

Medication list as of 1/1/2026

2026 Preventative Generic Exclusive Formulary

Your employer has elected to provide several common preventative care medications at little or no cost to you.

Please note that your specific pharmacy benefit may not include all medications on this list or may require a prior authorization for some medications. Medications that require prior authorization are marked with an asterisk*. If you are prescribed one of these medications, please notify your doctor. Medications on this list are subject to change.

If you have questions about a specific drug, you have resources at your fingertips:

- Download True Rx+ in your app store or use the member portal at member.myplantruerx.com.
- Our Patient Care Team representatives are experts in your pharmacy benefits plan. Call the Patient Care Team at 866-921-4047 between 8:00 am and 8:00 pm ET Monday through Friday.

*Requires Prior Authorization

ASTHMA

BREYNA
BUDESONIDE SUSPENSION
BUDESONIDE/FORMOTEROL
FLUTICASONE /SALMETEROL DISKUS
WIXELA INHUB

BONE HEALTH

ALENDRONATE
IBANDRONATE
RISEDRONATE

DIABETES

ACARBOSE
GLIMEPIRIDE
GLIPIZIDE
GLIPIZIDE ER
GLIPIZIDE/METFORMIN
GLYBURIDE
GLYBURIDE/METFORMIN
METFORMIN
METFORMIN ER
NATEGLINIDE

PIOGLITAZONE
PIOGLITAZONE/GLIMEPIRIDE
PIOGLITAZONE/METFORMIN
REPAGLINIDE
SAXAGLIPTIN

HEART HEALTH

ATENOLOL
ATORVASTATIN
BENAZEPRIL
BISOPROLOL
CAPTOPRIL
CARVEDILOL
ENALAPRIL
FLUVASTATIN
FOSINOPRIL
LISINOPRIL
LOVASTATIN
METOPROLOL SUCCINATE ER
METOPROLOL TARTRATE
MOEXIPRIL
NADOLOL
NEBIVOLOL



PERINDOPRIL
PITAVASTATIN
PRAVASTATIN
PROPRANOLOL
PROPRANOLOL ER
QUINAPRIL
RAMIPRIL
ROSUVASTATIN
SIMVASTATIN
TRANDOLAPRIL

MENTAL HEALTH

CITALOPRAM
ESCITALOPRAM
FLUOXETINE
FLUVOXAMINE
PAROXETINE
SERTRALINE
VILAZODONE