



**2018 Generic Only
Preventive Drug List for
Consumer Driven Health Plans
Core List**



Alphabetical Listing – Generic Only Core List

A

acebutolol
 Afeditab
 alendronate
 amiloride
 amiloride-
 hydrochlorothiazide
 amlodipine
 amlodipine-benazepril
 amlodipine-olmesartan **E**
 amlodipine-olmesartan-
 hydrochlorothiazide **E**
 amlodipine-valsartan
 amlodipine-valsartan-
 hydrochlorothiazide **E**
 anastrozole
 aspirin-dipyridamole
 atenolol
 atenolol-chlorthalidone
 atorvastatin
 azathioprine

B

benazepril
 benazepril-
 hydrochlorothiazide
 betaxolol*
 bisoprolol
 bisoprolol-
 hydrochlorothiazide
 bumetanide

C

calcitonin (salmon)
 candesartan
 candesartan-
 hydrochlorothiazide
 captopril
 captopril-
 hydrochlorothiazide
 Cartia XT
 carvedilol
 chlorothiazide
 cholestyramine
 cholestyramine light
 choline fenofibrate **E**
 cilostazol
 clonidine
 clonidine patch
 clopidogrel
 colestipol
 cyclosporine

D

Dilt CD
 Dilt XR
 Diltia XT
 diltiazem
 diltiazem ER
 Diltzac ER
 dipyridamole
 doxazosin

E

enalapril
 enalapril-
 hydrochlorothiazide
 enoxaparin
 eplerenone
 eprosartan
 ethacrynic acid
 etidronate
 exemestane
 ezetimibe

F

felodipine ER
 fenofibrate 43, 50, 67,
 130, 134, 150, 200 mg
 capsule **E**
 fenofibrate 40, 48, 120,
 145 mg tablet **E**
 fenofibrate 54, 160 mg
 tablet
 fenofibric acid **E**
 fluvastatin
 fluvastatin ER
 fondaparinux
 fosinopril
 fosinopril-
 hydrochlorothiazide
 furosemide

G

gemfibrozil
 Gengraf
 guanfacine

H

heparin
 hydralazine
 hydrochlorothiazide

I

ibandronate
 indapamide
 irbesartan
 irbesartan-
 hydrochlorothiazide
 isradipine

J

Jantoven

L

labetalol
 letrozole
 lisinopril
 lisinopril-
 hydrochlorothiazide
 losartan
 losartan-
 hydrochlorothiazide
 lovastatin

M

Matzim LA
 methylothiazide
 methyldopa
 methyldopa-
 hydrochlorothiazide
 metolazone
 metoprolol 37.5, 75 mg **E**
 metoprolol succinate
 metoprolol tartrate
 metoprolol-
 hydrochlorothiazide
 minoxidil
 moexipril
 moexipril-
 hydrochlorothiazide
 mycophenolate
 mycophenolic acid

N

nadolol
 nadolol-
 bendroflumethazide
 niacin extended-release
 nicardipine
 nifedipine
 nifedipine ER
 nimodipine
 nisoldipine

O

olmesartan
 olmesartan-
 hydrochlorothiazide
 omega-3 acid ethyl esters

P

Pediatric Fluoride
 Preparations
 (generic only)
 perindopril
 pindolol
 pravastatin
 prazosin
 Prenatal Vitamins
 (generic only)
 Prevalite
 propranolol
 propranolol-
 hydrochlorothiazide

Q

quinapril
 quinapril-
 hydrochlorothiazide

R

raloxifene
 ramipril
 reserpine
 risedronate
 rosuvastatin

S

simvastatin
 simvastatin/ezetimibe
 sirolimus
 spironolactone
 spironolactone-
 hydrochlorothiazide

T

tacrolimus
 tamoxifen
 Taztia XT
 telmisartan
 telmisartan-amlodipine **E**
 telmisartan-
 hydrochlorothiazide
 terazosin
 ticlopidine
 timolol*
 torsemide
 trandolapril
 trandolapril-verapamil
 triamterene-
 hydrochlorothiazide

V

valsartan
 valsartan-
 hydrochlorothiazide
 verapamil
 verapamil ER

W

warfarin

*Coverage is provided for oral formulations.

Listing by Therapeutic Category – Generic Only Core List

Breast Cancer Prevention

anastrozole
 exemestane
 letrozole
 tamoxifen

Cardiovascular/Heart Disease - Blood Clot/Platelet Therapy

aspirin-dipyridamole
 cilostazol
 clopidogrel
 dipyridamole
 enoxaparin
 fondaparinux
 heparin
 Jantoven
 ticlopidine
 warfarin

Cardiovascular/Heart Disease - High Blood Pressure

acebutolol
 Afeditab
 amiloride
 amiloride-hydrochlorothiazide
 amlodipine
 amlodipine-benazepril
 amlodipine-olmesartan **E**
 amlodipine-olmesartan-hydrochlorothiazide **E**
 amlodipine-valsartan
 amlodipine-valsartan-hydrochlorothiazide **E**
 atenolol
 atenolol-chlorthalidone
 benazepril
 benazepril-hydrochlorothiazide
 betaxolol*
 bisoprolol
 bisoprolol-hydrochlorothiazide
 bumetanide
 candesartan
 candesartan-hydrochlorothiazide
 captopril
 captopril-hydrochlorothiazide
 Cartia XT
 carvedilol
 chlorothiazide
 clonidine
 clonidine patch
 Dilt CD
 Dilt XR
 Diltia XT
 diltiazem
 diltiazem ER
 Diltzac ER
 doxazosin
 enalapril
 enalapril-hydrochlorothiazide
 eplerenone
 eprosartan
 ethacrynic acid
 felodipine ER

fosinopril
 fosinopril-hydrochlorothiazide
 furosemide
 guanfacine
 hydralazine
 hydrochlorothiazide
 indapamide
 irbesartan
 irbesartan-hydrochlorothiazide
 isradipine
 labetalol
 lisinopril
 lisinopril-hydrochlorothiazide
 losartan
 losartan-hydrochlorothiazide
 Matzim LA
 methyclothiazide
 methyldopa
 methyldopa-hydrochlorothiazide
 metolazone
 metoprolol 37.5, 75 mg **E**
 metoprolol succinate
 metoprolol tartrate
 metoprolol-hydrochlorothiazide
 minoxidil
 moexipril
 moexipril-hydrochlorothiazide
 nadolol
 nadolol-bendroflumethazide
 nifedipine
 nifedipine ER
 nimodipine
 nisoldipine
 olmesartan
 olmesartan-hydrochlorothiazide
 perindopril
 pindolol
 prazosin
 propranolol
 propranolol-hydrochlorothiazide
 quinapril
 quinapril-hydrochlorothiazide
 ramipril
 reserpine
 spironolactone
 spironolactone-hydrochlorothiazide
 Taztia XT
 telmisartan
 telmisartan-amlodipine **E**
 telmisartan-hydrochlorothiazide
 terazosin
 timolol*
 torsemide
 trandolapril
 trandolapril-verapamil
 triamterene-hydrochlorothiazide
 valsartan
 valsartan-hydrochlorothiazide
 verapamil
 verapamil ER

*Coverage is provided for oral formulations.

Listing by Therapeutic Category – Generic Only Core List

Cardiovascular/Heart Disease - High Cholesterol

atorvastatin
cholestyramine
cholestyramine light
choline fenofibrate **E**
colestipol
ezetimibe
fenofibrate 43, 50, 67, 130, 134, 150, 200 mg capsule **E**
fenofibrate 40, 48, 120, 145 mg tablet **E**
fenofibrate 54, 160 mg tablet
fenofibric acid **E**
fluvastatin
fluvastatin ER
gemfibrozil
lovastatin
niacin extended-release
omega-3 acid ethyl esters
pravastatin
Prevalite
rosuvastatin
simvastatin
simvastatin/ezetimibe

Immunosuppressant - Organ Rejection

azathioprine
cyclosporine
Gengraf
mycophenolate
mycophenolic acid
sirolimus
tacrolimus

Musculoskeletal - Osteoporosis

alendronate
calcitonin (salmon)
etidronate
ibandronate
raloxifene
risedronate

Vitamins

Pediatric Fluoride Preparations (Generic Products)
Prenatal Vitamins (for example: Generic Products)

If you have pharmacy benefit coverage with UnitedHealthcare, you may learn more about your benefit by visiting myuhc.com[®] or by calling the toll-free member phone number on your ID card. If you are not currently enrolled with UnitedHealthcare for pharmacy benefit coverage, you may access myuhc.com for additional information during your open enrollment period or you may contact your employer or health plan for additional information.

Medications are categorized by common therapeutic conditions in this reference guide for ease of reference only. These categories do not determine coverage for the medication for your condition. Your benefit plan determines how these medications may be covered for you.

Where differences are noted between this reference guide and your benefit plan documents, the benefit plan documents will govern.

*Coverage is provided for oral formulations.

Clinical programs such as Notification/Prior Authorization, Step Therapy and Supply Limits may apply to listed medications based off your benefit plan.

This list is intended as a reference and may not be all-inclusive. Brand or generic availability may not be current due to changes in the market. The list will be updated annually.

UnitedHealthcare does not indemnify employers for the application of these preventive medications or specific medications under the benefit plan and makes no assertions as to the compliance of the medications listed with IRS regulations.

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If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

Online: UHC_Civil_Rights@uhc.com

Mail: Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, Utah 84130

You must send the complaint within 60 days of your experience. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free phone number listed on your ID card, TTY 711, Monday through Friday, 8 a.m. to 8 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

Online: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>

Phone: Toll free **1-800-368-1019**, 1-800-537-7697 (TDD)

Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue
SW Room 509F, HHH Building
Washington, D.C. 20201

We provide free services to help you communicate with us, including letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your ID card TTY 711, Monday through Friday, 8 a.m. to 8 p.m.



Multi-language interpreter services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (**Chinese**)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어(**Korean**)를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является **русском (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث العربية (**Arabic**)، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniłmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia l'**italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項：日本語(**Japanese**)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。健康保険証に記載されているフリーダイヤルにお電話ください。

توجه: اگر زبان شما فارسی (**Farsi**) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xovtooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ភាសាខ្មែរ (Khmer)**សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

Díí BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yánit'i'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shqoqdí ninaaltsoos nit'i'izí bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'í bik'á'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.