

Your employer has chosen a Value-Based Benefit Design (VBBD) for your prescription benefit plan. This means you may have lower out-of-pocket costs for drugs in value drug categories included in your VBBD. Value drug categories include drugs that treat certain chronic or long-term conditions.

Below is a list of medications that may be available under your VBBD benefit. Please verify with your plan if a generic drug must be tried before filling a brand version of a drug. **Please refer to your benefit materials for coverage details and the plan website for current information as this publication is subject to change.**

Generic prescription drugs are shown in lower-case boldface type. Most generic drugs are followed by a reference brand drug in (parentheses). Reference brands may not themselves be covered, please check your benefit. Some generic products have no reference brand. Brand prescription drugs are shown in all capital letters followed by the generic name. Generic medicines are available for many of the brand-name drugs listed though may not be available in all strengths.

DIABETES MEDICATIONS

Insulin

FIASP – insulin aspart (with niacinamide) inj 100 unit/ml
FIASP FLEXTOUCH – insulin aspart (with niacinamide) sol pen-inj 100 unit/ml
FIASP PENFILL – insulin aspart (with niacinamide) soln cartridge 100 unit/ml
HUMULIN R U-500 (CONCENTRATE) – insulin regular (human) inj 500 unit/ml
HUMULIN R U-500 KWIKPEN – insulin regular (human) soln pen-injector 500 unit/ml
INSULIN ASPART – insulin aspart inj soln 100 unit/ml
INSULIN ASPART FLEXPEN – insulin aspart soln pen-injector 100 unit/ml
INSULIN ASPART PENFILL – insulin aspart soln cartridge 100 unit/ml
INSULIN ASPART PROTAMINE/INSULIN ASPART – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)
INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)
INSULIN GLARGINE – insulin glargine-yfgn inj 100 unit/ml
INSULIN GLARGINE – insulin glargine-yfgn soln pen-injector 100 unit/ml
LEVEMIR – insulin detemir inj 100 unit/ml
LEVEMIR FLEXPEN - insulin detemir soln pen-injector 100 unit/ml
NOVOLIN N – insulin nph (human) (isophane) inj 100 unit/ml
NOVOLIN N RELION – insulin nph (human) (isophane) inj 100 unit/ml
NOVOLIN N FLEXPEN – insulin nph (human) (isophane) susp pen-injector 100 unit/ml
NOVOLIN N FLEXPEN RELION – insulin nph (human) (isophane) susp pen-injector 100 unit/ml
NOVOLIN R – insulin regular (human) inj 100 unit/ml
NOVOLIN R RELION – insulin regular (human) inj 100 unit/ml
NOVOLIN R FLEXPEN – insulin regular (human) soln pen-injector 100 unit/ml
NOVOLIN R FLEXPEN RELION – insulin regular (human) soln pen-injector 100 unit/ml
NOVOLIN 70/30 – insulin nph isophane & regular human inj 100 unit/ml (70-30)
NOVOLIN 70/30 RELION – insulin nph isophane & regular human inj 100 unit/ml (70-30)
NOVOLIN 70/30 FLEXPEN – insulin nph & regular susp pen-inj 100 unit/ml (70-30)
NOVOLIN 70/30 FLEXPEN RELION – insulin nph & regular susp pen-inj 100 unit/ml (70-30)
NOVOLOG – insulin aspart inj soln 100 unit/ml

DIABETES MEDICATIONS

Insulin (continued)

NOVOLOG FLEXPEN – insulin aspart soln pen-injector 100 unit/ml
NOVOLOG FLEXPEN RELION – insulin aspart soln pen-injector 100 unit/ml
NOVOLOG MIX 70/30 – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)

NOVOLOG MIX 70/30 PREFILLED FLEXPEN – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)
NOVOLOG MIX 70/30 RELION – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)
NOVOLOG PENFILL – insulin aspart soln cartridge 100 unit/ml
NOVOLOG RELION – insulin aspart inj soln 100 unit/ml
SEMGLEE – insulin glargine-yfgn inj 100 unit/ml
SEMGLEE – insulin glargine-yfgn soln pen-injector 100 unit/ml
TOUJEO SOLOSTAR – insulin glargine soln pen-injector 300 unit/ml (1 unit dial)
TOUJEO MAX SOLOSTAR – insulin glargine soln pen-injector 300 unit/ml (2 unit dial)
TRESIBA – insulin degludec inj 100 unit/ml
TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 100 unit/ml
TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 200 unit/ml

Preferred Brand GLP-1s - Insulin Combinations

SOLIQUA 100/33 – insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml
XULTOPHY 100/3.6 – insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml

Oral

acarbose tab 25 mg
acarbose tab 50 mg
acarbose tab 100 mg
glimepiride tab 1 mg (Amaryl)
glimepiride tab 2 mg (Amaryl)
glimepiride tab 4 mg (Amaryl)
glipizide tab er 24hr 2.5 mg (Glucotrol xl)
glipizide tab er 24hr 5 mg (Glucotrol xl)
glipizide tab er 24hr 10 mg (Glucotrol xl)
glipizide tab 5 mg
glipizide tab 10 mg
glipizide-metformin hcl tab 2.5-250 mg
glipizide-metformin hcl tab 2.5-500 mg
glipizide-metformin hcl tab 5-500 mg

DIABETES MEDICATIONS

Oral (continued)

glyburide micronized tab 1.5 mg (Glynase)
glyburide micronized tab 3 mg (Glynase)
glyburide micronized tab 6 mg (Glynase)
glyburide tab 1.25 mg
glyburide tab 2.5 mg
glyburide tab 5 mg
glyburide-metformin tab 1.25-250 mg
glyburide-metformin tab 2.5-500 mg
glyburide-metformin tab 5-500 mg
metformin hcl tab 500 mg
metformin hcl tab 850 mg
metformin hcl tab 1000 mg
metformin hcl tab er 24hr 500 mg
metformin hcl tab er 24hr 750 mg
miglitol tab 25 mg
miglitol tab 50 mg
miglitol tab 100 mg
nateglinide tab 60 mg
nateglinide tab 120 mg
pioglitazone hcl tab 15 mg (base equiv) (Actos)
pioglitazone hcl tab 30 mg (base equiv) (Actos)
pioglitazone hcl tab 45 mg (base equiv) (Actos)
pioglitazone hcl-metformin hcl tab 15-500 mg

pioglitazone hcl-metformin hcl tab 15-850 mg (Actoplus met)

repaglinide tab 0.5 mg

repaglinide tab 1 mg

repaglinide tab 2 mg

Preferred Brand GLP-1s – Oral & Other Diab Injectables

MOUNJARO - tirzepatide soln pen-injector 2.5 mg/0.5ml

MOUNJARO - tirzepatide soln pen-injector 5 mg/0.5ml

MOUNJARO - tirzepatide soln pen-injector 7.5 mg/0.5ml

MOUNJARO - tirzepatide soln pen-injector 10 mg/0.5ml

MOUNJARO - tirzepatide soln pen-injector 12.5 mg/0.5ml

MOUNJARO - tirzepatide soln pen-injector 15 mg/0.5ml

OZEMPIK - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml)

OZEMPIK – semaglutide soln pen-inj 1 mg/dose (4 mg/3ml)

OZEMPIK - semaglutide soln pen-inj 2 mg/dose (8 mg/3ml)

RYBELSUS – semaglutide tab 3 mg

RYBELSUS – semaglutide tab 7 mg

RYBELSUS – semaglutide tab 14 mg

TRULICITY – dulaglutide soln pen-injector 0.75 mg/0.5ml

DIABETES MEDICATIONS

Preferred Brand GLP-1s – Oral & Other Diab Injectables (continued)

TRULICITY – dulaglutide soln pen-injector 1.5 mg/0.5ml

TRULICITY – dulaglutide soln pen-injector 3 mg/0.5ml

TRULICITY – dulaglutide soln pen-injector 4.5 mg/0.5ml

Hypoglycemic Agents

BAQSIMI ONE PACK – glucagon nasal powder 3 mg/dose

BAQSIMI TWO PACK – glucagon nasal powder 3 mg/dose

glucagon (rdna) for inj kit 1 mg (Glucagon emergency kit)

GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR – glucagon hcl for inj 1 mg

GVOKE HYPOOPEN 1-PACK – glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml

GVOKE HYPOOPEN 1-PACK – glucagon subcutaneous solution auto-injector 1 mg/0.2ml

GVOKE HYPOOPEN 2-PACK – glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml

GVOKE HYPOOPEN 2-PACK – glucagon subcutaneous solution auto-injector 1 mg/0.2ml

GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml

GVOKE PFS – glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml

GVOKE PFS – glucagon subcutaneous soln pref syringe 1 mg/0.2ml

ZEGALOGUE – dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml

ZEGALOGUE – dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml

DIABETIC SUPPLIES

Basic Supplies

Calibration Liquid

ASCENCIA CONTOUR

ASCENCIA CONTOUR NEXT

Insulin Syringes

Lancets

Lancet Devices

Pen Needles

Test Strips & Discs

ASCENCIA CONTOUR

ASCENCIA CONTOUR NEXT

HIGH BLOOD PRESSURE

acebutolol hcl cap 200 mg
acebutolol hcl cap 400 mg
amiloride hcl tab 5 mg
amlodipine besylate tab 2.5 mg (base equivalent) (Norvasc)
amlodipine besylate tab 5 mg (base equivalent) (Norvasc)
amlodipine besylate tab 10 mg (base equivalent) (Norvasc)
amlodipine besylate-benazepril hcl cap 2.5-10 mg
amlodipine besylate-benazepril hcl cap 5-10 mg (Lotrel)
amlodipine besylate-benazepril hcl cap 5-20 mg (Lotrel)
amlodipine besylate-benazepril hcl cap 5-40 mg
amlodipine besylate-benazepril hcl cap 10-20 mg (Lotrel)
amlodipine besylate-benazepril hcl cap 10-40 mg (Lotrel)
amlodipine besylate-olmesartan medoxomil tab 5-20 mg (Azor)
amlodipine besylate-olmesartan medoxomil tab 5-40 mg (Azor)
amlodipine besylate-olmesartan medoxomil tab 10-20 mg (Azor)
amlodipine besylate-olmesartan medoxomil tab 10-40 mg (Azor)
amlodipine besylate-valsartan tab 5-160 mg (Exforge)
amlodipine besylate-valsartan tab 5-320 mg (Exforge)
amlodipine besylate-valsartan tab 10-160 mg (Exforge)
amlodipine besylate-valsartan tab 10-320 mg (Exforge)
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg (Exforge hct)
amlodipine-valsartan-hydrochlorothiazide tab 5-160-25 mg (Exforge hct)
amlodipine-valsartan-hydrochlorothiazide tab 10-160-12.5 mg (Exforge hct)
amlodipine-valsartan-hydrochlorothiazide tab 10-160-25 mg (Exforge hct)
amlodipine-valsartan-hydrochlorothiazide tab 10-320-25 mg (Exforge hct)
atenolol tab 25 mg (Tenormin)
atenolol tab 50 mg (Tenormin)
atenolol tab 100 mg (Tenormin)
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)
benazepril hcl tab 5 mg
benazepril hcl tab 10 mg (Lotensin)
benazepril hcl tab 20 mg (Lotensin)
benazepril hcl tab 40 mg (Lotensin)
benazepril & hydrochlorothiazide tab 5-6.25 mg

HIGH BLOOD PRESSURE (CONTINUED)

benazepril & hydrochlorothiazide tab 10-12.5 mg (Lotensin hct)
benazepril & hydrochlorothiazide tab 20-12.5 mg (Lotensin hct)
benazepril & hydrochlorothiazide tab 20-25 mg (Lotensin hct)
betaxolol hcl tab 10 mg
betaxolol hcl tab 20 mg
bisoprolol fumarate tab 5 mg
bisoprolol fumarate tab 10 mg
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg (Ziac)
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)
bisoprolol & hydrochlorothiazide tab 10-6.25 mg (Ziac)
bumetanide tab 0.5 mg (Bumex)
bumetanide tab 1 mg
bumetanide tab 2 mg
candesartan cilexetil tab 4 mg (Atacand)
candesartan cilexetil tab 8 mg (Atacand)
candesartan cilexetil tab 16 mg (Atacand)
candesartan cilexetil tab 32 mg (Atacand)
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg (Atacand hct)
candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg (Atacand hct)
candesartan cilexetil-hydrochlorothiazide tab 32-25 mg (Atacand hct)
captopril tab 12.5 mg
captopril tab 25 mg

captopril tab 50 mg
captopril tab 100 mg
carvedilol tab 3.125 mg (Coreg)
carvedilol tab 6.25 mg (Coreg)
carvedilol tab 12.5 mg (Coreg)
carvedilol tab 25 mg (Coreg)
chlorthalidone tab 25 mg
chlorthalidone tab 50 mg
clonidine hcl tab 0.1 mg
clonidine hcl tab 0.2 mg
clonidine hcl tab 0.3 mg
clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)
clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)
clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)
diltiazem hcl tab 30 mg (Cardizem)
diltiazem hcl tab 60 mg (Cardizem)
diltiazem hcl tab 90 mg
diltiazem hcl tab 120 mg (Cardizem)
diltiazem hcl cap er 12hr 60 mg
diltiazem hcl cap er 12hr 90 mg
diltiazem hcl cap er 12hr 120 mg
diltiazem hcl cap er 24hr 120 mg
diltiazem hcl cap er 24hr 180 mg

HIGH BLOOD PRESSURE (CONTINUED)

diltiazem hcl cap er 24hr 240 mg
diltiazem hcl coated beads cap er 24hr 120 mg (Cardizem cd)
diltiazem hcl coated beads cap er 24hr 180 mg (Cardizem cd)
diltiazem hcl coated beads cap er 24hr 240 mg (Cardizem cd)
diltiazem hcl coated beads cap er 24hr 300 mg (Cardizem cd)
diltiazem hcl extended-release beads cap er 24hr 120 mg (Tiazac)
diltiazem hcl extended-release beads cap er 24hr 180 mg (Tiazac)
diltiazem hcl extended-release beads cap er 24hr 240 mg (Tiazac)
diltiazem hcl extended-release beads cap er 24hr 300 mg (Tiazac)
diltiazem hcl extended-release beads cap er 24hr 360 mg (Tiazac)
diltiazem hcl extended-release beads cap er 24hr 420 mg (Tiazac)
diltiazem hcl extended-release tabs 24hr 120 mg (Cardizem la)
doxazosin mesylate tab 1 mg (Cardura)
doxazosin mesylate tab 2 mg (Cardura)
doxazosin mesylate tab 4 mg (Cardura)
doxazosin mesylate tab 8 mg (Cardura)
enalapril maleate oral soln 1 mg/ml (Epaned)
enalapril maleate tab 2.5 mg (Vasotec)
enalapril maleate tab 5 mg (Vasotec)
enalapril maleate tab 10 mg (Vasotec)
enalapril maleate tab 20 mg (Vasotec)
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)
eplerenone tab 25 mg (Inspira)
eplerenone tab 50 mg (Inspira)
felodipine tab er 24hr 2.5 mg
felodipine tab er 24hr 5 mg
felodipine tab er 24hr 10 mg
fosinopril sodium tab 10 mg
fosinopril sodium tab 20 mg
fosinopril sodium tab 40 mg
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg
fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg
furosemide oral soln 10 mg/ml
furosemide tab 20 mg (Lasix)
furosemide tab 40 mg (Lasix)

furosemide tab 80 mg (Lasix)
guanfacine hcl tab 1 mg
guanfacine hcl tab 2 mg
hydralazine hcl tab 10 mg
hydralazine hcl tab 25 mg
hydralazine hcl tab 50 mg

HIGH BLOOD PRESSURE (CONTINUED)

hydralazine hcl tab 100 mg
hydrochlorothiazide cap 12.5 mg
hydrochlorothiazide tab 12.5 mg
hydrochlorothiazide tab 25 mg
hydrochlorothiazide tab 50 mg
indapamide tab 1.25 mg
indapamide tab 2.5 mg
irbesartan tab 75 mg (Avapro)
irbesartan tab 150 mg (Avapro)
irbesartan tab 300 mg (Avapro)
irbesartan-hydrochlorothiazide tab 150-12.5 mg (Avalide)
irbesartan-hydrochlorothiazide tab 300-12.5 mg (Avalide)
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)
isradipine cap 2.5 mg
isradipine cap 5 mg
labetalol hcl tab 100 mg
labetalol hcl tab 200 mg
labetalol hcl tab 300 mg
lisinopril & hydrochlorothiazide tab 10-12.5 mg (Zestoretic)
lisinopril & hydrochlorothiazide tab 20-12.5 mg (Zestoretic)
lisinopril & hydrochlorothiazide tab 20-25 mg (Zestoretic)
lisinopril tab 2.5 mg (Zestril)
lisinopril tab 5 mg (Zestril)
lisinopril tab 10 mg (Zestril)
lisinopril tab 20 mg (Zestril)
lisinopril tab 30 mg (Zestril)
lisinopril tab 40 mg (Zestril)
losartan potassium & hydrochlorothiazide tab 50-12.5 mg (Hyzaar)
losartan potassium & hydrochlorothiazide tab 100-12.5 mg (Hyzaar)
losartan potassium & hydrochlorothiazide tab 100-25 mg (Hyzaar)
losartan potassium tab 25 mg (Cozaar)
losartan potassium tab 50 mg (Cozaar)
losartan potassium tab 100 mg (Cozaar)
metolazone tab 2.5 mg
metolazone tab 5 mg
metolazone tab 10 mg
metoprolol & hydrochlorothiazide tab 50-25 mg
metoprolol & hydrochlorothiazide tab 100-25 mg
metoprolol & hydrochlorothiazide tab 100-50 mg
metoprolol succinate tab er 24hr 25 mg (tartrate equiv) (Toprol xl)
metoprolol succinate tab er 24hr 50 mg (tartrate equiv) (Toprol xl)
metoprolol succinate tab er 24hr 100 mg (tartrate equiv) (Toprol xl)
metoprolol succinate tab er 24hr 200 mg (tartrate equiv) (Toprol xl)
metoprolol tartrate tab 25 mg

HIGH BLOOD PRESSURE (CONTINUED)

metoprolol tartrate tab 37.5 mg
metoprolol tartrate tab 50 mg (Lopressor)
metoprolol tartrate tab 75 mg
metoprolol tartrate tab 100 mg (Lopressor)
minoxidil tab 2.5 mg
minoxidil tab 10 mg
moexipril hcl tab 7.5 mg

moexipril hcl tab 15 mg
nadolol tab 20 mg (Corgard)
nadolol tab 40 mg (Corgard)
nadolol tab 80 mg
nebivolol hcl tab 2.5 mg (base equivalent) (Bystolic)
nebivolol hcl tab 5 mg (base equivalent) (Bystolic)
nebivolol hcl tab 10 mg (base equivalent) (Bystolic)
nebivolol hcl tab 20 mg (base equivalent) (Bystolic)
nicardipine hcl cap 20 mg
nicardipine hcl cap 30 mg
nifedipine cap 10 mg
nifedipine cap 20 mg
nifedipine tab er 24hr 30 mg
nifedipine tab er 24hr 60 mg
nifedipine tab er 24hr 90 mg
nifedipine tab er 24hr osmotic release 30 mg (Procardia xl)
nifedipine tab er 24hr osmotic release 60 mg (Procardia xl)
nifedipine tab er 24hr osmotic release 90 mg (Procardia xl)
olmesartan medoxomil tab 5 mg (Benicar)
olmesartan medoxomil tab 20 mg (Benicar)
olmesartan medoxomil tab 40 mg (Benicar)
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg (Benicar hct)
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg (Benicar hct)
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg (Benicar hct)
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg (Tribenzor)
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg (Tribenzor)
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg (Tribenzor)
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg (Tribenzor)
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg (Tribenzor)
perindopril erbumine tab 2 mg
perindopril erbumine tab 4 mg
phenoxybenzamine hcl cap 10 mg (Dibenzyline)
pindolol tab 5 mg
pindolol tab 10 mg
prazosin hcl cap 1 mg (Minipress)
prazosin hcl cap 2 mg (Minipress)

HIGH BLOOD PRESSURE (CONTINUED)

prazosin hcl cap 5 mg (Minipress)
propranolol hcl oral soln 20 mg/5ml
propranolol hcl tab 10 mg
propranolol hcl tab 20 mg
propranolol hcl tab 40 mg
propranolol hcl tab 60 mg
propranolol hcl tab 80 mg
propranolol hcl cap er 24hr 60 mg (Inderal la)
propranolol hcl cap er 24hr 80 mg (Inderal la)
propranolol hcl cap er 24hr 120 mg (Inderal la)
propranolol hcl cap er 24hr 160 mg (Inderal la)
quinapril hcl tab 5 mg (Accupril)
quinapril hcl tab 10 mg (Accupril)
quinapril hcl tab 20 mg (Accupril)
quinapril hcl tab 40 mg (Accupril)
ramipril cap 1.25 mg (Altace)
ramipril cap 2.5 mg (Altace)
ramipril cap 5 mg (Altace)
ramipril cap 10 mg (Altace)
spironolactone tab 25 mg (Aldactone)
spironolactone tab 50 mg (Aldactone)
spironolactone tab 100 mg (Aldactone)
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)

telmisartan tab 20 mg (Micardis)
telmisartan tab 40 mg (Micardis)
telmisartan tab 80 mg (Micardis)
terazosin hcl cap 1 mg (base equivalent)
terazosin hcl cap 2 mg (base equivalent)
terazosin hcl cap 5 mg (base equivalent)
terazosin hcl cap 10 mg (base equivalent)
timolol maleate tab 10 mg
torsemide tab 5 mg
torsemide tab 10 mg
torsemide tab 20 mg
torsemide tab 100 mg
trandolapril tab 1 mg
trandolapril tab 2 mg
trandolapril tab 4 mg
triamterene & hydrochlorothiazide cap 37.5-25 mg
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)
triamterene cap 50 mg (Dyrenium)
triamterene cap 100 mg (Dyrenium)
valsartan tab 40 mg (Diovan)
valsartan tab 80 mg (Diovan)
valsartan tab 160 mg (Diovan)
valsartan tab 320 mg (Diovan)
valsartan-hydrochlorothiazide tab 80-12.5 mg (Diovan hct)
valsartan-hydrochlorothiazide tab 160-12.5 mg (Diovan hct)
valsartan-hydrochlorothiazide tab 160-25 mg (Diovan hct)

HIGH BLOOD PRESSURE (CONTINUED)

valsartan-hydrochlorothiazide tab 320-12.5 mg (Diovan hct)
valsartan-hydrochlorothiazide tab 320-25 mg (Diovan hct)
verapamil hcl cap er 24hr 120 mg (Verelan)
verapamil hcl cap er 24hr 180 mg (Verelan)
verapamil hcl cap er 24hr 240 mg (Verelan)
verapamil hcl tab er 120 mg (Calan sr)
verapamil hcl tab er 180 mg (Calan sr)
verapamil hcl tab er 240 mg (Calan sr)
verapamil hcl tab 40 mg
verapamil hcl tab 80 mg
verapamil hcl tab 120 mg

HIGH CHOLESTEROL

atorvastatin calcium tab 10 mg (base equivalent) (Lipitor)
atorvastatin calcium tab 20 mg (base equivalent) (Lipitor)
atorvastatin calcium tab 40 mg (base equivalent) (Lipitor)
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)
cholestyramine light powder 4 gm/dose (Questran light)
cholestyramine powder 4 gm/dose (Questran)
colesevelam hcl tab 625 mg (Welchol)
colestipol hcl granules 5 gm (Colestid flavored)
colestipol hcl granule packets 5 gm (Colestid flavored)
colestipol hcl tab 1 gm (Colestid)
ezetimibe tab 10 mg (Zetia)
ezetimibe-simvastatin tab 10-10 mg (Vytorin)
ezetimibe-simvastatin tab 10-20 mg (Vytorin)
ezetimibe-simvastatin tab 10-40 mg (Vytorin)
ezetimibe-simvastatin tab 10-80 mg (Vytorin)
fenofibrate micronized cap 67 mg
fenofibrate micronized cap 134 mg
fenofibrate micronized cap 200 mg

fenofibrate tab 48 mg (Tricor)
fenofibrate tab 54 mg
fenofibrate tab 145 mg (Tricor)
fenofibrate tab 160 mg
gemfibrozil tab 600 mg (Lopid)
lovastatin tab 10 mg
lovastatin tab 20 mg
lovastatin tab 40 mg
niacin tab er 500 mg (antihyperlipidemic)
niacin tab er 750 mg (antihyperlipidemic)
niacin tab er 1000 mg (antihyperlipidemic)
pravastatin sodium tab 10 mg
pravastatin sodium tab 20 mg
pravastatin sodium tab 40 mg
pravastatin sodium tab 80 mg
rosuvastatin calcium tab 5 mg (Crestor)
rosuvastatin calcium tab 10 mg (Crestor)

HIGH CHOLESTEROL (CONTINUED)

rosuvastatin calcium tab 20 mg (Crestor)
rosuvastatin calcium tab 40 mg (Crestor)
simvastatin tab 5 mg
simvastatin tab 10 mg (Zocor)
simvastatin tab 20 mg (Zocor)
simvastatin tab 40 mg (Zocor)
simvastatin tab 80 mg



NOTICE OF NONDISCRIMINATION PRACTICES

Effective July 18, 2016

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or gender. Blue Cross does not exclude people or treat them differently because of race, color, national origin, age, disability, or gender.

Blue Cross provides resources to access information in alternative formats and languages:

- Auxiliary aids and services, such as qualified interpreters and written information available in other formats, are available free of charge to people with disabilities to assist in communicating with us.
- Language services, such as qualified interpreters and information written in other languages, are available free of charge to people whose primary language is not English.

If you need these services, contact us at 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711.

If you believe that Blue Cross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or gender, you can file a grievance with the Nondiscrimination Civil Rights Coordinator

- by email at: Civil.Rights.Coord@bluecrossmn.com
- by mail at: Nondiscrimination Civil Rights Coordinator
Blue Cross and Blue Shield of Minnesota and Blue Plus
M495
PO Box 64560
Eagan, MN 55164-0560
- or by phone at: 1-800-509-5312

Grievance forms are available by contacting us at the contacts listed above, by calling 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711. If you need help filing a grievance, assistance is available by contacting us at the numbers listed above.

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>
- by phone at:
1-800-368-1019 or 1-800-537-7697 (TDD)
- or by mail at:
U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F
HHH Building
Washington, DC 20201

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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This information is available in other languages. Free language assistance services are available by calling the toll free number below. For TTY, call 711.

Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al 1-855-903-2583. Para TTY, llame al 711.

Yog tias koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-793-6931. Rau TTY, hu rau 711.

Haddii aad ku hadasho Soomaali, adigu waxaad heli kartaa caawimo luqad lacag la'aan ah. Wac 1-866-251-6736. Markay tahay dad maqalku ku adag yahay (TTY), wac 711.

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t*D><Aut 711 wuh>I

يصلنا فقاهم 1-9123-569-866 مقر لاب لصنا. بیناجملا قیوغلا قدعا سملا تامد خ کل رفوتت، پیر علا ثدحتت تک اذی
مقر لاب لصنا 711.

Nếu quý vị nói Tiếng Việt, có sẵn các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Gọi số 1-855-315-4015. Người dùng TTY xin gọi 711.

Afaan Oromoo dubbattu yoo ta'e, tajaajila gargaarsa afaan hiikuu kaffaltii malee. Argachuuf 1-855-315-4016 bilbilaa. TTY dhaaf, 711 bilbilaa.

如果您說中文，我們可以為您提供免費的語言協助服務。請撥打 1-855-315-4017。聽語障專 (TTY)，請撥打 711。

Если Вы говорите по-русски, Вы можете воспользоваться бесплатными услугами переводчика. Звоните 1-855-315-4028. Для использования телефонного аппарата с текстовым выходом звоните 711.

Si vous parlez français, des services d'assistance linguistique sont disponibles gratuitement. Appelez le +1-855-315-4029. Pour les personnes malentendantes,appelez le 711.

አማርኛ የሚኖሩ ክፍል: እኔ የቃንቃ አገልግሎት እርዳ አለበት:: በ 1-855-315-4030 ደደዣሳ ለ TTY በ 711::

한국어를 사용하시는 경우, 무료 언어 지원 서비스가 제공됩니다. 1-855-904-2583 으로 전화하십시오. TTY 사용자는 711 로 전화하십시오.

ຖາງເອງເວັບເວົາໄລ້, ມການບວກເຈົ້າຂອງທີ່ມີເວັບເວົາໃຫຍ່ເອົາເພີ. ໃຫ້ໃຫ້ 1-866-356-2423 ສາວບ. TTY, ໃຫ້ໃຫ້ 711.

Kung nagsasalita kayo ng Tagalog, mayroon kayong magagamit na libreng tulong na mga serbisyo sa wika. Tumawag sa 1-866-537-7720. Para sa TTY, tumawag sa 711.

Wenn Sie Deutsch sprechen, steht Ihnen fremdsprachliche Unterstützung zur Verfügung. Wählen Sie 1-866-289-7402. Für TTY wählen Sie 711.

ປະເທດອິນດີ ພົມ ຂອງພົມ ພົມ ພົມ ພົມ ພົມ ພົມ ພົມ ພົມ ພົມ 1-855-906-2583 ພົມ ພົມ
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Din4 k'ehj7 y1n7[t'i'go saad bee y1t'i' 47 t'1]j77k'e bee n7k1'a'doowo[go 47 n1'ahoot'i'. Koj8 47 b44sh bee hod77lnih 1-855-902-2583. TTY biniiy4go 47 711 j8' b44sh bee hod77lnih.