2027 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 January 1, 2027

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
Eliquis

Bold type = Brand-name drug
[Plain type = Generic drug]

[1]Coverage is provided for oral formulations.

Generic only plans will not cover drug names in bold type.

United Healthcare

Therapeutic drug classes
enoxaparin
Fragmin
fondaparinux
heparin
Jantoven
Lovenox
Plavix
Pradaxa
Pradaxa Pak
prasugrel
rivaroxaban
Savaysa
ticagrelor
warfarin
Xarelto
Zontivity
Cardiovascular/Heart disease: High blood pressure
Accupril
Accuretic
acebutolol
Aldactone
aliskiren
Altace
amiloride
amiloride/hydrochlorothiazide
amlodipine
amlodipine/benazepril
amlodipine/olmesartan
amlodipine/olmesartan/hydrochlorothiazide
amlodipine/valsartan
amlodipine/valsartan/hydrochlorothiazide
Arbli

Therapeutic drug classes
Atacand
Atacand HCT
atenolol
atenolol/chlorthalidone
Avalide
Avapro
azilsartan
Azor
Baxfendy
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

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[Plain type = Generic drug]

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Therapeutic drug classes
chlorothiazide
clonidine
Clonidine ER
clonidine patch
Conjupri
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

Therapeutic drug classes
Hemiclor
hydralazine
hydrochlorothiazide
Hyzaar
indapamide
Inderal LA
Inderal XL
Innopran XL
Inspra
Inzirqo
irbesartan
irbesartan/hydrochlorothiazide
isradipine
Javadin
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

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[Plain type = Generic drug]

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Therapeutic drug classes
metoprolol/hydrochlorothiazide
metoprolol succinate
metoprolol tartrate
Micardis
Micardis HCT
minoxidil
moexipril
moexipril/hydrochlorothiazide
nadolol
nadolol/bendroflumethazide
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

Therapeutic drug classes
reserpine
Sdamlo
Soaanz
spironolactone
spironolactone suspension
spironolactone/hydrochlorothiazide
Sular
Taztia XT
Tekturna
telmisartan
telmisartan/amlodipine
telmisartan/hydrochlorothiazide
Tenoretic
Tenormin
terazosin
Tezruly
Thalitone
Tiazac
timolol[1]
Toprol XL
torsemide
trandolapril
trandolapril/verapamil
triamterene
triamterene/hydrochlorothiazide
Tribenzor
Tryvio
valsartan
valsartan/hydrochlorothiazide
Valsartan Solution
Vaseretic
Vasotec

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[Plain type = Generic drug]

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Generic only plans will not cover drug names in bold type.

Therapeutic drug classes
verapamil
verapamil ER
Verelan
Verelan PM
Widaplik
Zestoretic
Zestril
Cardiovascular/Heart disease: High cholesterol
Altoprev
Atorvaliq Suspension
atorvastatin
cholestyramine
cholestyramine light
choline fenofibrate
colesevelam tablets, powder for suspension
Colestid
colestipol
Crestor
Ezallor Sprinkle
ezetimibe
Ezetimibe/Rosuvastain
fenofibrate capsule
fenofibrate tablet
fenofibric acid
Fenoglide
Fibricor
Flolipid
fluvastatin
fluvastatin ER
gemfibrozil
icosapent
Lescol XL

Therapeutic drug classes
Lipitor
Lipofen
Livalo
Lopid
lovastatin
Lovaza
Nexletol
Nexlizet
niacin extended-release
Niacor
omega-3 acid ethyl esters
pitavastatin
pravastatin
prevalite
Questran
Questran Light
rosuvastatin
simvastatin
simvastatin/ezetimibe
Tricor
Trilipix
Vascepa
Vytorin
Welchol
Zetia
Zocor
Zypitamag
Immunosuppressant: Organ rejection
Astagraf XL
Azasan
azathioprine
Cellcept

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[Plain type = Generic drug]
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Generic only plans will not cover drug names in bold type.

Therapeutic drug classes
cyclosporine
Envarsus XR
everolimus
Gengraf
Imuran
mycophenolate
mycophenolic acid
Myfortic
Myhibbin
Neoral
Prograf
Rapamune
Sandimmune
sirolimus
tacrolimus
tacrolimus ER
Zortress
Musculoskeletal: Osteoporosis
Actonel
alendronate
Atelvia
Binosto
Bonsity
calcitonin (salmon)
etidronate
Evista
Forteo
Fosamax
Fosamax Plus D
ibandronate
Miacalcin
raloxifene

Therapeutic drug classes
risedronate
Teriparatide
teriparatide
Tymlos
Vitamins
pediatric flouride preparations (for example: **Florvite, Tri-Vi-Flor**) - brand name and generic products
prenatal vitamins (for example: **CitraNatal Assure, Prenate DHA**) - brand name and generic products

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[1]Coverage is provided for oral formulations.

Generic only plans will not cover drug names in bold type.

ATTENTION: Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. (TTY 711).

ማሳሰቢያ፦ አማርኛ (Amharic) የሚናገሩ ከሆነ፣ ነፃ የቋንቋ እገዛ አገልግሎቶች እና ነፃ ተግባቦቶች እንደ ትልቅ እትም ባሉ ሌሎች ቅርፀቶች ለእርስዎ ይገኛሉ። በአባልነት መታወቂያ ካርድዎ ላይ ያለውን ነፃ የስልክ ቁጥር ይደውሉ።

ملاحظة: إذا كنت تتحدث **اللغة العربية** (Arabic)، ستتوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة .اتصل بالرقم المجاني المدون على بطاقة تعريف العضو خاصتك.

দেখুন: আপনি যদি **বাংলায়** (Bengali-Bangala) কথা বলেন, তাহলে বিনামূল্যে ভাষা সহায়তা পরিষেবা এবং বড় মুদ্রণের মতো অন্যান্য ফরম্যাটে যোগাযোগগুলি আপনার জন্য বিনামূল্যে উপলব্ধ। আপনার সদস্যের পরিচয়পত্রের কার্ডের টোল-ফ্রি নম্বরে কল করুন

ចំណាំ៖ ប្រសិនបើអ្នកនិយាយ**ភាសាខ្មែរ** (Cambodian-Mon-Khmer)
សេវាជំនួយភាសាឥតគិតថ្លៃ និងការទំនាក់ទំនងឥតគិតថ្លៃក្នុងទម្រង់ផ្សេងទៀត
ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។
ទូរសព្ទមកលេខឥតគិតថ្លៃនៅលើបណ្ណសម្គាល់សមាជិករបស់អ្នក។

請注意：如果您說**中文** (Chinese - Traditional)，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

ATTENTION : Si vous parlez **français (French)**, des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

ATANSYON: Si w pale **Kreyòl Ayisyen (Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòma lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlose Sprachassistenzdienste und kostenlose Kommunikation in anderen Formaten, wie zum Beispiel große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

ΠΡΟΣΟΧΗ: Εάν μιλάτε **ελληνικά** (Greek), υπάρχουν διαθέσιμες δωρεάν υπηρεσίες γλωσσικής βοήθειας και δωρεάν επικοινωνία σε άλλες μορφοποιήσεις, όπως μεγάλα γράμματα. Καλέστε τον αριθμό χωρίς χρέωση στην κάρτα μέλους σας.

ધ્યાન આપો: જો તમે **ગુજરાતી (Gujarati)** બોલતા હો તો વિના મૂલ્યે ભાષાકીય મદદરૂપ સેવાઓ અને અન્ય ફોર્મેટમાં વિના મૂલ્યે સંચાર, જેમ કે મોટી પ્રિન્ટ, તમારા માટે ઉપલબ્ધ છે. તમારા સભ્ય ઓળખ કાર્ડ પરના ટોલ-ફ્રી નંબર પર કૉલ કરો.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ्त संचार, जैसे कि बड़े प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

LUS TSEEM CEEB: Yog tias koj hais **lus Hmoob (Hmong)**, muaj cov kev pab cuam txhais lus thiab muaj kev sib txuas lus pab dawb ua lwm hom ntawv, xws li luam ua ntawv loj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

ATENSION: No agsasaoka iti **Ilocano (Ilocano)**, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

ATTENZIONE: se parla **italiano (Italian)**, può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

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や、拡大文字など他の形式での無料のコミュニケーションをご利用いただけます。会員証に記載されているフリーダイアルにお電話ください。

알림 사항: **한국어(Korean)**를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

ໝາຍເຫດ: ຖ້າຫາກທ່ານເວົ້າ**ພາສາລາວ (Lao)**, ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາຟຣີ ແລະ ການສື່ສານໃນຮູບແບບອື່ນໆຟຣີ, ເຊັ່ນ: ການພິມຕົວອັກສອນຂະໜາດໃຫຍ່.
ໂທຫາເບີໂທຟຣີຢູ່ທີ່ບັດປະຈຳຕົວສະມາຊິກຂອງທ່ານ.

ध्यान दिनुहोस्: यदि तपाईंले **नेपाली (Nepali)** बोल्नुहुन्छ भने, नि:शुल्क भाषा सहायता सेवाहरू र अन्य ढाँचाहरूमा नि:शुल्क संचारहरू, जस्तै ठूलो छाप, तपाईंका लागि उपलब्ध छन्।. आफ्नो सदस्य पहिचान कार्डमा रहेको टोल फ्री नम्बरमा कल गर्नुहोस्।

توجه: اگر به زبان **فارسی** (Persian-Farsi) صحبت می‌کنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالب‌های دیگر، مانند چاپ بزرگ، در دسترس شما هستند. با شماره رایگان مندرج روی کارت شناسایی عضویت‌تان تماس بگیرید.

UWAGA: Dla osób mówiących po **polsku** (Polish) dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

ATENÇÃO: se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ **ਪੰਜਾਬੀ** (Punjabi) ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫ਼ਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਅਤੇ ਹੋਰ ਫਾਰਮੈਟਾਂ, ਜਿਵੇਂ ਕਿ ਵੱਡੇ ਪ੍ਰਿੰਟ, ਵਿੱਚ ਮੁਫ਼ਤ ਸੰਚਾਰ ਉਪਲਬਧ ਹਨ। ਆਪਣੇ ਮੈਂਬਰ ਪਛਾਣ ਕਾਰਡ 'ਤੇ ਟੋਲ-ਫ੍ਰੀ ਨੰਬਰ 'ਤੇ ਕਾਲ ਕਰੋ।

ВНИМАНИЕ! Если вы говорите на **русском** языке (Russian), вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro. (TTY 711).

PAUNAWA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

โปรดทราบ หากคุณ**พูดภาษาไทย (Thai)** ได้
คุณสามารถใช้บริการช่วยเหลือด้านภาษาฟรีและการสื่อสารในรูปแบบอื่น ๆ ฟรี เช่น
การพิมพ์ด้วยตัวอักษรขนาดใหญ่ โทรไปยังหมายเลขโทรฟรีสำหรับสมาชิกตามบัตรประจำตัวของคุณ

ЗВЕРНІТЬ УВАГУ! Якщо ви розмовляєте **українською** (Ukrainian), ви можете безоплатно користуватися послугами мовної підтримки, а також безоплатно отримувати інформаційні матеріали в інших форматах, як от набрані великим шрифтом. Телефонуйте на безкоштовний номер телефону, зазначений на вашій ідентифікаційній картці учасника.

توجہ دیں: اگر آپ **اردو (Urdu)** زبان بولتے ہیں تو زبان کی معاون خدمات اور دیگر فارمیٹس میں مواصلات، جیسے بڑے پرنٹ، آپ کے لیے مفت دستیاب ہیں۔ اپنے ممبر شناختی کارڈ پر دیئے گئے ٹول فری نمبر پر کال کریں۔

LƯU Ý: Nếu quý vị nói **Tiếng Việt (Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ định danh thành viên của quý vị.

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

If you are not currently enrolled with UnitedHealthcare or Oxford for pharmacy benefit coverage, you may access your health plan's member website 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. 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 benefit plan 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 login to **myuhc.com®** or the UnitedHealthcare app for information on specific drugs included in these programs or call the member phone number listed on your health plan ID card.

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