



Blue Shield Plus Drug Formulary

Value-based tier drugs

Select Blue Shield pharmacy plans have a value-based tier drug benefit.¹

Value-based tier drugs are specific preventive drugs taken when risk factors are present for a disease that has not manifested (or is asymptomatic), or to prevent the occurrence of a disease from which an individual has recovered.

Value-based tier drugs are select generic and brand-name drugs that are FDA-approved for high blood pressure, high cholesterol, diabetes, and asthma. These drugs are covered at no charge, or at an otherwise reduced member cost share.

The following is a list of value-based tier drugs² used to treat these select chronic conditions. This list is current as of the date printed below and is subject to change. To access the *Blue Shield Plus Drug Formulary*, visit blueshieldca.com/pharmacy.

Asthma	Pulmicort-Flexhaler	colesevelam
Anti-asthmatics		
Advair HFA	Qvar Redihaler	colestipol
albuterol	Serevent Diskus	ezetimibe
Anoro Ellipta	Spiriva	ezetimibe-simvastatin
arformoterol tartrate	Striverdi Respimat	fenofibrate
Arnuity Ellipta	terbutaline	fenofibrate-micronized
Atrovent HFA	Theo-24	fenofibric acid capsule
Breo Ellipta	theophylline	fenofibric acid (choline)
Breyna	theophylline er	fluvastatin
budesonide	Trelegy Ellipta	fluvastatin er
budesonide-formoterol	wixela inhub	gemfibrozil
Combivent	zafirlukast	lovastatin
fluticasone-salmeterol	Asthma supplies	niacin
formoterol fumarate	Aerochamber	niacin er
Incruse Ellipta	OptiChamber	omega-3 acid ethyl esters
ipratropium-albuterol		pitavastatin
ipratropium-bromide	High cholesterol	pravastatin
levalbuterol	Dyslipidemics	prevalite
montelukast	atorvastatin	rosuvastatin
	cholestyramine	simvastatin

High blood pressure

Ace inhibitors

benazepril
captopril
enalapril
fosinopril
lisinopril
moexipril
perindopril
quinapril
ramipril

Anti-hypertensives

aliskiren
amlodipine-atorvastatin
amlodipine-benazepril
amlodipine-olmesartan
amlodipine-valsartan
amlodipine-valsartan-hctz
atenolol-chlorthalidone
benazepril-hctz
bisoprolol-hctz
candesartan
candesartan-cilexetil
candesartan-cilexetil-hctz
captopril-hctz
clonidine
doxazosin
enalapril-hctz
eprosartan
fisinopril-hctz
guanfacine
hydralazine
irbesartan
irbesartan-hctz
lisinopril-hctz

losartan

losartan-hctz
methyldopa
methyldopa-hctz
metoprolol-hctz
minoxidil
olmesartan
olmesartan-amlodipine-hctz
olmesartan-hctz
prazosin
propranolol-hctz
quinapril-hctz
telmisartan
telmisartan-amlodipine
telmisartan-hctz
terazosin
trandolapril
trandolapril-verapamil er
valsartan tablet
valsartan-hctz

Beta-blockers

acebutolol
atenolol
betaxolol
bisoprolol
carvedilol
carvedilol er
labetalol
metoprolol succinate
metoprolol tartrate
nadolol
nebivolol
pindolol
propranolol
timolol maleate (oral)

Calcium channel blockers

amlodipine
Cartia XT
diltiazem
diltiazem er
felodipine er
isradipine
Matzim LA
nicardipine
nifedipine
nifedipine er
nisoldipine er
Taztia XT
Tiadylt ER
verapamil
verapamil er

Diuretics

amiloride
amiloride-hctz
chlorothiazide
chlorthalidone
eplerenone
hydrochlorothiazide
indapamide
methylclothiazide
metolazone
spironolactone
spironolactone-hctz
triamterene
triamterene-hctz

Diabetes

Anti-diabetic drugs
acarbose
Farxiga

glimepiride	pioglitazone-metformin
glipizide/glipizide er	repaglinide
glipizide-metformin	repaglinide-metformin
glyburide	Rybelsus
glyburide-metformin	Synjardy/Synjardy XR
Glyxambi	Toujeo SoloStar
Humalog cartridge, kwikpen 200 U/ Humalog mix pen & vial	tolbutamide
Humulin vial	Tresiba
insulin lispro 100u/ml vial & pen	Trulicity
Janumet/Janumet XR	Victoza
Januvia	Xigduo XR
Jardiance	Diabetic supplies
Lantus vial & pen	Accu-chek test strips
Lyumjev	Insulin syringes and needles
metformin, metformin er ³	Lancets
miglitol	
nateglinide	
Ozempic	
pioglitazone	
pioglitazone-glimepiride	

¹ Refer to your Evidence of Coverage or Certificate of Insurance to determine if you have a value-based tier drug benefit.

² Generic drugs begin with lowercase letters, and brand-name drugs begin with capital letters. In addition, this list does not include all the drugs that are included in your outpatient prescription drug benefit. Some strengths or dosage forms may not be covered. Combination products of drugs on this list may also be included.

³ Generic Glucophage XR only.