

# Value Based Preventive Drug List



The Value Based Preventive Drug List is an optional benefit for self-funded groups. With this benefit, the drugs listed below are covered at 100%\*. This is a separate benefit from preventive drugs covered under the Affordable Care Act. A full list of covered drugs can be found at [PacificSource.com/find-a-drug](https://PacificSource.com/find-a-drug).

Show your PacificSource ID each time you purchase prescriptions at an in-network pharmacy to ensure you're receiving the best benefit.

If you have questions, please email our Customer Service team at [CS@PacificSource.com](mailto:CS@PacificSource.com), or call toll-free:

- Idaho: 800-688-5008
- Montana: 877-590-1596
- Oregon: 888-977-9299
- Washington: 866-556-1224
- TTY: 711. We accept all relay calls.

## Asthma

- Arnuity Ellipta
- Flovent Diskus
- Flovent HFA
- Pulmicort FlexHaler
- Qvar RediHaler

## Bone health

- alendronate sodium
- ibandronate sodium

## Cholesterol

- atorvastatin calcium
- lovastatin
- pravastatin sodium
- simvastatin

## Mental health

- bupropion HCL immediate release tablet
- carbamazepine immediate release tablet
- citalopram HBR
- escitalopram oxalate tablet
- fluoxetine HCL
- imipramine HCL
- lithium carbonate
- nortriptyline HCL
- olanzapine
- paroxetine HCL immediate release tablet
- quetiapine fumarate
- risperidone
- sertraline HCL
- venlafaxine HCL

## Heart/blood pressure

- acebutolol HCL
- amiloride-HCTZ
- amlodipine besylate
- amlodipine besylate-benazepril
- atenolol
- atenolol-chlorthalidone
- benazepril HCL
- benazepril HCTZ
- bisoprolol fumarate
- bisoprolol-HCTZ
- bumetanide
- captopril
- chlorothiazide
- chlorthalidone
- clonidine HCL
- diltiazem ER
- diltiazem HCL
- enalapril maleate
- enalapril-HCTZ
- felodipine ER
- fosinopril sodium
- fosinopril-HCTZ
- furosemide
- guanfacine HCL
- hydrochlorothiazide
- indapamide
- irbesartan
- irbesartan-HCTZ
- isradipine
- labetalol HCL
- lisinopril
- lisinopril-HCTZ
- losartan potassium
- losartan-HCTZ
- methyclothiazide
- metolazone
- metoprolol tartrate
- metoprolol-HCTZ
- moexipril-HCL
- nadolol
- nicardipine HCL
- nifedipine ER
- pindolol
- propranolol HCL
- propranolol-HCTZ
- quinapril HCL
- spironolactone
- spironolactone-HCTZ
- torsemide
- trandolapril
- triamterene-HCTZ
- valsartan-HCTZ
- verapamil ER
- verapamil ER PM
- verapamil HCL

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## Diabetes

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- Acarbose
- alogliptin
- Apidra\*
- Baqsimi
- Farxiga\*
- Fiasp FlexTouch
- Fiasp
- glimepiride
- glipizide
- glipizide ER
- glipizide XL
- glipizide-metformin
- GlucaGen
- Glucagon
- Glyburide
- Glyburide-Metformin
- Glyxambi\*
- Gvoke
- Humulin U-500
- Janumet\*
- Janumet XR\*
- Januvia\*
- Jardiance\*
- Lantus Solostars
- Lantus
- Levemir FlexTouch
- Levemir
- metformin HCL
- metformin HCL ER
- miglitol
- nateglinide
- NovoLIN 70/30 FlexPen
- NovoLIN 70/30 Suspension
- NovoLIN N
- NovoLIN R
- NovoLOG
- Omnipod
- Omnipod Dash
- Omnipod 5 G6
- Ozempic\*
- pioglitazone
- repaglinide
- Rybelsus\*
- Synjardy\*
- Synjardy XR\*
- Toujeo Max Solostar
- Toujeo Solostar
- Tresiba FlexTouch
- Tresiba
- Trijardy XR\*
- Trulicity\*
- Victoza\*
- Xigduo XR\*

## Diabetic testing

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- BD Insulin Syringe
- BD Pen Needle
- Dexcom G6 (Receiver, Sensor, Transmitter)\*
- FreeStyle Libre 14 Day (Reader, Sensor)\*
- FreeStyle Libre (Reader, Sensor)\*
- FreeStyle Libre 2 (Reader, Sensor)\*
- Novopen Echo
- OneTouch Lancets
- OneTouch Ultra Blue Strips
- OneTouch Verio Strips
- One Touch Ultra 2 kit
- One Touch Verio Flex kit
- One Touch Verio kit
- One Touch Verio IQ kit

\*Prior authorization or step therapy may apply. Prior authorization means we review the drug request to ensure it meets certain criteria. Step therapy means we may ask you to try a different drug first before reviewing the request. Both processes help us deliver safe and effective care.