisinopril  
lisinopril/hydrochlorothiazide  
losartan  
losartan/hydrochlorothiazide  
moexipril  
olmesartan  
olmesartan/hydrochlorothiazide  
perindopril  
quinapril  
quinapril/hydrochlorothiazide  
ramipril  
telmisartan  
telmisartan/hydrochlorothiazide  
trandolapril  
trandolapril/verapamil ext-rel  
valsartan  
valsartan/hydrochlorothiazide  
ACCUPRIL  
ACCURETIC  
ALTACE  
ATACAND\*  
ATACAND HCT\*  
AVALIDE  
AVAPRO  
BENICAR\*  
BENICAR HCT\*  
COZAAR  
DIOVAN\*  
DIOVAN HCT\*  
EDARBI\*  
EDARBYCLOR\*  
EPANED  
HYZAAR  
LOTENSIN  
LOTENSIN HCT  
LOTREL  
MICARDIS  
MICARDIS HCT  
PRESTALIA\*  
PRINIVIL  
QBRELIS  
TARKA  
VASERETIC  
VASOTEC  
ZESTORETIC  
ZESTRIL

#### BETA-BLOCKERS AND COMBINATION AGENTS

acebutolol  
atenolol  
atenolol/chlorthalidone  
betaxolol  
bisoprolol  
bisoprolol/hydrochlorothiazide  
carvedilol

carvedilol phosphate ext-rel  
labetalol  
metoprolol  
metoprolol succinate ext-rel  
metoprolol/hydrochlorothiazide  
nadolol  
pindolol  
propranolol  
propranolol ext-rel  
propranolol/hydrochlorothiazide  
timolol maleate  
BYSTOLIC  
COREG  
COREG CR  
CORGARD  
DUTOPROL\*  
INDERAL LA\*  
KAPSPARGO\*  
LEVATOL  
LOPRESSOR  
LOPRESSOR HCT  
TENORETIC  
TENORMIN  
TOPROL-XL\*  
TRANDATE  
ZIAC

#### CALCIUM CHANNEL BLOCKERS AND COMBINATION AGENTS

amlodipine  
diltiazem  
diltiazem ext-rel\*  
diltiazem XR  
felodipine ext-rel  
isradipine  
nicardipine  
nifedipine  
nifedipine ext-rel  
nisoldipine ext-rel  
verapamil  
verapamil ext-rel  
Cartia XT  
Dilt-XR  
Matzim LA\*  
Nifediac CC  
Taztia XT  
CALAN SR  
CARDIZEM\*  
CARDIZEM CD\*  
CARDIZEM LA\*  
ISOPTIN SR  
KATERZIA\*  
NORVASC\*  
PROCARDIA  
PROCARDIA XL  
SULAR  
TIAZAC  
VERELAN  
VERELAN PM

#### DIURETICS

amiloride/hydrochlorothiazide  
chlorthalidone  
hydrochlorothiazide  
indapamide  
spironolactone/hydrochlorothiazide  
triamterene/hydrochlorothiazide  
ALDACTAZIDE  
DIURIL  
DYAZIDE  
MAXZIDE

#### OTHER ANTIHYPERTENSIVE AGENTS

aliskiren  
amlodipine/olmesartan  
amlodipine/telmisartan  
amlodipine/valsartan/  
hydrochlorothiazide  
clonidine  
clonidine transdermal  
guanfacine  
hydralazine  
methyldopa  
methyldopa/hydrochlorothiazide  
minoxidil  
olmesartan/amlodipine/  
hydrochlorothiazide  
AZOR  
CATAPRES  
CATAPRES-TTS  
EXFORGE\*  
EXFORGE HCT\*  
TEKTURNA  
TEKTURNA HCT  
TRIBENZOR  
TWINSTA

#### IMMUNIZING AGENTS

##### IMMUNIZATIONS

VACCINES – ALL\*  
*Plan restrictions may apply*

#### MENTAL HEALTH

##### ANTIDEPRESSANTS

amitriptyline  
amoxapine  
bupropion  
bupropion ext-rel  
citalopram  
clomipramine  
desipramine  
desvenlafaxine ext-rel  
Doxepin  
duloxetine delayed-rel  
escitalopram  
fluoxetine  
fluoxetine delayed-rel  
fluvoxamine  
imipramine HCl  
imipramine pamoate  
maprotiline

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mirtazapine  
nortriptyline  
paroxetine HCl  
paroxetine HCl ext-rel  
phenelzine  
protriptyline  
sertraline  
tranylcypromine  
trazodone  
trimipramine  
venlafaxine  
venlafaxine ext-rel  
Irenka  
ANAFRANIL  
APLENZIN\*  
CELEXA  
CYMBALTA\*  
DESVENLAFAXINE ER  
DRIZALMA SPRINKLE\*  
EFFEXOR XR\*  
EMSAM  
FETZIMA  
FLUOXETINE 60 mg  
FORFIVO XL  
LEXAPRO\*  
MARPLAN  
NARDIL  
NORPRAMIN  
OLEPTRO\*  
PAMELOR  
PARNATE  
PAXIL\*  
PAXIL CR\*  
PEXEVA\*  
PRISTIQ\*  
PROZAC\*  
REMERON  
TRINTELLIX  
VIIBRYD\*  
WELLBUTRIN SR  
WELLBUTRIN XL  
ZOLOFT

#### ANTIPSYCHOTICS

aripiprazole  
chlorpromazine  
clozapine  
fluphenazine  
fluphenazine decanoate  
haloperidol  
loxapine  
olanzapine  
olanzapine orally disintegrating tabs  
paliperidone  
perphenazine  
quetiapine  
quetiapine ext-rel  
risperidone  
thioridazine  
thiothixene  
trifluoperazine

ziprasidone  
ABILIFY\*  
ABILIFY MAINTENA\*  
ARISTADA  
CAPLYTA\*  
CLOZARIL  
EQUETRO  
FANAPT\*  
GEODON  
HALDOL  
HALDOL DECANOATE  
INVEGA  
INVEGA SUSTENNA  
INVEGA TRINZA\*  
LATUDA  
REXULTI  
RISPERDAL  
RISPERDAL CONSTA  
SAPHRIS  
SECUADO\*  
SEROQUEL  
SEROQUEL XR\*  
VERSACLOZ  
VRAYLAR  
ZYPREXA  
ZYPREXA ZYDIS

#### OBSESSIVE COMPULSIVE DISORDER

fluvoxamine ext-rel

#### OSTEOPOROSIS

alendronate  
calcitonin  
calcitonin/salmon  
ibandronate  
raloxifene  
risedronate  
zoledronic acid 5 mg/100 mL  
ACTONEL  
ATELVIA  
BINOSTO  
BONIVA  
BONIVA INJECTION  
EVENITY\*  
EVISTA  
FORTEO  
FOSAMAX  
FOSAMAX PLUS D  
MIACALCIN NASAL SPRAY\*  
PROLIA  
RECLAST  
TERIPARATIDE\*  
TYMLOS

#### PREVENTIVE CARE SERVICES

##### AGENTS FOR CHEMICAL DEPENDENCY

acamprosate calcium  
buprenorphine sublingual  
buprenorphine/naloxone sublingual  
disulfiram  
naltrexone  
Depade

ANTABUSE  
BUNAVAIL  
PROBUPHINE\*  
SUBLOCADE\*  
SUBOXONE FILM\*  
VIVITROL  
ZUBSOLV

#### BOWEL PREPARATIONS

peg 3350/electrolytes  
Gavilyte  
CLENPIQ  
GOLYTELY\*  
MOVIPREP\*  
NULYTELY  
OSMOPREP\*  
PLENVU\*  
SUPREP\*

#### SMOKING DETERRENTS\*

bupropion ext-rel  
nicotine polacrilex  
nicotine transdermal  
CHANTIX  
NICODERM CQ  
NICORETTE GUM  
NICORETTE LOZENGE  
NICOTROL INHALER  
NICOTROL NS  
ZYBAN

*Plan restrictions may apply*

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#### MISCELLANEOUS

cholecalciferol (D3)

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#### RESPIRATORY DISORDERS

##### RESPIRATORY AGENTS

budesonide suspension  
budesonide/formoterol\*  
cromolyn sodium nebulizer solution  
fluticasone/salmeterol  
montelukast  
zafirlukast  
zileuton ext-rel  
Wixela Inhub\*  
ACCOLATE  
ADVAIR  
ADVAIR HFA  
AIRDUO RESPICLICK\*  
ALVESCO\*  
ARNUITY ELLIPTA  
ASMANEX\*  
ASMANEX HFA\*  
BREO ELLIPTA  
CINQAIR\*  
DULERA\*

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FASENRA  
FLOVENT DISKUS  
FLOVENT HFA  
NUCALA  
PULMICORT  
PULMICORT FLEXHALER  
QVAR REDIHALER  
SINGULAIR\*  
SPIRIVA RESPIMAT 1.25 mcg  
SYMBICORT  
SYNAGIS  
TRELEGY ELLIPTA  
XOLAIR  
ZYFLO

BAFIERTAM\*  
BETASERON  
COPAXONE  
EXTAVIA\*  
GILENYA  
KESIMPTA  
LEMTRADA\*  
MAVENCLAD  
MAYZENT  
OCREVUS  
PLEGRIDY\*  
REBIF  
TECFIDERA\*  
TYSABRI  
VUMERITY  
ZEPOSIA\*

## VARIOUS CONDITIONS

### ANTI-MALARIAL AGENTS

*atovaquone/proguanil*  
*chloroquine*  
*mefloquine*  
*primaquine*  
ARAKODA\*  
MALARONE  
PRIMAQUINE

### DENTAL CARIES PREVENTION

*sodium fluoride*  
PEDIATRIC MULTIVITAMINS WITH  
FLUORIDE - ALL MARKETED\*  
*Plan restrictions may apply*

### HEREDITARY ANGIOEDEMA AGENTS

CINRYZE  
HAEGARDA  
TAKHZYRO

### IMMUNOSUPPRESSIVE AGENTS

*cyclosporine caps*  
*everolimus*  
*mycophenolate mofetil*  
*mycophenolate sodium delayed-rel*  
*sirolimus*  
*tacrolimus*  
Gengraf  
ASTAGRAF XL\*  
CELLCEPT\*  
ENVARBUS XR\*  
MYFORTIC\*  
NEORAL  
NULOJIX  
PROGRAF\*  
RAPAMUNE\*  
SANDIMMUNE  
ZORTRESS\*

### MULTIPLE SCLEROSIS AGENTS

*dimethyl fumarate delayed-rel*  
*glatiramer*  
AUBAGIO  
AVONEX\*

## WOMEN'S HEALTH

### ANTIESTROGENS

*tamoxifen*  
SOLTAMOX

### AROMATASE INHIBITORS

*anastrozole*  
*exemestane*  
*letrozole*  
ARIMIDEX  
AROMASIN  
FEMARA

### CONTRACEPTIVES

CONTRACEPTIVES - ALL  
PRESCRIPTION FORMULATIONS  
*Limitations on brand-name products  
may apply*

*Over-the-Counter (OTC) emergency contraceptive  
products require a prescription. Coverage may vary by  
plan.*

### PRENATAL VITAMINS

*folic acid*  
PRENATAL VITAMINS  
- PRESCRIPTION\*  
*Plan restrictions may apply*

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