

Chronic Medicine

**Reduced out-of-pocket costs
for the medicine you need**
2024 Advanced Control Plan



Forget your deductible – just pay your copay or coinsurance when buying certain medication.

**January 1, 2024 Chronic Medicine List
Advanced Control Plan**

Key

UPPERCASE	Brand-name medicine
<i>lowercase italics</i>	Generic medicine

Drug class	Drug name		
ANTIANGINAL AGENTS	<i>isosorbide dinitrate</i> <i>isosorbide mononitrate</i>	<i>isosorbide mononitrate er</i> <i>nitroglycerin</i>	<i>ranolazine er</i>
ANTIASTHMATIC	<i>albuterol</i> ANORO ELLIPTA BREO ELLIPTA <i>budesonide</i> <i>cromolyn</i> <i>fluticasone/sa</i> <i>fluticasone/salmeterol</i> <i>ipratropium</i>	<i>ipratropium/albuterol</i> <i>levalbuterol</i> <i>levalbuterol hfa</i> <i>montelukast</i> PULMICORT FLEXHALER SPIRIVA HANDIHALER SPIRIVA RESPIMAT STIOLTO RESPIMAT	STRIVERDI RESPIMAT <i>terbutaline</i> <i>theophylline</i> <i>theophylline er</i> TRELEGY ELLIPTA <i>wixela inhub</i> YUPELRI <i>zafirlukast</i>
ANTIDEPRESSANTS	<i>amitriptyline</i> <i>amoxapine</i> <i>bupropion</i> <i>bupropion er (sr)</i> <i>bupropion er (xl)</i> <i>citalopram</i> <i>clomipramine</i> <i>desipramine</i> <i>desvenlafaxine er</i> <i>doxepin</i>	<i>duloxetine</i> <i>escitalopram</i> <i>fluoxetine</i> <i>fluoxetine dr</i> <i>fluvoxamine</i> <i>fluvoxamine er</i> <i>imipramine</i> <i>mirtazapine</i> <i>mirtazapine odt</i> <i>nefazodone</i> <i>nortriptylin</i>	<i>paroxetine</i> <i>paroxetine er</i> <i>phenelzine</i> <i>protriptyline</i> <i>sertraline</i> <i>tranylcypromine</i> <i>trazodone</i> <i>trimipramine</i> TRINTELLIX <i>venlafaxine</i> <i>venlafaxine er</i>

Health benefits and health insurance plans are offered, administered and/or underwritten by Aetna Health Inc., Aetna Health Insurance Company of New York, Aetna Health Assurance Pennsylvania Inc., Aetna Health Insurance company and/or Aetna Life Insurance Company (Aetna). In Florida, by Aetna Health Inc. and/or Aetna Life Insurance Company. In Utah and Wyoming by Aetna Health of Utah Inc. and Aetna Life Insurance Company. In Maryland, by Aetna Health Inc., 151 Farmington Avenue, Hartford, CT 06156. Each insurer has sole financial responsibility for its own products. Pharmacy benefits are administered by an affiliated pharmacy benefit manager, CVS Caremark. Aetna is part of the CVS Health family of companies.

Drug class	Drug name		
ANTIDIABETIC	<i>acarbose</i>	HUMULIN R U-500 KWIKPEN	SOLIQUA 100/33
	BAQSIMI	JARDIANCE	SYMLINPEN 120
	BASAGLAR KWIKPEN	JANUMET	SYMLINPEN 60
	FARXIGA	JANUMET XR	SYNJARDY
	FIASP products	JANUVIA	SYNJARDY XR
	<i>glimepiride</i>	LANTUS products	TOUJEO products
	<i>glipizide</i>	<i>metformin</i>	TRESIBA products
	<i>glipizide er</i>	<i>metformin er</i>	TRIJARDY XR
	<i>glipizide xl</i>	<i>migliol</i>	TRULICITY
	<i>glipizide/metformin</i>	MOUNJARO	VICTOZA
	<i>glyburide</i>	<i>nateglinide</i>	XIGDUO XR
	<i>glyburide micronized</i>	NOVOLIN products	XULTOPHY
	<i>glyburide/metformin</i>	NOVOLOG products	ZEGALOGUE
	GLYXAMBI	OZEMPIC	
	GVOKE HYOPEN 1-PACK	pioglitazone	
	GVOKE HYOPEN 2-PACK	<i>pioglitazone-glimepiride</i>	
	GVOKE PFS	<i>pioglitazone/metformin</i>	
	HUMULIN R U-500 (CONCENTRATED)	<i>repaglinide</i>	
	RYBELSUS		
ANTIHYPERTENSIVE	<i>atorvastatin</i>	<i>fenofibrate micronized</i>	NEXLIZET
	<i>cholestyramine</i>	<i>fenofibric acid</i>	<i>niacin er</i>
	<i>cholestyramine light</i>	<i>fenofibric acid dr</i>	<i>omega-3-acid ethyl esters</i>
	<i>colesevelam</i>	<i>fluvastatin</i>	<i>pravastatin</i>
	<i>colestipol</i>	<i>fluvastatin er</i>	<i>prevalite</i>
	<i>ezetimibe</i>	<i>gemfibrozil</i>	<i>rosuvastatin</i>
	<i>ezetimibe/simvastatin</i>	<i>lovastatin</i>	<i>simvastatin</i>
	<i>fenofibrate</i>	NEXLETOL	VASCEPA
ANTIHYPERTENSIVE	<i>aliskiren</i>	<i>eplerenone</i>	<i>olmesartan/amlodipine/hctz</i>
	<i>amlodipine/benaz</i>	<i>fosinopril</i>	<i>olmesartan/hctz</i>
	<i>amlodipine/benazepril</i>	<i>fosinopril/hctz</i>	<i>perindopril</i>
	<i>amlodipine/olmesartan</i>	<i>guanfacine</i>	<i>phenoxybenzamine</i>
	<i>amlodipine/valsartan</i>	<i>hydralazine</i>	<i>prazosin</i>
	<i>atenolol/chlorthalidone</i>	<i>irbesartan</i>	<i>quinapril</i>
	<i>benazepril</i>	<i>irbesartan/hctz</i>	<i>quinapril/hctz</i>
	<i>benazepril/hctz</i>	<i>lisinopril</i>	<i>ramipril</i>
	<i>bisoprolol/hctz</i>	<i>lisinopril/hctz</i>	TEKTURNA HCT
	<i>candesartan</i>	<i>losartan</i>	<i>telmisartan</i>
	<i>candesartan/hctz</i>	<i>losartan/hctz</i>	<i>telmisartan/amlodipine</i>
	<i>captopril</i>	<i>methyldopa</i>	<i>telmisartan/hctz</i>
	<i>clonidine</i>	<i>metoprolol/hctz</i>	<i>terazosin</i>
	<i>doxazosin</i>	<i>minoxidil</i>	<i>trandolapril</i>
	<i>enalapril</i>	<i>moexipril</i>	<i>valsartan</i>
	<i>enalapril/hctz</i>	<i>olmesartan</i>	<i>valsartan/hctz</i>
	ANTIPSYCHOTICS	ABILIFY MAINTENA	<i>lithium er</i>
<i>aripiprazole</i>		<i>loxapine</i>	<i>risperidone</i>
<i>aripiprazole odt</i>		<i>molindone</i>	<i>risperidone odt</i>
<i>chlorpromazine</i>		<i>olanzapine</i>	<i>thioridazine</i>
<i>clozapine</i>		<i>olanzapine odt</i>	<i>thiothixene</i>
<i>clozapine odt</i>		<i>paliperidone er</i>	<i>trifluoperazine</i>
<i>compro</i>		<i>perphenazine</i>	VRAYLAR
<i>fluphenazine</i>		PERSERIS	<i>ziprasidone</i>
<i>haloperidol</i>		<i>prochlorperazine</i>	
<i>lithium</i>		<i>quetiapine</i>	

Drug class	Drug name		
BETA BLOCKERS	<i>acebutolol</i> <i>atenolol</i> <i>betaxolol</i> <i>bisoprolol</i> <i>carvedilol</i> <i>carvedilol er</i>	<i>labetalol</i> <i>metoprolol</i> <i>metoprolol er</i> <i>nadolol</i> <i>pindolol</i> <i>propranolol</i>	<i>propranolol er</i> <i>sotalol</i> <i>sotalol af</i> <i>timolol tablet</i>
CALCIUM BLOCKERS	<i>amlodipine</i> <i>cartia xt</i> <i>dilt-xr</i> <i>diltiazem</i> <i>diltiazem e</i> <i>diltiazem er</i> <i>felodipine er</i>	<i>isradipine</i> <i>nicardipine</i> <i>nifedipine</i> <i>nifedipine er</i> <i>nimodipine</i> <i>nisoldipine er</i> <i>taztia xt</i>	<i>verapamil</i> <i>verapamil cr</i> VERAPAMIL E <i>verapamil er</i> <i>verapamil sr</i>
CARDIOTONICS	<i>digox</i> <i>digoxin</i>		
DIABETIC DIAGNOSTIC PRODUCTS and SUPPLIES	ACCU-CHEK BLOOD GLUCOSE TEST STRIPS BD INSULIN SYRINGES AND PEN NEEDLES DEXCOM G6 DEXCOM G7 LANCETS, LANCET DEVICES	OMNIPOD OMNIPOD DASH OMNIPOD 5 G6 ONETOUCH ULTRA ONETOUCH VERIO TEST STRIP V-GO 20	V-GO 30 V-GO 40
DIURETICS	<i>acetazolamide</i> <i>acetazolamide er</i> <i>amiloride</i> <i>amiloride/hctz</i> <i>bumetanide</i> <i>chlorthalidone</i>	<i>ethacrynic acid</i> <i>furosemide</i> <i>hctz</i> <i>indapamide</i> <i>methazolamide</i> <i>metolazone</i>	<i>spironolactone</i> <i>spironolactone/hctz</i> <i>toremide</i> <i>triamterene</i> <i>triamterene/hctz</i>
MISCELLANEOUS CARDIOVASCULAR	<i>amlodipine/atorvastatin</i> BIDIL	CORLANOR ENTRESTO	
MISCELLANEOUS PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS	<i>chlordiazepoxide/ amitriptyline</i> <i>olanzapine/fluoxetine</i> <i>perphenazine/amitriptyline</i>		

Please remember that this is not a complete list of drugs covered under your plan. Products may be subject to plan-specific copayment or coinsurance, additional charges or other restrictions. Certain drugs, such as those for infertility, erectile dysfunction, weight loss, smoking cessation or vitamins, may not be covered by your particular pharmacy plan. Diabetic supplies may be covered under your medical plan.

To check coverage and copay information for a specific drug, please visit the website on your member ID card and log in to your member website. If you don't have access to our website, call the toll-free number on your member ID card.

Information is believed to be accurate as of the production date; however, it is subject to change.

