# 2025 Preventive Medication list for consumer-driven health plans (CDH)

This is a list of **Preventive Medications** that may be covered under your plan. If your plan covers these Preventive Medications, your insurance benefit is applied before you meet your deductible.

This list has most of the medications in each therapeutic class. Some of them may not be covered by your plan. To find out if a drug is covered or if utilization management programs, such as prior authorization and/or step therapy (referred to as First Start in New Jersey) programs apply, please check your health plan's member website or call the toll-free phone number on your member ID card. This may not be a full list. Brand and generic drugs may not always be available due to market changes.

**CDH preventive drug lists may also be used with non-CDH plans**

**Effective May 1, 2025**

| Therapeutic Drug Classes |
|---|
| **Breast Cancer Prevention** |
| Anastrozole |
| **Arimidex** |
| **Aromasin** |
| Exemestane |
| **Fareston** |
| **Femara** |
| Letrozole |
| **Soltamox** |
| Tamoxifen |
| Toremifene |

| Therapeutic Drug Classes |
|---|
| **Cardiovascular/Heart Disease: Blood Clot/Platelet Therapy** |
| **Arixtra** |
| Aspirin-Dipyridamole |
| **Brilinta** |
| Cilostazol |
| Clopidogrel |
| **Coumadin** |
| Dabigatran |
| Dipyridamole |
| **Effient** |

**Bold type = Brand-name drug**
[Plain type = Generic drug]
[1]Coverage is provided for oral formulations

United Healthcare

| Therapeutic Drug Classes |
|---|
| **Eliquis** |
| Enoxaparin |
| **Fragmin** |
| Fondaparinux |
| Heparin |
| Jantoven |
| **Lovenox** |
| **Plavix** |
| **Pradaxa** |
| **Pradaxa Pak** |
| Prasugrel |
| **Savaysa** |
| Ticlopidine |
| Warfarin |
| **Xarelto** |
| **Zontivity** |
| **Cardiovascular/Heart Disease: High Blood Pressure** |
| **Accupril** |
| **Accuretic** |
| Acebutolol |
| **Aldactazide** |
| **Aldactone** |
| Aliskiren |
| **Altace** |
| Amiloride |
| Amiloride-Hydrochlorothiazide |
| Amlodipine |
| Amlodipine-Benazepril |
| Amlodipine-Olmesartan |
| Amlodipine-Olmesartan-Hydrochlorothiazide |
| Amlodipine-Valsartan |
| Amlodipine-Valsartan-Hydrochlorothiazide |
| **Atacand** |

| Therapeutic Drug Classes |
|---|
| **Atacand HCT** |
| Atenolol |
| Atenolol-Chlorthalidone |
| **Avalide** |
| **Avapro** |
| **Azor** |
| Benazepril |
| Benazepril-Hydrochlorothiazide |
| **Benicar** |
| **Benicar HCT** |
| Betaxolol[1] |
| **Bidil** |
| Bisoprolol |
| Bisoprolol-Hydrochlorothiazide |
| Bumetanide |
| **Bystolic** |
| Candesartan |
| Candesartan-Hydrochlorothiazide |
| Captopril |
| Captopril-Hydrochlorothiazide |
| **Cardizem** |
| **Cardizem CD** |
| **Cardizem LA** |
| **Cardura** |
| **Carospir** |
| Cartia XT |
| Carvedilol |
| Carvedilol ER |
| **Catapres TTS** |
| Chlorothiazide |
| Clonidine |
| Clonidine Patch |
| **Conjupri** |

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| Therapeutic Drug Classes |
|---|
| **Coreg** |
| **Coreg CR** |
| **Cozaar** |
| Dilt XR |
| Diltiazem |
| Diltiazem ER |
| **Diovan** |
| **Diovan HCT** |
| **Diuril** |
| Doxazosin |
| **Dyrenium** |
| **Edarbi** |
| **Edarbyclor** |
| **Edecrin** |
| Enalapril |
| Enalapril-Hydrochlorothiazide |
| **Epaned** |
| Eplerenone |
| Eprosartan |
| Ethacrynic Acid |
| **Exforge** |
| **Exforge HCT** |
| Felodipine ER |
| Fosinopril |
| Fosinopril-Hydrochlorothiazide |
| Furosemide |
| Guanfacine |
| Hydralazine |
| Hydrochlorothiazide |
| **Hyzaar** |
| Indapamide |
| **Inderal LA** |
| **Inderal XL** |

| Therapeutic Drug Classes |
|---|
| **Innopran XL** |
| **Inspra** |
| Irbesartan |
| Irbesartan-Hydrochlorothiazide |
| Isradipine |
| **Kapspargo** |
| **Katerzia** |
| Labetalol |
| **Lasix** |
| **Levamlodipine** |
| Lisinopril |
| Lisinopril-Hydrochlorothiazide |
| **Lopressor** |
| Losartan |
| Losartan-Hydrochlorothiazide |
| **Lotensin** |
| **Lotensin HCT** |
| **Lotrel** |
| Matzim LA |
| **Methyldopa** |
| Methyldopa-Hydrochlorothiazide |
| Metolazone |
| Metoprolol 37.5, 75 mg |
| Metoprolol-Hydrochlorothiazide |
| Metoprolol Succinate |
| Metoprolol Tartrate |
| **Micardis** |
| **Micardis HCT** |
| Minoxidil |
| Moexipril |
| Moexipril-Hydrochlorothiazide |
| Nadolol |
| Nadolol-Bendroflumethazide |

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| Therapeutic Drug Classes |
|---|
| Nebivolol |
| **Nexiclon XR** |
| Nicardipine |
| Nifedipine |
| Nifedipine ER |
| Nimodipine |
| Nisoldipine |
| **Norliqva** |
| **Norvasc** |
| Olmesartan |
| Olmesartan-Hydrochlorothiazide |
| Perindopril |
| Pindolol |
| Prazosin |
| **Prestalia** |
| **Procardia XL** |
| Propranolol |
| Propranolol-Hydrochlorothiazide |
| **Qbrelis** |
| Quinapril |
| Quinapril-Hydrochlorothiazide |
| Ramipril |
| Reserpine |
| **Soaanz** |
| Spironolactone |
| Spironolactone Suspension |
| Spironolactone-Hydrochlorothiazide |
| **Sular** |
| Taztia XT |
| **Tekturna** |
| Telmisartan |
| Telmisartan-Amlodipine |
| Telmisartan-Hydrochlorothiazide |

| Therapeutic Drug Classes |
|---|
| **Tenoretic** |
| **Tenormin** |
| Terazosin |
| **Thalitone** |
| **Tiazac** |
| Timolol[1] |
| **Toprol XL** |
| Torsemide |
| Trandolapril |
| Trandolapril-Verapamil |
| Triamterene |
| Triamterene-Hydrochlorothiazide |
| **Tribenzor** |
| **Tryvio** |
| Valsartan |
| Valsartan-Hydrochlorothiazide |
| **Valsartan Solution** |
| **Vaseretic** |
| **Vasotec** |
| Verapamil |
| Verapamil ER |
| **Verelan** |
| **Verelan PM** |
| **Zestoretic** |
| **Zestril** |
| **Cardiovascular/Heart Disease: High Cholesterol** |
| **Altoprev** |
| **Atorvaliq Suspension** |
| Atorvastatin |
| Cholestyramine |
| Cholestyramine Light |
| Choline Fenofibrate |
| Colesevelam Tablets, Powder for Suspension |

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| Therapeutic Drug Classes |
|---|
| **Colestid** |
| Colestipol |
| **Crestor** |
| **Ezallor Sprinkle** |
| Ezetimibe |
| **Ezetimibe/Rosuvastain** |
| Fenofibrate Capsule |
| Fenofibrate Tablet |
| Fenofibric Acid |
| **Fenoglide** |
| **Fibricor** |
| **Flolipid** |
| Fluvastatin |
| Fluvastatin ER |
| Gemfibrozil |
| Icosapent |
| **Lescol XL** |
| **Lipitor** |
| **Lipofen** |
| **Livalo** |
| **Lopid** |
| Lovastatin |
| **Lovaza** |
| **Nexletol** |
| **Nexlizet** |
| Niacin Extended-Release |
| **Niacor** |
| Omega-3 Acid Ethyl Esters |
| Pitavastatin |
| Pravastatin |
| Prevalite |
| **Questran** |
| **Questran Light** |

| Therapeutic Drug Classes |
|---|
| Rosuvastatin |
| Simvastatin |
| Simvastatin-Ezetimibe |
| **Tricor** |
| **Trilipix** |
| **Vascepa** |
| **Vytorin** |
| **Welchol** |
| **Zetia** |
| **Zocor** |
| **Zypitamag** |
| **Depression: Selective Serotonin Reuptake Inhibitors (SSRIs)[2]** |
| **Celexa** |
| Citalopram Tablets |
| **Citalopram Capsules** |
| Escitalopram |
| Fluoxetine |
| Fluoxetine Capsules |
| Fluvoxamine |
| Fluvoxamine Extended-Release |
| **Lexapro** |
| Paroxetine |
| Paroxetine Extended-Release |
| **Paxil** |
| **Paxil CR** |
| **Prozac** |
| **Sertraline Capsules** |
| Sertraline Tablets |
| **Zoloft** |
| **Diabetes: Diabetic Supplies** |
| **Accu-Chek Guide Meters** |
| **Accu-Chek Guide Test Strips** |

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| Therapeutic Drug Classes |
|---|
| Continuous Glucose Monitors |
| **Contour Next EZ Meters** |
| **Contour Next Meters** |
| **Contour Next One Meters** |
| **Contour Next Test Strips** |
| Diabetic Testing - Lancets |
| Insulin Needles/Syringes |
| **Omnipod 5 (Gen 5), Kits & Pods** |
| **OneTouch Ultra Test Strips** |
| **OneTouch Verio Meter** |
| **OneTouch Verio Test Strips** |
| **Diabetes: Insulin** |
| **Admelog, Admelog SoloStar** |
| **Afrezza** |
| **Apidra, Apidra SoloStar** |
| **Basaglar** |
| **Basaglar Tempo** |
| **Fiasp, Fiasp FlexTouch** |
| **Fiasp Pumpcart** |
| **Humalog** |
| **Humalog Junior** |
| **Humalog Mix 50/50** |
| **Humalog Mix 75/25** |
| **Humalog Tempo** |
| **Humulin 50/50** |
| **Humulin 70/30** |
| **Humulin N** |
| **Humulin R** |
| **Insulin Aspart** |
| **Insulin Aspart Protamine/Insulin Aspart** |
| **Insulin Degludec, Insulin Degludec FlexTouch** |
| **Insulin Glargine** |
| **Insulin Lispro** |

| Therapeutic Drug Classes |
|---|
| **Insulin Lispro Jr.** |
| **Insulin Lispro Protamine/Insulin Lispro 75/25** |
| **Lantus** |
| **Levemir** |
| **Lyumjev** |
| **Lyumjev Tempo** |
| **Novolin 70/30** |
| **Novolin N** |
| **Novolin R** |
| **Novolog, Novolog FlexPen** |
| **Novolog Mix 70/30** |
| **Rezvoglar** |
| **Semglee** |
| **Soliqua** |
| **Toujeo** |
| **Tresiba** |
| **Diabetes: Non-Insulin** |
| Acarbose |
| **ACTOplus Met** |
| **Actos** |
| **Alogliptin** |
| **Alogliptin-Metformin** |
| **Alogliptin-Pioglitazone** |
| **Amaryl** |
| **Bexagliflozin** |
| **Brenzavvy** |
| **Bydureon BCise** |
| **Byetta** |
| **Cycloset** |
| **Dapagliflozin** |
| **Dapagliflozin/Metformin** |
| **Duetact** |
| **Farxiga** |

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| Therapeutic Drug Classes |
|---|
| Glimepiride |
| Glipizide |
| Glipizide ER |
| Glipizide-Metformin |
| **Glucophage XR** |
| **Glucotrol XL** |
| **Glumetza** |
| Glyburide |
| Glyburide Micronized |
| Glyburide-Metformin |
| **Glyxambi** |
| **Invokamet** |
| **Invokamet XR** |
| **Invokana** |
| **Janumet** |
| **Janumet XR** |
| **Januvia** |
| **Jardiance** |
| **Jentadueto** |
| **Jentadueto XR** |
| **Kombiglyze XR** |
| Liraglutide |
| Metformin |
| Metformin ER |
| Metformin Solution |
| Miglitol |
| **Mounjaro** |
| Nateglinide |
| **Onglyza** |
| **Ozempic** |
| Pioglitazone |
| Pioglitazone-Glimepiride |

| Therapeutic Drug Classes |
|---|
| Pioglitazone-Metformin |
| **Qtern** |
| Repaglinide |
| Repaglinide-Metformin |
| **Riomet** |
| **Rybelsus** |
| Saxagliptin |
| Saxagliptin-Metformin |
| **Segluromet** |
| **Sitagliptin/Metformin** |
| **Steglatro** |
| **Steglujan** |
| **SymlinPen** |
| **Synjardy** |
| **Synjardy XR** |
| Tolbutamide |
| **Tradjenta** |
| **Trijardy XR** |
| **Trulicity** |
| **Victoza** |
| **Xigduo XR** |
| **Xultophy** |
| **Zituvio** |
| **Zituvimet** |
| **Zituvimet XR** |
| **Immunosuppressant: Organ Rejection** |
| **Astagraf XL** |
| **Azasan** |
| Azathioprine |
| **Cellcept** |
| Cyclosporine |
| **Envarsus XR** |

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| Therapeutic Drug Classes |
|---|
| Everolimus |
| Gengraf |
| **Imuran** |
| Mycophenolate |
| Mycophenolic Acid |
| **Myfortic** |
| **Myhibbin** |
| **Neoral** |
| **Prograf** |
| **Rapamune** |
| **Sandimmune** |
| Sirolimus |
| Tacrolimus |
| **Zortress** |
| **Musculoskeletal: Osteoporosis** |
| **Actonel** |
| Alendronate |
| **Atelvia** |
| **Binosto** |
| Calcitonin (Salmon) |
| Etidronate |
| **Evista** |
| **Forteo** |
| Ibandronate |
| **Miacalcin** |
| Raloxifene |
| Risedronate |
| **Teriparatide** |
| Teriparatide |
| **Tymlos** |
| **Respiratory: Asthma/COPD** |
| **Accolate** |
| **Advair Diskus** |

| Therapeutic Drug Classes |
|---|
| **Advair HFA** |
| **Airsupra** |
| Albuterol HFA (generic **ProAir HFA, Proventil HFA**) |
| **Albuterol HFA (Ventolin HFA** authorized generic**)** |
| **AirDuo RespiClick** |
| Albuterol Nebulized Solution |
| Albuterol Oral Tablet |
| **Alvesco** |
| Aminophylline |
| **Anoro Ellipta** |
| Arformoterol Nebulized Solution |
| **Arnuity Ellipta** |
| **Asmanex HFA** |
| **Asmanex Twisthaler** |
| **Atrovent HFA** |
| **Bevespi Aerosphere** |
| **Breo Ellipta** |
| **Breztri Aerosphere** |
| **Brovana** |
| Budesonide/Formoterol |
| Budesonide Nebulized Solution |
| **Combivent Respimat** |
| Cromolyn |
| **Daliresp** |
| **Duaklir Pressair** |
| **Dulera** |
| **Elixophyllin** |
| **Fluticasone Diskus** |
| **Fluticasone HFA** |
| Fluticasone/Salmeterol Diskus |
| Fluticasone/Salmeterol RespiClick |
| **Fluticasone/Vilanterol Ellipta** |
| Formoterol Nebulized Solution |

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| Therapeutic Drug Classes |
|---|
| **Gastrocrom** |
| **Incruse Ellipta** |
| Ipratropium |
| Ipratropium/Albuterol |
| **Levalbuterol HFA** |
| Levalbuterol Nebulized Solution |
| Metaproterenol |
| Montelukast |
| **Ohtuvayre** |
| **Perforomist** |
| **Proair RespiClick** |
| **Pulmicort Flexhaler** |
| **Pulmicort Nebulized Solution** |
| **QVAR Redihaler** |
| Roflumilast |
| **Serevent Diskus** |
| **Singulair** |
| **Spiriva HandiHaler** |
| **Spiriva Respimat** |
| **Stiolto Respimat** |
| **Striverdi Respimat** |
| **Symbicort** |
| Terbutaline |
| **Theo-24** |
| Theophylline |
| Theophylline/Guaifenesin |
| Tiotropium Handihaler |
| **Trelegy Ellipta** |
| **Tudorza Pressair** |
| **Ventolin HFA** |
| **Xopenex HFA** |
| **Xopenex Nebulized Solution** |
| **Yupelri** |

| Therapeutic Drug Classes |
|---|
| **Zafirlukast** |
| **Zyflo** |
| **Vitamins** |
| Pediatric Flouride Preparations (for example: Florvite, Poly-Vi-Flor, Tri-Vi-Flor) - Brand Name and Generic Products |
| Prenatal Vitamins (for example: Citranatal Assure, Prenate DHA, Stuartnatal) - Brand Name and Generic Products |

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# Nondiscrimination notice and access to communication services

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**Mail:** Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 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 member ID card, TTY **711**, Monday through Friday, 8 a.m. to 8 p.m., or at the times listed in your health plan documents.

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 **https://www.hhs.gov/ocr/complaints/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 member ID card, TTY **711**, Monday through Friday, 8 a.m. to 8 p.m., or at the times listed in your health plan documents.

## Multi-language interpreter services

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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。

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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.

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

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते है, आपको भाषा सहायता सेबाएं, 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 xov tooj 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 yáníłti'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shǫǫdí ninaaltsoos nitł'izí bee nééhozinígíí bine'dęę' t'áá jíík'ehgo béésh bee hane'í biká'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.

## Learn more

Call the toll-free phone number on your member ID card to speak with customer service.

Visit the member website listed on your member ID card to look up the price of drugs covered by your plan, find lower-cost options and more.

United Healthcare

This plan includes plan participants for a self-funded plan administered by Oxford.

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. Exclusions and utilization management programs, such as Prior Authorization - Notification, Prior Authorization - Medical Necessity and/or Step Therapy (referred to as First Start in New Jersey) programs may apply. Please refer to plan benefit documents. Review your benefit plan documents to see what medications are covered under your plan. Where differences are noted between this list and your benefit plan documents, the benefit plan documents will govern. Please refer to myuhc.com for information on specific drugs included in these programs or call the member phone number listed on your health plan ID card.

This document applies to commercial group members of UnitedHealthcare and Oxford New Jersey plans.

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