

Workday, Inc. High Deductible Health Plan (HDHP) - Health Savings Account (HSA) Preventive Therapy Drug List

Treatments marked in **red** text with an asterisk (*) require trial and failure of preferred, covered options or approval via prior authorization to be covered. Please refer to the CVS Caremark® Performance Drug List for preferred medication options that are available.

(10/01/23)

ANTI-INFECTIVES

ANTIRETROVIRAL AGENTS

emtricitabine/tenofovir disoproxil fumarate 200/300 mg

APRETUDE*

DESCOVY

TRUVADA 200/300 mg*

ANTICOAGULANTS/ ANTIPLATELETS

ANTICOAGULANTS

*dabigatran
enoxaparin
fondaparinux
warfarin*

Jantoven

ARIXTRA

ELIQUIS

FRAGMIN

LOVENOX

PRADAXA*

PRADAXA PAK*

SAVAYSA*

XARELTO

PLATELET AGGREGATION INHIBITORS

aspirin 81 mg

clopidogrel

dipyridamole

dipyridamole ext-rel/aspirin

prasugrel

BRILINTA

EFFIENT

PLAVIX*

YOSPRALA*

ZONTIVITY*

*Over-the-Counter (OTC) products require a prescription.
Coverage may vary by plan.*

CORONARY ARTERY DISEASE

ANTHYPERLIPIDEMICS

atorvastatin

cholestyramine

colesevelam

colestipol

ezetimibe

fenofibric acid

*fenofibrate – exceptions apply**

fenofibric acid delayed-rel

fluvastatin

fluvastatin ext-rel

gemfibrozil

icosapent ethyl*

lovastatin

niacin ext-rel

pravastatin

rosuvastatin

simvastatin

Niacor*

Prevalite

ALTOPREV*

ANTARA

ATORVALIQ*

COLESTID

CRESTOR*

EZALLOR SPRINKLE*

FENOFIBRATE

FENOFIBRIC ACID*

FENOGLIDE – except for 120 mg tab*

FIBRICOR

FLOLIPID*

LESCOL XL*

LIPITOR*

LIPOFEN

LIVALO*

LOPID

PRALUENT*

QUESTRAN/QUESTRAN LIGHT

REPATHA

TRICOR*

TRILIPIX

VASCEPA

WELCHOL

ZETIA*

ZOCOR

ZYPITAMAG*

COMBINATION ANTHYPERLIPIDEMICS

amlodipine/atorvastatin

ezetimibe/simvastatin

CADUET

EZETIMIBE/ROSUVASTATIN*

ROSZET*

VYTORIN

DIABETES

DIAGNOSTIC AGENTS AND SUPPLIES

BLOOD GLUCOSE MONITORS – ALL *

Plan restrictions may apply

BLOOD GLUCOSE STRIPS – ALL *

Plan restrictions may apply

INSULIN DELIVERY DEVICES *

Plan restrictions may apply

**INSULIN SYRINGES, INFUSION SETS,
AND NEEDLES ***

Plan restrictions may apply

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INHALED DIABETES AGENTS

AFREZZA*

INJECTABLE DIABETES AGENTS

ADMELOG*

APIDRA*

BASAGLAR

BYDUREON BCISE*

BYETTA*

FIASP

HUMALOG*

HUMULIN*

INSULIN ASPART*

INSULIN ASPART 70/30*

INSULIN DEGLUDEC*

INSULIN GLARGINE*

INSULIN LISPRO*

LANTUS*

LEVEMIR

LYUMJEV*

MOUNJARO

MYXREDLIN*

NOVOLIN

NOVOLOG

OZEMPIC

REZVOGLAR*

SEMGLEE*

SOLIQUA

SYMLINPEN

TOUJEO

TRESIBA

TRULICITY

VICTOZA

XULTOPHY

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ORAL DIABETES AGENTS

acarbose

alogliptin*

alogliptin/metformin*

alogliptin/pioglitazone*

glimepiride

glipizide

glipizide ext-rel

*Please note: This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.*

Some strengths or dosage forms may not be included in the Preventive Therapy Drug List and certain products or categories may not be covered, regardless of their appearance in this document. Please check your benefit plan should you have any questions about coverage. Additional medications may be included in this list from time to time in compliance with Affordable Care Act requirements and/or U.S. Internal Revenue Service (IRS) guidance. This list includes medications considered preventive by the IRS; it may not include all preventive medications.

glipizide/metformin
metformin
metformin ext-rel
miglitol
nateglinide
pioglitazone
pioglitazone/glimepiride
pioglitazone/metformin
repaglinide
saxagliptin
ACTOPLUS MET
ACTOPLUS MET XR
ACTOS*
AMARYL
BRENZAVVY*
DUETACT
FARXIGA
GLUCOTROL XL
GLUMETZA* – and its generics*
GLYXAMBI
INVOKAMET*
INVOKAMET XR*
INVOKANA*
JANUMET
JANUMET XR
JANUVIA
JARDIANCE
JENTADUETO*
JENTADUETO XR*
KAZANO*
KOMBIGLYZE XR*
METAGLIP
NESINA*
ONGLYZA*
OSENI*
QTERN*
RIOMET*
RYBELSUS
SEGLUOMET*
STEGLATRO*
STEGLUJAN*
SYNJARDY
SYNJARDY XR
TRADJENTA*
TRIJARDY XR*
XIGDUO XR

HYPERTENSION

ACE INHIBITORS/ANGIOTENSIN II RECEPTOR ANTAGONISTS AND COMBINATION AGENTS

amlodipine/benazepril
benazepril
benazepril/hydrochlorothiazide
candesartan
candesartan/hydrochlorothiazide
captopril
captopril/hydrochlorothiazide
enalapril
enalapril/hydrochlorothiazide
fosinopril
fosinopril/hydrochlorothiazide
irbesartan
irbesartan/hydrochlorothiazide

lisinopril
lisinopril/hydrochlorothiazide
losartan
losartan/hydrochlorothiazide
moexipril
olmesartan
olmesartan/hydrochlorothiazide
perindopril
quinapril
quinapril/hydrochlorothiazide
ramipril
telmisartan
telmisartan/hydrochlorothiazide
trandolapril
valsartan
valsartan solution*
valsartan/hydrochlorothiazide
ACCUPRIL
ACCURETIC
ALTACE
ATACAND*
ATACAND HCT*
AVALIDE
AVAPRO
BENICAR*
BENICAR HCT*
COZAAR*
DIOVAN*
DIOVAN HCT*
EDARBI*
EDARBYCLOR*
EPANED
HYZAAR*
LOTENSIN
LOTENSIN HCT
LOTREL
MICARDIS*
MICARDIS HCT*
PRESTALIA*
QBRELIS
VASERETIC
VASOTEC
ZESTORETIC*
ZESTRIL

BETA-BLOCKERS AND COMBINATION AGENTS

acebutolol
atenolol
atenolol/chlorthalidone
betaxolol
bisoprolol
bisoprolol/hydrochlorothiazide
carvedilol
carvedilol phosphate ext-rel
labetalol
metoprolol
metoprolol succinate ext-rel
metoprolol/hydrochlorothiazide
nadolol
nebivolol
pindolol
propranolol
propranolol ext-rel

timolol maleate
BYSTOLIC*
COREG
COREG CR*
CORGARD
INDERAL LA*
KAPSPARGO*
LEVATOL
LOPRESSOR
TENORETIC
TENORMIN
TIMOLOL MALEATE 20 mg
TOPROL-XL*
TRANDATE
ZIAC

CALCIUM CHANNEL BLOCKERS AND COMBINATION AGENTS

amlodipine
diltiazem
diltiazem ext-rel*
diltiazem XR
felodipine ext-rel
Isradipine
levamlodipine
nicardipine
nifedipine
nifedipine ext-rel
nisoldipine ext-rel
verapamil
verapamil ext-rel
Cartia XT
Dilt-XR
Matzim LA*
Nifediac CC
Taztia XT
CARDIZEM*
CARDIZEM CD*
CARDIZEM LA*
ISOPTIN SR
KATERZIA*
NORLIQVA*
NORVASC*
PROCARDIA XL
SULAR
TIAZAC
VERAPAMIL ER*
VERELAN
VERELAN PM

DIURETICS

amiloride/hydrochlorothiazide
chlorthalidone
hydrochlorothiazide
indapamide
spironolactone/hydrochlorothiazide
triamterene/hydrochlorothiazide
ALDACTAZIDE
DIURIL
MAXZIDE
THALITONE*

OTHER ANTIHYPERTENSIVE AGENTS

aliskiren

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amlodipine/olmesartan
amlodipine/telmisartan
amlodipine/valsartan/
hydrochlorothiazide
clonidine
clonidine transdermal
guanfacine
hydralazine
methyl dopa
minoxidil
olmesartan/amlodipine/
hydrochlorothiazide
AZOR*
CATAPRES-TTS
EXFORGE*
TEKTURNA
TEKTURNA HCT
TRIBENZOR

MENTAL HEALTH

ANTIDEPRESSANTS

amitriptyline
amoxapine
bupropion
bupropion ext-rel
citalopram
desipramine
desvenlafaxine ext-rel
Doxepin
duloxetine delayed-rel
escitalopram
fluoxetine
fluoxetine delayed-rel
imipramine HCl
imipramine pamoate
mirtazapine
nortriptyline
paroxetine HCl tablet
paroxetine HCl ext-rel
phenelzine
protriptyline
sertraline
tranylcypromine
trazodone
trimipramine
venlafaxine
venlafaxine ext-rel
vilazodone
Irenka
ANAFRANIL
APLENZIN
AUVELITY*
CELEXA
CYMBALTA*
DESVENLAFAXINE ER
EFFEXOR XR*
EMSAM
FETZIMA
FLUOXETINE 60 mg
FORFIVO XL
LEXAPRO*
MARPLAN

NARDIL
NORPRAMIN
OLEPTRO*
PAMELOR
PARNATE
PAXIL*
PAXIL CR*
PRISTIQ*
PROZAC*
REMERON
SERTRALINE CAP*
TRINTELLIX
VIIBRYD*
WELLBUTRIN SR
WELLBUTRIN XL
ZOLOFT*

ANTIPSYCHOTICS

asenapine
aripiprazole
chlorpromazine
clozapine
fluphenazine
fluphenazine decanoate
haloperidol
loxapine
lurasidone
olanzapine
olanzapine orally disintegrating tabs
paliperidone
perphenazine
quetiapine
quetiapine ext-rel
risperidone
thioridazine
thiothixene
trifluoperazine
ziprasidone
ABILIFY*
ABILIFY ASIMTUFII*
ABILIFY MYCITE*
ABILIFY MAINTENA*
ARISTADA
CAPLYTA
CLOZARIL
EQUETRO
FANAPT*
GEODON
HALDOL DECANOATE
INVEGA
INVEGA SUSTENNA
INVEGA TRINZA*
LATUDA*
LYBALVI*
PERSERIS
REXULTI
RISPERDAL
RISPERDAL CONSTA
SAPHRIS
SECUADO*
SEROQUEL
SEROQUEL XR*
UZEDY*
VERSACLOZ

VRAYLAR
ZYPREXA
ZYPREXA ZYDIS

OBSESSIVE COMPULSIVE DISORDER

clomipramine
fluvoxamine
fluvoxamine ext-rel

OSTEOPOROSIS

alendronate
calcitonin
calcitonin/salmon
ibandronate
raloxifene
risedronate
zoledronic acid 5 mg/100 mL
ACTONEL
ATELVIA
BINOSTO
EVENITY*
EVISTA
FORTEO
FOSAMAX
FOSAMAX PLUS D
MIACALCIN NASAL SPRAY*
PROLIA
RECLAST
TERIPARATIDE*
TYMLOS

PREVENTIVE CARE SERVICES

ANTI-OBESITY AGENTS

SAXENDA
WEGOVY

BOWEL PREPARATIONS

peg 3350/electrolytes
sodium sulfate/
potassium sulfate/magnesium sulfate
Gavilyte
CLENPIQ
GOLYTELY*
MOVIPREP*
OSMOPREP*
PLENVU*
SUFLAVE*
SUPREP*
SUTAB*

RESPIRATORY DISORDERS

RESPIRATORY AGENTS

budesonide suspension
budesonide/formoterol*
cromolyn sodium nebulizer solution
fluticasone propionate HFA*
fluticasone/salmeterol
fluticasone/vilanterol ellipta*
montelukast

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zafirlukast
*zileuton ext-rel**
*Wixela Inhub**
ACCOLATE
ADVAIR
ADVAIR HFA
*AIRDUO RESPICLICK**
*ALVESCO**
*ARNUIY ELLIPTA**
*ASMANEX**
*ASMANEX HFA**
BREO ELLIPTA
*CINQAIR**
*DULERA**
FASENRA
*FLOVENT DISKUS**
*FLOVENT HFA**
*NUCALA**
PULMICORT
PULMICORT FLEXHALER
*QVAR REDIHALER**
*SINGULAIR**
SPIRIVA RESPIMAT 1.25 mcg
SYMBICORT
SYNAGIS
TEZSPIRE
TRELEGY ELLIPTA
XOLAIR
ZYFLO

Plan restrictions may apply

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Coverage may vary by plan.*

SUPPLIES
SPACER DEVICES
SPACER SUPPLIES

WOMEN'S HEALTH

ANTIESTROGENS

tamoxifen
SOLTAMOX

AROMATASE INHIBITORS

anastrozole
exemestane
letrozole
ARIMIDEX
AROMASIN
FEMARA

CONTRACEPTIVES

CONTRACEPTIVES - ALL
PRESCRIPTION FORMULATIONS
*Limitations on brand-name products
may apply*

*Over-the-Counter (OTC) emergency contraceptive
products require a prescription. Coverage may vary by
plan.*

PRENATAL VITAMINS

folic acid
PRENATAL VITAMINS

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