



**BlueCross BlueShield**  
of Illinois



# Preventive Drug Benefit Program

## Employee Guide

Effective January 1, 2026

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,  
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

# Preventive Drug Benefit Program

## Introduction

Blue Cross and Blue Shield of Illinois administers the preventive drug benefit for your group's high deductible health plan, which has been designed for use with Health Savings Accounts. The preventive drug benefit program includes categories of prescription drugs that are often used for preventive purposes. If your doctor has prescribed any of them to you or to your HDHP-covered dependents for preventive purposes, your HDHP may pay for the drugs before you meet your HDHP deductible.

This guide is being provided as a resource to help you manage your prescription drug benefits under your employer's HDHP. It includes some commonly, but not all, drugs that are prescribed for preventive purposes.

The drugs listed in this guide will be reviewed from time to time and are subject to change. Coverage of all medications is still subject to your HDHP limits, exclusions and out-of-pocket requirements (for example, your prescription drug payment levels). Coverage of some medications or drug products may be under your medical benefit. Please verify with your benefit plan if there are any additional requirements before a drug may be covered.

**IMPORTANT REMINDER: These drugs could also at times be prescribed for treatment purposes. As a result, the listing of a drug in the Guide does not mean that it will be covered by your benefit plan before your HDHP deductible is satisfied. If your doctor has prescribed a listed drug for treatment purposes (and not preventive purposes) then your plan does not provide coverage for that drug before your HDHP deductible is satisfied.**

As each individual's medical circumstances are different, and because proper classification is necessary for you to ensure you are complying with applicable HDHP tax requirements, it is important for you to confirm the purpose of the prescription with your doctor. Please call the number on your member ID card when your doctor confirms for you that they prescribed one of the listed drugs for treatment purposes so your claims can be processed correctly. **Unless you provide us with this information, claims for the drugs listed in the Guide will be processed as "preventive," and you or your doctor may be asked by us to provide medical records showing that the drug you're taking is being used for prevention. Remember, if you improperly classify the drug, it may result in adverse tax consequences so please be sure to take the confirming step to properly classify your claim.**

**Please follow these steps to make sure you are properly classifying the purpose of your prescription:**

1. Find your drug in the Guide.
2. Talk to your doctor about whether your drug is in fact being prescribed for preventive purposes (and not treatment purposes).
3. If prescribed for treatment purposes, call the number on your ID card to let us know.
4. If prescribed for preventive purposes, there is no need to call.

# 2026 Standard HDHP-HSA Common Preventive Drug List

The preventive drug program currently includes prescription drugs in the following categories:

- Anti-coagulants / anti-platelets
- Bowel prep medications
- Breast cancer primary prevention
- Contraceptives
- Depression
- Diabetes medications
- Diabetic supplies
- Fluoride supplements
- High blood pressure
- High cholesterol orals
- Osteoporosis
- Respiratory
- Tobacco cessation
- Vaccines

The drugs in each category are listed alphabetically on the following pages.

- Generic drugs are listed in **bold**.
- Brand drugs are listed in all CAPITAL letters.
- Some strengths and/or formulations may not be covered.
- Brand names in parenthesis are listed for reference and are not covered under the benefit.



This drug/drug category may also be included under the Affordable Care Act coverage of preventive services. These products have limited or \$0 member cost-sharing (copay or co-insurance), when meeting the conditions as outlined under the regulation and when you use a pharmacy or doctor in your health plan's network. Not all products covered under the ACA are shown. Coverage can vary based on your benefit plan and/or prescription drug list. Call the number on your member ID card if you have any questions and to find out what you may pay.

**REMEMBER: Just because a drug is on the preventive drug benefit list, doesn't always mean it is covered. It also doesn't mean that it may be covered by your benefit plan before your HDHP deductible is satisfied. Coverage of all medications is still subject to your plan benefits. Please see your benefit plan materials for coverage details, or call the number on your member ID card.**

**Health Savings Accounts have tax and legal ramifications. Blue Cross and Blue Shield of Illinois does not provide legal or tax advice, and nothing herein should be construed as legal or tax advice. These materials, and any tax-related statements in them, are not intended or written to be used, and cannot be used or relied on, for the purpose of avoiding tax penalties. Tax-related statements, if any, may have been written in connection with the promotion or marketing of the transaction(s) or matter(s) addressed by these materials. You should seek advice based on your particular circumstances from an independent tax advisor regarding the tax consequences of specific health insurance plans or products.**

# 2026 Standard HDHP-HSA Common Preventive Drug List

## Anti-Coagulants / Anti-Platelets

anagrelide hcl cap 0.5 mg (Agrylin)  
anagrelide hcl cap 1 mg  
aspirin-dipyridamole cap er 12hr  
25-200 mg  
cilostazol tab 50 mg, 100 mg  
clopidogrel bisulfate tab  
75 mg (base equivalent) (Plavix)  
dabigatran etexilate mesylate cap  
75 mg, 110 mg, 150 mg  
(etexilate base eq) (Pradaxa)  
dipyridamole tab 25 mg, 50 mg,  
75 mg  
prasugrel hcl tab 5 mg, 10 mg  
(base equiv) (Effient)  
rivaroxaban tab 2.5 mg (Xarelto)  
ticagrelor tab 60 mg, 90 mg  
(Brilinta)  
warfarin sodium tab 1 mg, 2 mg,  
2.5 mg, 3 mg, 4 mg, 5 mg,  
6 mg, 7.5 mg, 10 mg

## Bowel Prep Medications

peg 3350-kcl-na bicarb-nacl-na  
sulfate for soln 236 gm  
(Golytely)  
peg 3350-kcl-nacl-na sulfate-na  
ascorbate-c for soln 100 gm  
(Moviprep)  
peg 3350-kcl-sod bicarb-nacl for  
soln 420 gm

## Breast Cancer

### Primary Prevention

raloxifene hcl tab 60 mg (Evista)  
tamoxifen citrate tab 10 mg,  
20 mg (base equivalent)

## Contraceptives

### Cervical Caps

FEMCAP – cervical cap 22 mm,  
26 mm, 30 mm

## Diaphragms

CAYA – diaphragm arc-spring  
OMNIFLEX DIAPHRAGM –  
diaphragms  
WIDE-SEAL SILICONE DIAPHRAGM  
KIT – diaphragm wide seal 60 mm,  
65 mm, 70 mm, 75 mm, 80 mm,  
85 mm, 90 mm, 95 mm

## Female Condom

FC2 FEMALE CONDOM  
condoms – female

## Male Condom

ALL MALE CONDOMS

## Spermicide

ENCARE – nonoxynol-9 vaginal  
suppos 100 mg  
OPTIONS GYNOL II VAGINAL –  
nonoxynol-9 gel 3%  
VCF VAGINAL CONTRACEPTIVE  
FILM – nonoxynol-9 film 28%  
VCF VAGINAL CONTRACEPTIVE  
FOAM – nonoxynol-9 foam 12.5%

## Sponge

TODAY SPONGE – nonoxynol-9  
vaginal sponge 1000 mg

## Emergency Progestin

Aftera – levonorgestrel tab 1.5 mg  
(Plan B One-Step)  
Afterpill – levonorgestrel tab  
1.5 mg (Plan B One-Step)  
Econtra One Step – levonorgestrel  
tab 1.5 mg (Plan B One-Step)  
Her Style – levonorgestrel tab  
1.5 mg (Plan B One-Step)  
levonorgestrel tab 1.5 mg  
(Plan B One-Step)  
My Choice – levonorgestrel tab  
1.5 mg (Plan B One-Step)  
My Way – levonorgestrel tab  
1.5 mg (Plan B One-Step)  
New Day – levonorgestrel tab  
1.5 mg (Plan B One-Step)  
Opcicon One-Step – levonorgestrel  
tab 1.5 mg (Plan B One-Step)  
Option 2 – levonorgestrel tab  
1.5 mg (Plan B One-Step)

React – levonorgestrel tab 1.5 mg  
(Plan B One-Step)

Take Action – levonorgestrel tab  
1.5 mg (Plan B One-Step)

## Emergency Ella

ELLA – ulipristal acetate tab 30 mg

## Injectable Progestin

medroxyprogesterone acetate im  
susp prefilled syr 150 mg/mL  
(Depo-Provera Contraceptiv)  
medroxyprogesterone acetate im  
susp 150 mg/mL (Depo-Provera  
Contraceptiv)

## Oral Combined

Afirmelle – levonorgestrel &  
ethinyl estradiol tab  
0.1 mg-20 mcg  
Altavera – levonorgestrel & ethinyl  
estradiol tab 0.15 mg-30 mcg  
Alyacen 1/35 – norethindrone &  
ethinyl estradiol tab  
1 mg-35 mcg  
Alyacen 7/7/7 – norethindrone-eth  
estradiol tab  
0.5-35/0.75-35/1-35 mg-mcg  
Apri – desogestrel & ethinyl  
estradiol tab 0.15 mg-30 mcg  
Aranelle – norethindrone-eth  
estradiol tab  
0.5-35/1-35/0.5-35 mg-mcg  
Aubra eq – levonorgestrel &  
ethinyl estradiol tab  
0.1 mg-20 mcg  
Aurovela 1/20 – norethindrone ace  
& ethinyl estradiol tab  
1 mg-20 mcg  
Aurovela 1.5/30 – norethindrone  
ace & ethinyl estradiol tab  
1.5 mg-30 mcg  
Aurovela 24 fe – norethindrone  
ace-ethinyl estradiol-fe tab  
1 mg-20 mcg (24)  
Aurovela fe 1/20 – norethindrone  
ace & ethinyl estradiol-fe tab  
1 mg-20 mcg

# 2026 Standard HDHP-HSA Common Preventive Drug List

Aurovela fe 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)	Juleber – desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg
Averi – desogestrel-ethinyl estradiol-fe tab 0.15-0.03 mg	drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	Junel 1/20 – norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg
Aviane – levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	Junel 1.5/30 – norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg
Ayuna – levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Elinest – norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	Junel fe 1/20 – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg
Azurette – desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5)	Enpresse-28 – levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30 mg-mcg	Junel fe 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg
Balziva – norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	Enskyce – desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Junel fe 24 – norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)
Blisovi fe 1/20 – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	Estarylla – norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	Kaitlib fe – norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg
Blisovi fe 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg	Kalliga – desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg
Blisovi 24 fe – norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	Falmina – levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	Kariva – desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5)
Briellyn – norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	Feirza 1/20 – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	Kelnor 1/35 – ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg
Charlotte 24 fe – norethindrone ace/eth estradiol-fe chew tab 1 mg-20 mcg (24)	Feirza 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	Kelnor 1/50 – ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg
Chateal eq – levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Finzala – norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	Kurvelo – levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg
Cryselle-28 – norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	Hailey 1.5/30 – norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	Larin 1/20 – norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg
Cyred eq – desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Hailey 24 fe – norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	Larin 1.5/30 – norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg
Dasetta 1/35 – norethindrone & ethinyl estradiol tab 1 mg-35 mcg	Hailey fe 1/20 – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	Larin fe 1/20 – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg
Dasetta 7/7/7 – norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	Hailey fe 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	Larin fe 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg
Delyla – levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	Isibloom – desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5)	Jasmiel – drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	

# 2026 Standard HDHP-HSA Common Preventive Drug List

Larin 24 fe – norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	Mibelas 24 Fe – norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	Nylia 1/35 – norethindrone & ethinyl estradiol tab 1 mg-35 mcg
Layolis fe – norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	Microgestin 1/20 – norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	Nylia 7/7/7 – norethindrone-ethestradiol tab 0.5-35/0.75-35/1-35 mg-mcg
Leena – norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	Microgestin 1.5/30 – norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	Ocella – drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)
Lessina – levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	Microgestin fe 1/20 – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	Philith – norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg
Levonest – levonorgestrel-eth estradiol tab 0.05-30/0.075-40/0.125-30 mg-mcg	Microgestin fe 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	Pimtree – desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5)
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	Mili – norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	Portia-28 – levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg
levonorgestrel-eth estradiol tab 0.05-30/0.075-40/0.125-30 mg-mcg	Mono-Linyah – norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	Reclipsen – desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg
Levora 0.15/30-28 – levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Necon 0.5/35-28 – norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	Simliya – desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5)
Loestrin 1/20-21 – norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	Nikki – drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	Sprintec 28 – norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg
Loestrin 1.5/30-21 – norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg	Sronyx – levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg
Loestrin fe 1/20 – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg	Syeda – drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)
Loestrin fe 1.5/30 – norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	Tarina 24 fe – norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)
Lo-Zumandimine – drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	Tarina fe 1/20 eq – norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg
Loryna – drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg	Tilia fe – norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg
Low-Ogestrel – norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	Nortrel 0.5/35 (28) – norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	Tri-Estarylla – norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg
Lutera – levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	Nortrel 1/35 – norethindrone & ethinyl estradiol tab 1 mg-35 mcg	Tri-Legest fe – norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg
Marlissa – levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	Nortrel 7/7/7 – norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	

# 2026 Standard HDHP-HSA Common Preventive Drug List

Tri-Linyah – norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	Vylibra – norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	Jolessa – levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg
Tri-Lo-Estarylla – norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	Wera – norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg
Tri-Lo-Marzia – norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	Wymzya fe – norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	levonorg-eth est tab 0.1-0.02 mg (84) & eth est tab 0.01 mg (7)
Tri-Lo-Mili – norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	Xarah Fe – norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg
Tri-Lo-Sprintec – norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	Xelria Fe – norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg
Tri-Mili – norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	Zovia 1/35 – ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	Lojaimiess – levonorg-eth est tab 0.1-0.02 mg (84) & eth est tab 0.01 mg (7)
Tri-Sprintec – norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	Zumandimine – drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	Rivelsa – levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg
Tri-Vylibra – norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	<a href="#">Oral Extended Continuous</a>	Setlakin – levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg
Tri-Vylibra Lo – norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	Amethyst – levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	Simpesse – levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7)
Trivora-28 – levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30 mg-mcg	Ashlyna – levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7)	<a href="#">Oral Progestin</a>
Turqoz – norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	Camrese – levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7)	Camila – norethindrone tab 0.35 mg
Valtya 1/50 – ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	Camrese Lo – levonorg-eth est tab 0.1-0.02 mg (84) & eth est tab 0.01 mg (7)	Deblitane – norethindrone tab 0.35 mg
Vestura – drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	Daysee – levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7)	Emzahh – norethindrone tab 0.35 mg
Vienna – levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	Dolishale – levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	Errin – norethindrone tab 0.35 mg
Viorele – desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5)	Iclevia – levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	Heather – norethindrone tab 0.35 mg
Volnea – desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5)	Introvale – levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	Incassia – norethindrone tab 0.35 mg
Vyfemla – norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	Jaimiess – levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7)	Jencycla – norethindrone tab 0.35 mg
		Lyleq – norethindrone tab 0.35 mg
		Lyza – norethindrone tab 0.35 mg
		Nora-Be – norethindrone tab 0.35 mg
		norethindrone tab 0.35 mg

# 2026 Standard HDHP-HSA Common Preventive Drug List

Norlyroc – norethindrone tab  
0.35 mg

OPILL – norgestrel tab 0.075 mg

Sharobel – norethindrone tab  
0.35 mg

## Transdermal Combined

norelgestromin-ethinyl estradiol  
td ptwk 150-35 mcg/24hr

Xulane – norelgestromin-ethinyl  
estradiol td ptwk  
150-35 mcg/24hr

Zafemy – norelgestromin-ethinyl  
estradiol td ptwk  
150-35 mcg/24hr

## Vaginal Combined

NUVARING – etonogestrel-ethinyl  
estradiol va ring  
0.120-0.015 mg/24hr

## Depression

### Selective Serotonin Reuptake Inhibitors (SSRIs)

citalopram hydrobromide oral  
soln 10 mg/5 mL

citalopram hydrobromide tab  
10 mg, 20 mg, 40 mg  
(base equivalent) (Celexa)

escitalopram oxalate soln  
5 mg/5 mL (base equivalent)

escitalopram oxalate tab 5 mg,  
10 mg, 20 mg (base equivalent)  
(Lexapro)

fluoxetine hcl cap 10 mg, 20 mg,  
40 mg (Prozac)

fluoxetine hcl solution  
20 mg/5 mL

fluoxetine hcl tab 10 mg, 20 mg

paroxetine hcl tab 10 mg, 20 mg,  
30 mg, 40 mg (Paxil)

sertraline hcl oral concentrate for  
solution 20 mg/mL (Zoloft)

sertraline hcl tab 25 mg, 50 mg,  
100 mg (Zoloft)

## Diabetes Medications

### 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 FO –  
glucagon hcl for inj 1 mg

GVOKE HYPOPEN 1-PACK – glucagon  
subcutaneous solution auto-  
injector 0.5 mg/0.1 mL,  
1 mg/0.2 mL

GVOKE HYPOPEN 2-PACK – glucagon  
subcutaneous solution auto-  
injector 0.5 mg/0.1 mL,  
1 mg/0.2 mL

GVOKE KIT – glucagon subcutaneous  
soln 1 mg/0.2 mL

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

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

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

### Insulin Only

FIASP – insulin aspart (with  
niacinamide) inj 100 unit/mL

FIASP FLEXTOUCH – insulin aspart  
(with niacinamide) soln  
pen-injector 100 unit/mL

FIASP PENFILL – insulin aspart  
(with niacinamide) soln cartridge  
100 unit/mL

HUMALOG – insulin lispro inj soln  
100 unit/mL

HUMALOG – insulin lispro soln  
cartridge 100 unit/mL

HUMALOG JUNIOR KWIKPEN – insulin  
lispro soln pen-injector  
100 unit/mL (0.5 unit dial)

HUMALOG KWIKPEN – insulin lispro  
soln pen-injector  
100 unit/mL (1 unit dial),  
200 unit/mL

HUMALOG MIX 50/50 KWIKPEN –  
insulin lispro prot & lispro sus  
pen-inj 100 unit/mL (50-50)

HUMALOG MIX 75/25 – insulin lispro  
prot & lispro inj  
100 unit/mL (75-25)

HUMALOG MIX 75/25 KWIKPEN –  
insulin lispro prot & lispro sus  
pen-inj 100 unit/mL (75-25)

HUMALOG TEMPO PEN – insulin  
lispro soln pen-inj w/transmitter  
port 100 unit/mL

HUMULIN 70/30 – insulin nph  
isophane & regular human inj  
100 unit/mL (70-30)

HUMULIN 70/30 KWIKPEN – insulin  
nph & regular susp pen-inj  
100 unit/mL (70-30)

HUMULIN N – insulin nph (human)  
(isophane) inj 100 unit/mL

HUMULIN N KWIKPEN – insulin nph  
(human) (isophane) susp pen-  
injector 100 unit/mL

HUMULIN R – insulin regular (human)  
inj 100 unit/mL

HUMULIN R U-500 (CONCENTR –  
insulin regular (human) inj  
500 unit/mL

HUMULIN R U-500 KWIKPEN – insulin  
regular (human) soln pen-injector  
500 unit/mL

INSULIN GLARGINE-YFGN – insulin  
glargine-yfgn inj 100 unit/mL

INSULIN GLARGINE-YFGN – insulin  
glargine-yfgn soln pen-injector  
100 unit/mL

LYUMJEV – insulin lispro-aabc inj  
100 unit/mL

LYUMJEV KWIKPEN – insulin lispro-  
aabc soln pen-inj  
100 unit/mL (1 unit dial)

LYUMJEV KWIKPEN – insulin lispro-  
aabc soln pen-injector  
200 unit/mL

LYUMJEV TEMPO PEN – insulin  
lispro-aabc soln pen-inj w/transmit  
port 100 unit/mL



# 2026 Standard HDHP-HSA Common Preventive Drug List

NOVOLIN 70/30 – 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 REL – insulin nph & regular susp pen-inj 100 unit/mL (70-30)  
NOVOLIN 70/30 RELION – insulin nph isophane & regular human inj 100 unit/mL (70-30)  
NOVOLIN N – 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 N RELION – insulin nph (human) (isophane) inj 100 unit/mL  
NOVOLIN R – 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 R RELION – insulin regular (human) inj 100 unit/mL  
NOVOLOG – insulin aspart inj 100 unit/mL  
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 PREFILL – 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  
SEMGLLEE – insulin glargine-yfng inj 100 unit/mL  
SEMGLLEE – insulin glargine-yfng soln pen-injector 100 unit/mL  
TOUJEO MAX SOLOSTAR – insulin glargine soln pen-injector 300 unit/mL (2 unit dial)  
TOUJEO SOLOSTAR – insulin glargine soln pen-injector 300 unit/mL (1 unit dial)  
TRESIBA – insulin degludec inj 100 unit/mL  
TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 100 unit/mL, 200 unit/mL

## Oral Only

**acarbose tab 25 mg, 50 mg, 100 mg**  
**glimepiride tab 1 mg, 2 mg, 4 mg**  
**glipizide tab 5 mg, 10 mg**  
**glipizide tab er 24hr 2.5 mg**  
**glipizide tab er 24hr 5 mg, 10 mg (Glucotrol xl)**  
**glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg**  
**glyburide tab 1.25 mg, 2.5 mg, 5 mg**  
**glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg**  
**metformin hcl tab 500 mg, 850 mg, 1000 mg**  
**metformin hcl tab er 24hr 500 mg, 750 mg**  
**nateglinide tab 60 mg, 120 mg**  
**pioglitazone hcl tab 15 mg, 30 mg, 45 mg (base equivalent) (Actos)**  
**pioglitazone hcl-metformin hcl tab 15-500 mg**

**pioglitazone hcl-metformin hcl tab 15-850 mg (Actoplus met)**  
**repaglinide tab 0.5 mg, 1 mg, 2 mg**

## Diabetic Supplies

### Calibration Liquids

ABBOTT FREESTYLE  
ABBOTT MEDISENSE, HIGH/MID/LOW  
ABBOTT PRECISION  
ASCENSIA CONTOUR  
ASCENSIA CONTOUR NEXT

### Insulin Syringes

### Lancets

### Lancet Devices

### Pen Needles

### Test Strips & Discs

ABBOTT FREESTYLE, INSULINX, LITE, PRECISION NEO  
ABBOTT PRECISION SOF-TACT  
ABBOTT OPTIUMEZ  
ASCENSIA CONTOUR  
ASCENSIA CONTOUR NEXT

## Fluoride Supplements

### Dental Products and Combinations

**sodium fluoride cream 1.1% (Prevident 5000 plus)**  
**sodium fluoride gel 1.1% (0.5% f) (Prevident Fluoride)**  
**sodium fluoride paste 1.1% (Prevident 5000 Ortho Defe)**  
**sodium fluoride rinse 0.2% (Prevident Rinse)**  
**stannous fluoride conc 0.63%**  
**stannous fluoride gel 0.4% (Gel-Kam)**

### Supplements and Combinations

SODIUM FLUORIDE – sodium fluoride soln 0.5 mg/mL f (from 1.1 mg/mL naf)  
SODIUM FLUORIDE – sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)

# 2026 Standard HDHP-HSA Common Preventive Drug List

sodium fluoride chew tab  
0.25 mg f (from 0.55 mg naf),  
0.5 mg f (from 1.1 mg naf),  
1 mg f (from 2.2 mg naf)

## High Blood Pressure

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

bisoprolol fumarate tab 5 mg,  
10 mg  
bumetanide tab 0.5 mg (Bumex)  
bumetanide tab 1 mg, 2 mg  
candesartan cilexetil tab 4 mg,  
8 mg, 16 mg, 32 mg (Atacand)  
candesartan cilexetil-  
hydrochlorothiazide tab  
16-12.5 mg, 32-12.5 mg,  
32-25 mg (Atacand hct)  
captopril tab 12.5 mg, 25 mg,  
50 mg, 100 mg  
carvedilol tab 3.125 mg, 6.25 mg,  
12.5 mg, 25 mg (Coreg)  
chlorthalidone tab 25 mg, 50 mg  
clonidine hcl tab 0.1 mg, 0.2 mg,  
0.3 mg  
clonidine td patch weekly  
0.1 mg/24hr (Catapres-TTS-1),  
0.2 mg/24hr (Catapres-TTS-2),  
0.3 mg/24hr (Catapres-TTS-3)  
diltiazem hcl cap er 12hr 60 mg,  
90 mg, 120 mg  
diltiazem hcl cap er 24hr 120 mg,  
180 mg, 240 mg  
diltiazem hcl coated beads cap er  
24hr 120 mg, 180 mg, 240 mg,  
300 mg (Cardizem cd)  
diltiazem hcl extended release  
beads cap er 24hr 120 mg,  
180 mg, 240 mg, 300 mg,  
360 mg, 420 mg (Tiazac)  
diltiazem hcl tab 30 mg, 60 mg,  
120 mg (Cardizem)  
diltiazem hcl tab 90 mg  
diltiazem hcl tab er 24hr 120 mg  
(Cardizem la)  
doxazosin mesylate tab 1 mg,  
2 mg, 4 mg, 8 mg (Cardura)  
enalapril maleate tab 2.5 mg,  
5 mg, 10 mg, 20 mg (Vasotec)  
enalapril maleate &  
hydrochlorothiazide tab  
5-12.5 mg  
enalapril maleate &  
hydrochlorothiazide tab  
10-25 mg (Vaseretic)


enalapril maleate oral soln  
1 mg/mL (Epaned)  
epplerenone tab 25 mg, 50 mg  
(Inspra)  
felodipine tab er 24hr 2.5 mg,  
5 mg, 10 mg  
fosinopril sodium tab 10 mg,  
20 mg, 40 mg  
fosinopril sodium &  
hydrochlorothiazide tab  
10-12.5 mg, 20-12.5 mg  
furosemide oral soln 10 mg/mL  
furosemide tab 20 mg, 40 mg,  
80 mg (Lasix)  
guanfacine hcl tab 1 mg, 2 mg  
hydralazine hcl tab 10 mg, 25 mg,  
50 mg, 100 mg  
hydrochlorothiazide cap 12.5 mg  
hydrochlorothiazide tab 12.5 mg,  
25 mg, 50 mg  
indapamide tab 1.25 mg, 2.5 mg  
irbesartan tab 75 mg  
irbesartan tab 150 mg, 300 mg  
(Avapro)  
irbesartan-hydrochlorothiazide  
tab 150-12.5 mg, 300-12.5 mg  
(Avalide)  
isosorbide dinitrate-hydralazine  
hcl tab 20-37.5 mg (Bidil)  
labetalol hcl tab 100 mg, 200 mg,  
300 mg  
lisinopril tab 2.5 mg, 5 mg,  
10 mg, 20 mg, 30 mg, 40 mg  
(Zestril)  
lisinopril & hydrochlorothiazide  
tab 10-12.5 mg, 20-12.5 mg,  
20-25 mg (Zestoretic)  
losartan potassium tab 25 mg,  
50 mg, 100 mg (Cozaar)  
losartan potassium &  
hydrochlorothiazide tab  
50-12.5 mg, 100-12.5 mg,  
100-25 mg (Hyzaar)  
metolazone tab 2.5 mg, 5 mg,  
10 mg



# 2026 Standard HDHP-HSA Common Preventive Drug List

metoprolol succinate tab er 24hr  
25 mg, 50 mg, 100 mg, 200 mg  
(tartrate equivalent) (Toprol xl)  
metoprolol tartrate tab 25 mg,  
37.5 mg, 75 mg  
metoprolol tartrate tab 50 mg,  
100 mg (Lopressor)  
metoprolol & hydrochlorothiazide  
tab 50-25 mg, 100-25 mg,  
100-50 mg  
minoxidil tab 2.5 mg, 10 mg  
moexipril hcl tab 7.5 mg, 15 mg  
nadolol tab 20 mg, 40 mg, 80 mg  
nebivolol hcl tab 2.5 mg, 5 mg,  
10 mg, 20 mg (base equivalent)  
(Bystolic)  
nifedipine cap 10 mg, 20 mg  
nifedipine tab er 24hr 30 mg,  
60 mg, 90 mg  
nifedipine tab er 24hr osmotic  
release 30 mg, 60 mg, 90 mg  
(Procardia xl)  
olmesartan medoxomil tab 5 mg,  
20 mg, 40 mg (Benicar)  
olmesartan medoxomil-  
hydrochlorothiazide tab  
20-12.5 mg, 40-12.5 mg,  
40-25 mg (Benicar hct)  
olmesartan-amlodipine-  
hydrochlorothiazide tab  
20-5-12.5 mg, 40-5-12.5 mg,  
40-5-25 mg, 40-10-12.5 mg,  
40-10-25 mg (Tribenzor)  
perindopril erbumine 4 mg  
phenoxybenzamine hcl cap  
10 mg (Dibenzyline)  
pindolol tab 5 mg, 10 mg  
prazosin hcl cap 1 mg, 2 mg, 5 mg  
propranolol hcl cap er 24hr  
60 mg, 80 mg, 120 mg, 160 mg  
(Inderal la)  
propranolol hcl tab 10 mg, 20 mg,  
40 mg, 60 mg, 80 mg  
quinapril hcl tab 5 mg, 10 mg,  
20 mg, 40 mg (Accupril)


quinapril-hydrochlorothiazide tab  
10-12.5 mg, 20-12.5 mg  
(Accuretic)  
ramipril cap 1.25 mg, 5 mg  
ramipril cap 2.5 mg, 10 mg (Altace)  
spironolactone tab 25 mg, 50 mg,  
100 mg (Aldactone)  
spironolactone &  
hydrochlorothiazide tab  
25-25 mg  
telmisartan tab 20 mg  
telmisartan tab 40 mg, 80 mg  
(Micardis)  
terazosin hcl cap 1 mg, 2 mg,  
5 mg, 10 mg (base equivalent)  
torsemide tab 5 mg, 10 mg,  
20 mg, 100 mg  
trandolapril tab 1 mg, 2 mg, 4 mg  
triarterene cap 50 mg, 100 mg  
(Dyrenium)  
triarterene & hydrochlorothiazide  
cap 37.5-25 mg  
triarterene & hydrochlorothiazide  
tab 37.5-25 mg, 75-50 mg  
valsartan tab 40 mg, 80 mg,  
160 mg, 320 mg (Diovan)  
valsartan-hydrochlorothiazide tab  
80-12.5 mg, 160-12.5 mg,  
160-25 mg, 320-12.5 mg,  
320-25 mg (Diovan hct)  
verapamil hcl cap er 24hr 120 mg,  
180 mg, 240 mg (Verelan)  
verapamil hcl tab 40 mg, 80 mg,  
120 mg  
verapamil hcl tab er 120 mg,  
180 mg, 240 mg

## High Cholesterol Orals

atorvastatin calcium tab 10 mg,  
20 mg, 40 mg, 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 granule packets  
5 gm  
colestipol hcl granules 5 gm  
(Colestid)  
colestipol hcl tab 1 gm (Colestid)  
ezetimibe tab 10 mg (Zetia)  
ezetimibe-simvastatin tab  
10-10 mg, 10-20 mg, 10-40 mg,  
10-80 mg (Vytorin)  
fenofibrate tab 48 mg, 145 mg  
(Tricor)  
fenofibrate tab 54 mg, 160 mg  
fenofibrate micronized cap 67 mg,  
134 mg, 200 mg  
gemfibrozil tab 600 mg (Lopid)  
icosapent ethyl cap 0.5 gm, 1 gm  
(Vascepa)  
lovastatin tab 10 mg  
lovastatin tab 20 mg, 40 mg   
niacin tab er 500 mg, 750 mg,  
1000 mg (antihyperlipidemic)  
pravastatin sodium tab 10 mg,  
20 mg, 40 mg, 80 mg   
rosuvastatin calcium tab 5 mg,  
10 mg, 20 mg, 40 mg (Crestor)  
simvastatin tab 10 mg, 20 mg,  
40 mg (Zocor)  
simvastatin tab 5 mg, 80 mg

## Osteoporosis

alendronate sodium tab 10 mg,  
35 mg  
alendronate sodium tab 70 mg  
(Fosamax)  
calcitonin (salmon) nasal soln  
200 unit/act  
ibandronate sodium tab 150 mg  
(base equivalent)  
raloxifene hcl tab 60 mg  
(Evista)   
risedronate sodium tab 30 mg  
risedronate sodium tab 35 mg,  
150 mg (Actonel)

# 2026 Standard HDHP-HSA Common Preventive Drug List

## Respiratory

### acetylcysteine inhal soln 10%, 20%

ADVAIR HFA – fluticasone-salmeterol inhal aerosol 45-21 mcg/act,

115-21 mcg/act, 230-21 mcg/act

AIRSUPRA – albuterol-budesonide inhalation aerosol 90-80 mcg/act

### albuterol sulfate inhal aero

**108 mcg/act**

**(90 mcg base equivalent)**

### albuterol sulfate soln nebu

**0.083% (2.5 mg/3 mL),**

**0.5% (5 mg/mL)**

### albuterol sulfate soln nebu

**0.63 mg/3 mL, 1.25 mg/3 mL**

**(base equivalent)**

### albuterol sulfate syrup 2 mg/5 mL

### albuterol sulfate tab 2 mg, 4 mg

ANORO ELLIPTA – umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act

### arformoterol tartrate soln nebu

**15 mcg/2 mL (base equivalent)**

**(Brovana)**

ARNUIITY ELLIPTA – fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act

ASMANEX HFA – mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act

### ASMANEX TWISTHALER

30 METERED – mometasone furoate inhal powd 110 mcg/act (breath activated)

ASMANEX TWISTHALER 30, 60, 120 METERED – mometasone furoate inhal powd 220 mcg/act (breath activated)

BREO ELLIPTA – fluticasone furoate vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act

BREZTRI AEROSPHERE – budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act

### budesonide-formoterol fumarate

**dihyd aerosol 80-4.5 mcg/act,**

**160-4.5 mcg/act (Symbicort)**

### budesonide inhalation susp

**0.25 mg/2 mL, 0.5 mg/2 mL,**

**1 mg/2 mL (Pulmicort)**

### COMBIVENT RESPIMAT –

ipratropium-albuterol inhal aerosol soln 20-100 mcg/act

### cromolyn sodium soln nebu

**20 mg/2 mL**

DULERA – mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act

### FLUTICASONE PROPIONATE/SA –

fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act

### fluticasone-salmeterol aer powder

**ba 100-50 mcg/act,**

**250-50 mcg/act, 500-50 mcg/act**

**(Advair Diskus)**

INCRUSE ELLIPTA – umeclidinium br aero powd breath act 62.5 mcg/act (base equivalent)

### ipratropium bromide inhal soln

**0.02%**

### ipratropium-albuterol nebu soln

**0.5-2.5(3) mg/3 mL**

### levalbuterol hcl soln nebu

**0.31 mg/3 mL, 0.63 mg/3 mL,**

**1.25 mg/3 mL (base equivalent)**

### levalbuterol hcl soln nebu conc

**1.25 mg/0.5 mL**

**(base equivalent)**

### montelukast sodium chew tab

**4 mg, 5 mg (base equivalent)**

**(Singulair)**

### montelukast sodium tab 10 mg

**(base equivalent) (Singulair)**

### QVAR REDIHALER –beclomethasone

diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act

### roflumilast tab 250 mcg, 500 mcg

**(Daliresp)**

SEREVENT DISKUS – salmeterol

xinafoate aer pow ba 50 mcg/act (base equivalent)

SPIRIVA RESPIMAT – tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act, 2.5 mcg/act

STIOLTO RESPIMAT – tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act

STRIVERDI RESPIMAT – olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equivalent)

SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act

**terbutaline sulfate tab 2.5 mg, 5 mg**

**theophylline elixir 80 mg/15 mL**

**theophylline soln 80 mg/15 mL**

**theophylline tab er 12hr 300 mg, 450 mg**

**theophylline tab er 24hr 400 mg, 600 mg**

TRELEGY ELLIPTA – fluticasone umeclidinium- vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act

VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90 mcg base equivalent)

**zafirlukast tab 10 mg, 20 mg (Accolate)**

## Tobacco Cessation

Your health plan covers two 90-day treatments for tobacco use cessation medicine per benefit period.

**bupropion hcl (smoking deterrent) tab er 12hr 150 mg**

NICODERM CQ – nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr

NICORETTE – nicotine polacrilex gum 2 mg, 4 mg

NICORETTE STARTER KIT – nicotine polacrilex gum 2 mg, 4 mg

**nicotine polacrilex gum 2 mg, 4 mg**

# 2026 Standard HDHP-HSA Common Preventive Drug List

## **nicotine polacrilex lozenge**

**2 mg, 4 mg**

## **nicotine td patch 24hr 7 mg/24hr,**

**14 mg/24hr, 21 mg/24hr**

## NICOTINE TRANSDERMAL SYST –

nicotine td patch 24hr kit

21-14-7 mg/24hr

## NICOTROL INHALER – nicotine

inhaler system

10 mg (4 mg delivered)

## NICOTROL NS – nicotine nasal spray

10 mg/mL (0.5 mg/spray)

## **varenicline tartrate tab**

**11 x 0.5 mg & 42 x 1 mg**

**start pack**

## **varenicline tartrate tab 0.5 mg,**

**1 mg (base equivalent)**

## **Vaccines**

### ABRYSVO – RSV pre-fusion f

A&B vac recomb for im soln

120 mcg/0.5 mL

### ACTHIB – haemophilus b

polysaccharide conjugate vaccine

for inj

### ADACEL – tet tox-diph-acell pertuss

ad inj

5-2-15.5 lf-lf-mcg/0.5 mL

### AFLURIA – influenza virus vaccine

split pf susp pref syringe 0.5 mL

### AREXVY – rsvpref3 vaccine recomb

adjuvanted for im susp

120 mcg/0.5 mL

### BEXSERO – meningococcal vac b

(recomb omv adjuv) inj prefilled

syringe

### BOOSTRIX – tet-diph-acell pertuss

ad pref syr

5-2.5-18.5 lf-mcg/0.5 mL

### CAPVAXIVE – pneumococcal

21-valent conjugate vaccine soln

pref syr 0.5 mL

### COMIRNATY – covid-19 mrna vac

tris-pfizer im susp pref syr

30 mcg/0.3 mL

### DAPTACEL – diph, acellular pert

& tet tox inj

15 lf-23 mcg-5 lf/0.5 mL

### ENGERIX-B – hepatitis b vaccine

(recombinant) susp 20 mcg/mL

### ENGERIX-B – hepatitis b vaccine

(recombinant) susp pref syr

10 mcg/0.5 mL, 20 mcg/mL

### FLUAD – influenza vac type a&b

surface ant adj susp pref syr

0.5 mL

### FLUARIX – influenza virus vaccine

split pf susp pref syringe

0.5 mL

### FLUBLOK – influenza virus vacc

recombinant ha pf soln pref syr

0.5 mL

### FLUCELVAX – influenza virus vac

tiss-cult subunit susp pref syr

0.5 mL

### FLULAVAL – influenza virus vaccine

split pf susp pref syringe

0.5 mL

### FLUMIST NASAL VACCINE – influenza

virus vaccine live intranasal liquid

### FLUZONE – influenza virus vaccine

split pf susp pref syringe 0.5 mL

### FLUZONE HIGH-DOSE – influenza

virus vac split high-dose pf susp

pref syr 0.5 mL

### GARDASIL 9 – human papillomavirus

(hpv) 9-valent recomb vac im susp

### GARDASIL 9 – human papillomavirus

(hpv) 9-valent recomb vac susp

pref syr

### HAVRIX – hepatitis a vaccine inj susp

720 el unit/0.5 mL, 1440 el unit/mL

### HEPLISAV-B – hepatitis b vaccine

recomb adjuvanted pref syr

20 mcg/0.5 mL

### HIBERIX – haemophilus b

polysaccharide conjugate vac

for inj 10 mcg

### INFANRIX – diph, acellular

pert & tet tox inj

25 lf-58 mcg-10 lf/0.5 mL

### IPOL INACTIVATED IPV – poliovirus

vaccine, ipv injection

### JYNNEOS – smallpox & monkeypox

vac, live, non-replicating inj

0.5 mL

### KINRIX – diph-tetanus-acell pert-

polio, ipv vacc susp pref syr

0.5 mL

### MENQUADFI – meningococcal (a, c, y,

and w-135) tetanus conjugate

vaccine

### MENVEO – meningococcal (a, c, y,

and w-135) oligo conj vac for inj

### MENVEO – meningococcal (a, c, y,

and w-135) oligo conj vac im soln

### M-M-R II – measles-mumps rubella

virus vaccines for inj soln

### MNEXSPIKE INJ 2025-26 – covid-19

mrna vaccine-moderna im susp

pref syr 10 mcg/0.2 mL

### MODERNA COVID-19 VACCINE –

covid-19 mrna vaccine

6mo-11yr-moderna im susp

25 mcg/0.25 mL

### MRESVIA – rsv mrna pre-f vaccine im

susp pref syr 50 mcg/0.5 mL

### NOVAVAX COVID-19 VACCINE –

covid-19 subunit vacc-novavax im

susp pref syr 5 mcg/0.5 mL

### PEDIARIX – diph-tet tox-acell pert-

hep b-polio ipv vac susp pref syr

### PEDVAX HIB – haemophilus b

polysaccharide conj vac im susp

7.5 mcg/0.5 mL

### PENBRAYA – meningococcal acyw (tet

conj)-mening b (rcmb) vacc for inj

### PENMENVY – meningococcal acwy

(oligo conj)-mening b (rcmb)

vacc for inj

### PENTACEL – diph-ac per-tet tox

ad-poliov-haemoph b poly vac

for im susp

### PFIZER-BIONTECH COVID-19 –

covid-19 mrna vac tris-s

5-11y-pfizer im susp

10 mcg/0.3 mL

# 2026 Standard HDHP-HSA Common Preventive Drug List

PFIZER-BIONTECH COVID-19 –  
covid-19 mrna vac tris-s  
6mo-4y-pfizer im susp  
3 mcg/0.3 mL

PNEUMOVAX 23 – pneumococcal  
vaccine polyvalent soln pref syr  
25 mcg/0.5 mL

PNEUMOVAX 23/1 DOSE –  
pneumococcal vaccine  
polyvalent inj soln  
25 mcg/0.5 mL

PREVNAR 20 – pneumococcal  
20-valent conjugate vaccine sus  
pref syr 0.5 mL

PRIORIX – measles-mumps-rubella  
virus vaccines for subcutaneous  
susp

PROQUAD – measles-mumps-  
rubellavaricella virus vaccines  
for susp

QUADRACEL – diph-tetanus tox  
ad-acell pert & polio virus,  
ipv vac inj

QUADRACEL – diph-tetanus-acell  
pert-polio, ipv vacc susp pref syr  
0.5 mL

RECOMBIVAX HB – hepatitis b  
vaccine (recombinant) susp  
5 mcg/0.5 mL, 10 mcg/mL,  
40 mcg/mL

RECOMBIVAX HB – hepatitis b  
vaccine (recombinant) susp pref  
syr 5 mcg/0.5 mL, 10 mcg/mL

ROTARIX – rotavirus vaccine, live  
oral susp

ROTATEQ – rotavirus vaccine, live  
oral pentavalent soln

SHINGRIX – zoster vac recombinant  
adjuvanted for im inj  
50 mcg/ 0.5 mL

SPIKEVAX COVID-19 VACCINE –  
covid-19 mrna vaccine-moderna  
im susp pref syr 50 mcg/0.5 mL

TENIVAC – tetanus-diphtheria toxoids  
(td) inj 5-2 lfu

TRUMENBA – meningococcal group b  
vac (recomb) im susp prefilled syr

TWINRIX – hep a-hep b vaccine susp  
pref syr 720-20 elu mcg/mL

VAQTA – hepatitis a vaccine inj susp  
25 unit/0.5 mL, 50 unit/mL

VARIVAX – varicella virus vac live for  
subcutaneous inj  
1350 pfu/0.5 mL

VAXELIS – diph-tet tox-ac pert  
ad-polio ipv-hib-hepatitis b  
recmb susp

VAXELIS – diph-tet tox-ac pert  
ad-polio ipv-hib-hep b rec susp  
pre syr

VAXNEUVANCE – pneumococcal  
15-valent conjugate vaccine sus  
pref syr 0.5 mL