

# Ensign Preventive Medication List (Non-ACA) – \$0 Generics / \$5 Brands *Medications to Incur Copay in 2025*

CATEGORY	GENERIC MEDICINE - \$0 copay		BRAND-NAME MEDICINE - \$5 copay	
<b>Anticoagulant and Hematological Agents</b>	anagrelide cilostazol clopidogrel dipyridamole enoxaparin	jantoven prasugrel pentoxifylline ER warfarin	ELIQUIS XARELTO	
<b>Anticonvulsant Agents</b>	carbamazepine carbamazepine ER divalproex divalproex DR divalproex ER epitol ethosuximide felbamate gabapentin lamotrigine lamotrigine ER levetiracetam levetiracetam ER	oxcarbazepine phenobarbital phenytoin primidone roweepra roweepra XR tiagabine topiramate topiramate ER valproic acid vigabatrin vigadrone zonisamide	FYCOMPA	
<b>Antidiabetics</b>	acarbose alogliptin glimepiride glipizide glipizide er glipizide xl glipizide/metformin glyburide glyburide micronized glyburide/metformin	metformin metformin er miglitol nateglinide pioglitazone pioglitazone/ glimepiride pioglitazone/metformin repaglinide repaglinide/ metformin tolazamide tolbutamide	BYDUREON BYETTA FARXIGA GLYXAMBI HUMALOG HUMALOG KWIKPEN HUMALOG MIX 75-25 HUMULIN N HUMULIN R JANUMET JANUMET XR JANUVIA JARDIANCE LYUMJEV	LANTUS SOLOSTAR OZEMPIC RYBELSUS SOLIQUA 100-33 STEGLATRO SYMLINPEN 60 SYMLINPEN 120 SYNJARDY SYNJARDY XR TOUJEO TRESIBA TRIJARDY XR TRULICITY
<b>Asthma Agents</b>	albuterol budesonide cromolyn dexamethasone uticasone/salmeterol ipratropium ipratropium/albuterol levalbuterol hc	methylprednisolone prednisolone prednisone terbutaline theochron theophylline theophylline CR theophylline ER zafirlukast	ADVAIR HFA ANORO ELLIPTA ARNUITY ELLIPTA ASMANEX ASMANEX TWISTHALER BREO ELLIPTA COMBIVENT RESPIMAT DULERA FLOVENT DISKUS FLOVENT HFA	INCRUSE ELLIPTA QVAR REDIHALER SEREVENT DISKUS SPIRIVA HANDHALER SPIRIVA RESPIMAT STIOLTO RESPIMAT SYMBICORT TRELEGY ELLIPTA

CATEGORY	GENERIC MEDICINE - \$0 copay		BRAND-NAME MEDICINE - \$5 copay
<b>High Blood Pressure/ Hypertension</b>	acebutolol afeditab CR amlodipine amlodipine/benazapril amlodipine/olmesartan amlodipine/olmesartan/ HCTZ amlodipine/ valsartan amlodipine/ valsartan/HCTZ atenolol atenolol/chlorthalidone benazapril benazapril/HCTZ betaxolol bisoprolol bisoprolol/ HCTZ bumetanide candesartan candesartan/ HCTZ captopril captopril/HCTZ/carvediol cartia XT chlorthiazide chlorthalidone clonidine diltiazem diltiazem CD diltiazem ER doxazosin enalapril enalapril/HCTZ eplerenone felodipine ER fosinopril fosinopril/HCTZ furosemide hydralazine hydrochlorothiazide indapamide irbesartan irbesartan/HCTZ isradipine labetalol lisinopril lisinopril/HCTZ losartan losartan/HCTZ	matzim LA methyldopa methyldopa/HCTZ metolazone metoprolol succinate ER metoprolol tartrate metoprolol/HCTZ minoxidil moexipril moexipril/HCTZ nadolol nicardipine nifedical XL nifedipine nifedipine ER nisoldipine ER olmesartan olmesartan/HCTZ perindopril pindolol prazosin propranolol propranolol er propranolol/hctz quinapril quinapril/hctz ramipril spironolactone spironolactone/hctz taztia xt telmisartan telmisartan/ amlodipine telmisartan/ hctz terazosin timolol torse mide trandolapril trandolapril/ verapamil trandolapril/ verapamil er triamterene/ hctz valsartan valsartan/hctz verapamil verapamil cr verapamil er verapamil sa verapamil sr	N/A

# Ensign Preventive Medication List (Non-ACA) – \$0 Generics / \$5 Brands *Medications to Incur Copay in 2025 (cont.)*

CATEGORY	GENERIC MEDICINE - \$0 copay	BRAND-NAME MEDICINE - \$5 copay
<b>Cardiovascular Agents</b>	acetazolamide	methazolamide
	acetazolamide ER	mexilietine
	amiloride/HCTZ	minitran
	amiloride	nimodipinenisoldipine
	amiodarone	nitro-time
	amlodipine/ atorvastatin	nitroglycerin
	digitek	nitroglycerin ER
	digox	nitroglycerin sublingual
	digoxin	nitroglycerin transdermal
	disopyramide	pacerone
	dofetilide	propafenone
	ethacrynic acid flecainide	propafenone erquinidine
	furosemide	quinidine gluconate cr
	isosorbide dinitrate	quinidine gluconate er
	isosorbide mononitrate	sorine
	mexilietine	sotalol
	isosorbide mononitrate ER	spironolactone
<b>Cholesterol Agents</b>	cholestyramine	fenobric acid
	cholestyramine light	fenobric acid DR
	colesevelam	niacin ER
	colestipol	omega-3-acid
	fenobrate	prevalite

CATEGORY	GENERIC MEDICINE - \$0 copay	BRAND-NAME MEDICINE - \$5 copay
<b>Diabetic Supplies</b>		<b>BLOOD GLUCOSE MONITORS</b>
		<b>INSULIN NEEDLES AND PEN NEEDLES</b>
		<b>BLOOD GLUCOSE MONITORS</b>
		<b>CONTINUOUS GLUCOSE MONITORS</b>
		<b>SUPPLIES</b>
		<b>INSULIN SYRINGES</b>
		<b>KETONE TEST KITS</b>
		<b>BLOOD GLUCOSE TEST STRIPS</b>
		<b>LANCETS</b>
		<b>INSULIN DELIVERY DEVICES</b>
		<b>PROTEIN TEST KITS</b>
		<b>INSULIN INFUSION SETS</b>
<b>Estrogens &amp; Estrogen Combination Products</b>	covaryx	jevantique lo
	covaryx hs	jinteli
	dotti	lopreeza
	eemt	mimvey
	esteried estrogens	memvey lo
	methyltestosterone	norethindrone
	estradiol/norethindrone	ethinyl estradiol
	fyavolv	
<b>Osteoporosis Agents</b>	alendronate	risendronate
	calcitonin	medroxyprogesterole
	ibandronate	estradiol
	raloxifene	
<b>Ulcer Agents</b>	misoprostol	
	nizatidine	
	pantoprazole	
	rabeprazole	
	sucralfate	

Preventive medications are defined as those prescribed to prevent the occurrence of a chronic disease or condition for those individuals with risk factors, or to prevent the recurrence of a disease or condition.

The preventive medications will incur the applicable copay based on the plan and will bypass any deductible. The list contains examples of preventive medications organized by therapy class. Medications may be added to or removed from the list periodically and the list is not all inclusive.

# Ensign – Preventive Medications Covered Under the Affordable Care Act (ACA) - \$0 Copay

CATEGORY	COVERED MEDICATION
<b>Aspirin Preventive Medication</b>	Low-dose (81 mg) - Men - ages 45 to 79 / Women - ages 55 to 79 years <i>The USPSTF recommends the use when the potential benefit of a reduction in myocardial infarctions outweighs the potential harm due to an increase in gastrointestinal hemorrhage.</i>
<b>Breast Cancer Prevention</b>	Generic tamoxifen tablets, raloxifene tablets and generic aromatase inhibitors at zero co-pay. <i>The USPSTF recommends that clinicians engage in shared, informed decision making with women who are at increased risk for breast cancer about medications to reduce their risk. For women who are at increased risk for breast cancer and at low risk for adverse medication effects.</i>
<b>Cholesterol Preventative Medication</b>	Generic statins for adults ages 40-75 years old at zero copay - atorvastatin, fluvastatin, lovastatin, pravastatin, pitavastatin, simvastatin, rosuvastatin <i>The USPSTF recommends that adults ages 40-75 without a history of cardiovascular disease (CVD) use a low to moderate dose statin for the prevention of CVD events and mortality when they have one or more cardiovascular disease risk factors and a calculated 10-year risk of a CVD event of 10 percent or greater.</i>
<b>Colorectal Cancer Screening</b>	For adults 45 to 75 years old, select generic prescription bowel preparation agents at zero copay
<b>Folic Acid Supplementation</b>	Select folic acid supplementation products containing 400 to 800 micrograms of folic acid at zero copay. <i>The USPSTF recommends that all women planning or capable of pregnancy take a daily supplement containing 0.4 to 0.8 mg (400 to 800 µg) of folic acid.</i>
<b>Cavity Prevention - Fluoride Supplementation</b>	For children age 6 months to 6 years, select generic oral fluoride supplementation products at zero copay. <i>The USPSTF recommends primary care clinicians prescribe oral fluoride supplementation starting at age 6 months for children whose water supply is fluoride deficient.</i>
<b>Immunizations</b>	Cover select vaccines in accordance with recommendations of the ACIP. These include but are not limited to shingle and flu vaccines at zero copay.
<b>Contraceptive Methods</b>	Cover numerous contraceptive methods at zero copay. These products include but are not limited to: Generic OTC contraceptive methods (spermicides); generic hormonal contraceptives (oral and injectable); Generic emergency contraceptives; Intrauterine devices. <i>The HRSA recommends all Food and Drug Administration approved contraceptive methods, sterilization procedures, and patient education and counseling for all women with reproductive capacity.</i>
<b>Smoking Cessation</b>	Select smoking cessation products at zero copay – Chantix products <i>The USPSTF recommends that clinicians ask all adults about tobacco use, advise them to stop using tobacco, and provide behavioral interventions and U.S. Food and Drug Administration (FDA)–approved pharmacotherapy for cessation to adults who use tobacco.</i>
<b>Fall Prevention - Vitamin D Supplementation</b>	Generic vitamin D supplementation products for adults over age 65 at zero copay. <i>The USPSTF recommends vitamin D supplementation to prevent falls in community-dwelling adults age 65 years and older who are at increased risk for falls.</i>
<b>HIV Prevention</b>	Cover Truvada or Descovy at zero copay if clinical criteria is met. <i>The USPSTF recommends that clinicians offer pre-exposure prophylaxis (PrEP) with effective antiviral therapy to persons who are at high risk of HIV acquisition.</i>