

MAINTENANCE MEDICATIONS



Fill your medication in a 90-day supply

Maintenance medications are taken every day to treat an ongoing health condition like diabetes, high blood pressure, high cholesterol or asthma.

With the Cigna 90 NowSM program, your plan requires you to fill certain maintenance medications in a 90-day (or three month) supply¹ at an in-network pharmacy that's approved to fill 90-day prescriptions.

About this drug list.

This document shows the maintenance medications you have to fill in a 90-day supply as of July 1, 2020.^{2,3} All of these medications are approved by the U.S. Food and Drug Administration (FDA). Medications are listed alphabetically by the condition they treat. Brand name medications are capitalized and generic medications are lowercase. **This list is updated often so it's important to know that this is not a complete list of the medications your plan covers.** Also, your specific plan may not cover all of the medications in this document.



A 90-day supply helps make life easier.

You'll make fewer trips to the pharmacy for refills. And you're more likely to stay healthy because with a 90-day supply on-hand, you're less likely to miss a dose.⁴

Choose the pharmacy that's most convenient for you. Retail or home delivery.⁵

There are thousands of retail pharmacies in your plan's network. They include local pharmacies, grocery stores, retail chains and wholesale warehouse stores - all places where you may already shop. To find a retail pharmacy in your plan's network that's approved to fill 90-day supplies, go to **Cigna.com/Rx90network**. You can also use home delivery, if your plan allows.⁵

Together, all the way.[®]



Maintenance medications

DRUG CLASS	MEDICATION NAME
ALLERGY/NASAL SPRAYS	azelastine
	Beconase AQ
	cromolyn
	Dymista
	flunisolide
	fluticasone
	ipratropium
	mometasone
	Nasonex
	olopatadine
	Omnaris
	Patanase
	QNASL
	Xhance
Zetonna	
ALZHEIMER'S DISEASE	Aricept
	donepezil
	donepezil ODT
	Exelon
	galantamine HBR
	galantamine ER
	memantine
	memantine ER
	Mestinon
	Namenda
	Namenda XR
	Namzaric
	pyridostigmine
	pyridostigmine ER
	Razadyne
	Razadyne ER
rivastigmine	
ANXIETY/DEPRESSION/BIPOLAR DISORDER	amitriptyline
	amoxapine
	Anafranil
	Aplenzin
	bupropion
	bupropion ER
	bupropion SR
	bupropion EL
	Celexa
	citalopram HBR
	clomipramine

DRUG CLASS	MEDICATION NAME
ANXIETY/DEPRESSION/BIPOLAR DISORDER (Continued)	Cymbalta
	desipramine
	desvenlafaxine ER
	doxepin
	Drizalma Sprinkle
	duloxetine
	Effexor XR
	Equetro
	escitalopram
	Fetzima
	fluoxetine
	fluoxetine DR
	fluvoxamine
	fluvoxamine ER
	Forfivo XL
	imipramine
	Lexapro
	lithium
	lithium ER
	Lithobid
	maprotiline
	mirtazapine
	nefazodone
	Norpramin
	nortriptyline
	Pamelor
	paroxetine
	paroxetine CR
	paroxetine ER
	Paxil
	Paxil CR
	perphenazine-amitriptyline
	Pexeva
Pristiq	
protriptyline	
Prozac	
Remeron	
Sarafem	
sertraline	
trazodone	
trimipramine	
Trintellix	
venlafaxine	

Maintenance medications

DRUG CLASS	MEDICATION NAME
ANXIETY/DEPRESSION/BIPOLAR DISORDER (Continued)	venlafaxine ER
	Viibryd
	Wellbutrin SR
	Wellbutrin XL
	Zoloft
ASTHMA/COPD/RESPIRATORY	Accolate
	Advair Diskus
	Advair HFA
	AirDuo RespiClick
	albuterol
	Alvesco
	Anoro Ellipta
	Arcapta Neohaler
	Arnuity Ellipta
	Asmanex
	Asmanex HFA
	Atrovent HFA
	Bevespi Aerosphere
	Breo Ellipta
	Brovana
	budesonide
	Budesonide-Formoterol
	Combivent Respimat
	Daliresp
	Duaklir Pressair
	Dulera
	Flovent
	Flovent HFA
	fluticasone-salmeterol
	Incruse Ellipta
	ipratropium
	ipratropium-albuterol
	Lonhala Magnair
	metaproterenol
	montelukast
	Perforomist
	Pulmicort
	QVAR RediHaler
	Seebri Neohaler
	Serevent Diskus
Singulair	
Spiriva	
Spiriva Respimat	

DRUG CLASS	MEDICATION NAME
ASTHMA/COPD/RESPIRATORY (Continued)	Stiolto Respimat
	Striverdi Respimat
	Symbicort
	terbutaline
	Tudorza Pressair
	Utibron Neohaler
	Wixela Inhub
	Yupelri
	zafirlukast
	zileuton er
Zyflo	
ATTENTION DEFICIT HYPERACTIVITY DISORDER	atomoxetine
	Strattera
BLOOD PRESSURE/HEART MEDICATIONS	Accupril
	Accuretic
	acebutolol
	Adalat CC
	aliskiren
	Altace
	amiodarone
	amlodipine
	amlodipine-benazepril
	amlodipine-olmesartan
	amlodipine-valsartan
	amlodipine-valsartan-HCTZ
	Atacand
	Atacand HCT
	atenolol
	atenolol-chlorthalidone
	Avalide
	Avapro
	Azor
	benazepril
	benazepril-HCTZ
	Benicar
	Benicar HCT
	Betapace
	Betapace AF
betaxolol	
Bidil	
bisoprolol	
bisoprolol-HCTZ	
Bystolic	

Maintenance medications

DRUG CLASS	MEDICATION NAME
BLOOD PRESSURE/HEART MEDICATIONS (Continued)	Calan SR
	candesartan
	candesartan-HCTZ
	captopril
	captopril-HCTZ
	Cardizem
	Cardizem CD
	Cardizem LA
	Cardura
	Cardura XL
	cartia XT
	carvedilol
	carvedilol ER
	Coreg
	Coreg CR
	Corgard
	Corlanor
	Cozaar
	Demser
	Dilatrate-SR
	diltiazem tablet
	diltiazem 12HR ER
	diltiazem 24HR ER
	diltiazem 24HR ER (CD)
	diltiazem 24HR ER (LA)
	diltiazem 24HR ER (XL)
	Dilt-XR
	Diovan
	Diovan HCT
	disopyramide
	dofetilide
	doxazosin
	Dutoprol
	Edarbi
	Edarbyclor
	enalapril
	enalapril-HCTZ
	Entresto
	Epaned
	eprosartan
	Exforge
	Exforge HCT
	felodipine ER

DRUG CLASS	MEDICATION NAME
BLOOD PRESSURE/HEART MEDICATIONS (Continued)	flecainide
	fosinopril
	fosinopril-HCTZ
	guanfacine
	hydralazine
	Hyzaar
	Inderal LA
	Inderal XL
	Innopran XL
	irbesartan
	irbesartan-HCTZ
	Isordil
	Isordil Titradose
	isosorbide dinitrate
	isosorbide dinitrate ER
	isosorbide mononitrate
	isosorbide mononitrate ER
	isradipine
	Kaspargo Sprinkle
	labetalol
	lisinopril
	lisinopril-HCTZ
	Lopressor
	Lopressor HCT
	losartan
	losartan-HCTZ
	Lotensin
	Lotensin HCT
	Lotrel
	matzim LA
	metoprolol tablet
	metoprolol-HCTZ
	metoprolol ER-HCTZ
	mexiletine
	Micardis
	Micardis HCT
	Minipress
	minitran
	moexipril
	Multaq
nadolol	
nicardipine	
nifedipine ER	

Maintenance medications

DRUG CLASS	MEDICATION NAME
BLOOD PRESSURE/HEART MEDICATIONS (Continued)	nisoldipine
	Nitro-Dur
	nitroglycerin capsule, tablet, patch
	Nitro-Time
	Norpace
	Norpace CR
	Norvasc
	olmesartan
	olmesartan-HCTZ
	olmesartan-amlodipine-HCTZ
	Pacerone
	perindopril
	pindolol
	prazosin
	Prinivil
	Procardia XL
	propafenone
	propafenone ER
	propranolol
	propranolol ER
	propranolol-HCTZ
	Qbrelis
	quinapril
	quinapril-HCTZ
	quinidine
	ramipril
	Ranexa
	ranolazine ER
	Rythmol SR
	sorine
	sotalol
	sotalol AF
	Sular
	Tarka
	taztia XT
	Tekturna
	Tekturna HCT
	telmisartan
	telmisartan-HCTZ
	telmisartan-amlodipine
	Tenoretic
	Tenormin
	terazosin

DRUG CLASS	MEDICATION NAME
BLOOD PRESSURE/HEART MEDICATIONS (Continued)	Tiadylt ER
	Tiazac
	Tikosyn
	timolol
	Toprol XL
	trandolapril
	trandolapril-verapamil ER
	Tribenzor
	Twynsta
	valsartan
	valsartan-HCTZ
	Vaseretic
	Vasotec
	verapamil
	verapamil SR
	verapamil ER
	verapamil ER PM
	Verelan
	Verelan PM
	Zestoretic
	Zestril
	Ziac
	BLOOD THINNERS/ANTI-CLOTTING
aspirin-dipyridamole ER	
aspirin-omeprazole	
Brilinta	
cilostazol	
clopidogrel	
Coumadin	
dipyridamole	
Durlaza	
Effient	
jantoven	
Plavix	
Pradaxa	
prasugrel	
warfarin	
Yosprala	
Zontivity	
CANCER	methotrexate
	Trexall
CHOLESTEROL MEDICATIONS	Altoprev
	amlodipine-atorvastatin

Brand name medications are capitalized and generic medications are lowercase.

Maintenance medications

DRUG CLASS	MEDICATION NAME
CHOLESTEROL MEDICATIONS (Continued)	Antara
	atorvastatin
	Caduet
	cholestyramine
	cholestyramine light
	colesevelam
	Colestid
	colestipol
	Crestor
	Ezallor Sprinkle
	ezetimibe
	ezetimibe-simvastatin
	fenofibrate
	fenofibric acid
	Fenoglide
	Fibricor
	Flolipid
	fluvastatin
	fluvastatin ER
	gemfibrozil
	Lescol XL
	Lipitor
	Lipofen
	Livalo
	Lopid
	lovastatin
	Lovaza
	niacin
	niacin ER
	niacor
	Niaspan
	omega-3 acid ethyl esters
	Pravachol
	pravastatin
	prevalite
	Questran
	Questran Light
	rosuvastatin
	simvastatin
	Tricor
Triglide	
Trilipix	
Vascepa	

DRUG CLASS	MEDICATION NAME
CHOLESTEROL MEDICATIONS (Continued)	Vytorin
	Welchol
	Zetia
	Zocor
	Zypitamag
CONTRACEPTION PRODUCTS	Afirmelle
	Altavera
	Alyacen
	Amethia
	Amethia Lo
	Amethyst
	Apri
	Aranelle
	Ashlyna
	Aubra
	Aubra EQ
	Aurovela
	Aurovela FE
	Aurovela 24 FE
	Aviane
	Ayuna
	Azurette
	Balcoltra
	Balziva
	Bekyree
	BeYaz
	Blisovi FE
	Blisovi 24 FE
	Briellyn
	Camila
	Camrese
	Camrese Lo
	Caziant
	Chateal
	Chateal EQ
	Cryselles
	Cyclafem
	Cyred
	Cyred EQ
	Dasetta
Daysee	
Deblitane	
desogestrel-ethinyl estradiol	

Maintenance medications

DRUG CLASS	MEDICATION NAME
CONTRACEPTION PRODUCTS (Continued)	drospirenone-ethinyl estradiol-levomefolate
	drospirenone-ethinyl estradiol
	Elinest
	Emoquette
	Enpresse
	Enskyce
	Errin
	Estartylla
	Estrostep FF
	ethynodiol-ethinyl estradiol
	Falmina
	Fayosim
	Femynor
	Generess FE
	Gianvi
	Hailey
	Hailey 24 FE
	Heather
	Incassia
	Introvale
	Isibloom
	Jasmiel
	Jencycla
	Jolessa
	Juleber
	Junel
	Junel FE
	Junel FE 24
	Kaitlib FE
	Kalliga
	Kariva
	Kelnor 1-35
	Kelnor 1-50
	Kurvelo
	Larin
	Larin FE
	Larin 24 FE
	Larissia
	Layolis FE
	Leena
	Lessina
	Levonest

DRUG CLASS	MEDICATION NAME
CONTRACEPTION PRODUCTS (Continued)	levonorgestrel-ethinyl estradiol
	levonorgestrel-ethinyl estradiol-ethinyl estradiol
	Levora-28
	Lillow
	Lo Loestrin FE
	Loestrin
	Loestrin FE
	Loryna
	Loseasonique
	Low-Ogestrel
	Lo-Zumandimine
	Lutera
	Lyza
	Marlissa
	Melodetta 24 FE
	Mibelas 24 FE
	Microgestin
	Microgestin FE
	Mili
	Minastrin 24 FE
	Mircette
	Mono-Linyah
	Natazia
	Necon
	Nikki
	Nora-BE
	norethindrone
	norethindrone-ethinyl estradiol
	norethindrone-ethinyl estradiol-iron
	norgestimate-ethinyl estradiol
	Norlyda
	Norlyroc
	Nortrel
Ocella	
Ogestrel	
Orsythia	
Ortho Micronor	
Ortho-Novum	
Philith	
Pimtrea	
Pirmella	

Maintenance medications

DRUG CLASS	MEDICATION NAME
CONTRACEPTION PRODUCTS (Continued)	Portia
	Previfem
	Quartette
	Reclipsen
	Rivelsa
	Safyral
	Seasonique
	Setlakin
	Sharobel
	Simliya
	Simpesse
	Slynd
	Sprintec
	Sronyx
	Syeda
	Tarina FE
	Tarina 24 FE
	Tarina FE 1-20 EQ
	Taytulla
	Tilia Fe
	Tri Femynor
	Tri-Estarylla
	Tri-Legest FE
	Tri-Linyah
	Tri-Lo-Estarylla
	Tri-Lo-Marzia
	Tri-Lo-Mili
	Tri-Lo-Sprintec
	Tri-Mili
	Tri-Previfem
	Tri-Sprintec
	Trivora-28
	Tri-Vylibra
	Tri-Vylibra Lo
	Tulana
	Tydemy
	Velivet
	Vienva
	Viorele
	Vyfemla
	Vylibra
	Wera
	Wymzya FE

DRUG CLASS	MEDICATION NAME
CONTRACEPTION PRODUCTS (Continued)	Xulane
	Yasmin 28
	Yaz
	Zarah
	Zovia 1-35e
	Zumandimine
DIABETES	acarbose
	Actoplus Met
	Actos
	Adlyxin
	Admelog
	Afrezza
	alogliptin
	alogliptin-metformin
	alogliptin-pioglitazone
	Amaryl
	Apidra
	Avandia
	Basaglar
	Bydureon
	Byetta
	Cycloset
	Duetact
	Farxiga
	Fiasp
	Fortamet
	glimepiride
	glipizide
	glipizide ER
	glipizide XL
	glipizide-metformin
	Glucophage
	Glucophage XR
	Glucotrol
	Glucotrol XL
	Glumetza
glyburide	
glyburide-metformin	
Glynase	
Glyset	
Glyxambi	
Humalog	
Humulin	

Maintenance medications

DRUG CLASS	MEDICATION NAME
DIABETES (Continued)	Insulin Lispro
	Invokamet
	Invokamet XR
	Invokana
	Janumet
	Janumet XR
	Januvia
	Jardiance
	Jentadueto
	Jentadueto XR
	Kazano
	Kombiglyze XR
	Lantus
	Levemir
	metformin
	metformin ER
	migliitol
	nateglinide
	Nesina
	Novolog
	Onglyza
	Oseni
	Ozempic
	pioglitazone
	pioglitazone-glimepiride
	pioglitazone-metformin
	Precose
	Qtern
	repaglinide
	Riomet
	Riomet ER
	Segluromet
	Starlix
	Steglatro
	Steglujan
	Symlinpen
	Synjardy
	Synjardy XR
	Toujeo
	Tradjenta
	Tresiba
	Trulicity
	Victoza
Xigduo XR	

DRUG CLASS	MEDICATION NAME
DIURETICS	acetazolamide
	acetazolamide ER
	Aldactazide
	Aldactone
	amiloride
	amiloride-HCTZ
	bumetanide
	Carospir
	chlorthalidone
	Diuril
	Dyazide
	Dyrenium
	Edecrin
	eplerenone
	ethacrynic acid
	furosemide
	hydrochlorothiazide
	indapamide
	Inspira
	Lasix
	Maxzide
	Maxzide-25 Mg
	methazolamide
	metolazone
	spironolactone
	spironolactone-HCTZ
	torseamide
triamterene	
triamterene-HCTZ	
EYE CONDITIONS	Alphagan P
	apraclonidine
	atropine
	Azopt
	betaxolol
	Betimol
	Betoptic S
	bimatoprost
	brimonidine
	carteolol
	Cequa
	Combigan
	Cosopt
Cosopt PF	

Maintenance medications

DRUG CLASS	MEDICATION NAME
EYE CONDITIONS (Continued)	Cyclogyl
	Cyclomydril
	cyclopentolate
	dorzolamide
	dorzolamide-timolol
	Homatropaire
	homatropine
	lopidine
	Isopto Atropine
	Isopto Carpine
	Istalol
	latanoprost
	levobunolol
	Lumigan
	Mydracyl
	Paremyd
	Phospholine Iodide
	pilocarpine
	Restasis
	Rhopressa
	Rocklatan
	Simbrinza
	timolol
	Timoptic
	Timoptic Ocudose
	Timoptic-XE
	Travatan Z
	tropicamide
	tropicamide-cyclopentolate-PE
	Trusopt
Vyzulta	
Xalatan	
Xelpros	
Xiidra	
Zioptan	
GASTROINTESTINAL/HEARTBURN	Aciphex
	Actigall
	Apriso
	Asacol HD
	Azulfidine
	balsalazide
	Carafate
cimetidine	

DRUG CLASS	MEDICATION NAME
GASTROINTESTINAL/HEARTBURN (Continued)	Colazal
	Creon
	Cytotec
	Delzicol
	Dexilant
	Dipentum
	esomeprazole
	famotidine
	lansoprazole
	Lialda
	mesalamine
	mesalamine DR
	misoprostol
	Nexium
	nizatidine
	omeprazole
	Pancreaze
	pantoprazole
	Pentasa
	pepcid
	Pertzye
	Prevacid
	Prilosec
Protonix	
rabeprazole	
ranitidine	
sucralfate	
sulfasalazine	
sulfasalazine DR	
Urso	
Urso Forte	
ursodiol	
Viokace	
Zantac	
Zegerid	
Zenpep	
HORMONAL AGENTS	Activella
	Alora
	amabelz
	Angeliq
	Armour Thyroid
	Aygestin
	cabergoline

Maintenance medications

DRUG CLASS	MEDICATION NAME
HORMONAL AGENTS (Continued)	Climara
	Climara Pro
	Combipatch
	Crinone
	Cytomel
	danazol
	Depo-Provera
	Divigel
	dotti
	Elestrin
	Estrace
	estradiol
	estradiol-norethindrone
	Estring
	Estrogel
	Euthyrox
	Evamist
	Femhrt
	Femring
	fyavolv
	jinteli
	Levo-T
	levothyroxine
	Levoxyl
	liothyronine
	Lopreeza
	medroxyprogesterone
	Menest
	Menostar
	methimazole
	Mimvey
	Minivelle
	Nature-Throid
	norethindrone
	norethindrone-ethinyl estradiol
	NP Thyroid
	Prefest
	Premarin
	Premphase
	Prempro
progesterone	
Prometrium	
propylthiouracil	

DRUG CLASS	MEDICATION NAME
HORMONAL AGENTS (Continued)	Provera
	Synthroid
	Tapazole
	thyroid
	Tirosint
	Tirosint-Sol
	Unithroid
	Vagifem
	Vivelle-Dot
	Westhroid
WP thyroid	
Yuvaferm	
NUTRITIONAL/DIETARY	calcitriol
	Drisdol
	Rocaltrol
	vitamin d2
OSTEOPOROSIS PRODUCTS	Actonel
	alendronate
	Atelvia
	Binosto
	Boniva
	calcitonin-salmon
	Evista
	Fosamax
	Fosamax Plus D
	ibandronate
	Miacalcin
	raloxifene
	risedronate
	risedronate DR
PAIN RELIEF AND INFLAMMATORY DISEASE	allopurinol
	diflunisal
	febuxostat
	Savella
	Uloric
	Zyloprim
PARKINSON'S DISEASE	amantadine
	Azilect
	benztropine
	bromocriptine
	carbidopa-levodopa
	carbidopa-levodopa ER
	Comtan

Maintenance medications

DRUG CLASS	MEDICATION NAME
PARKINSON'S DISEASE (Continued)	entacapone
	Gocovri
	Mirapex
	Mirapex ER
	Neupro
	Nourianz
	Osmolex ER
	Parlodel
	pramipexole
	pramipexole ER
	rasagiline
	Requip XL
	ropinirole
	ropinirole ER
	Rytary
	selegiline
	Sinemet
	Sinemet CR
	Stalevo
	Tasmar
tolcapone	
trihexyphenidyl	
Xadago	
Zelapar	
SEIZURE DISORDERS	Aptiom
	Banzel
	carbamazepine
	carbamazepine ER
	Carbatrol
	Celontin
	Depakene
	Depakote
	Depakote ER
	Depakote Sprinkle
	dilantin
	divalproex
	divalproex ER
	epitol
	ethosuximide
	felbamate
	Felbatol
	gabapentin

DRUG CLASS	MEDICATION NAME
SEIZURE DISORDERS (Continued)	Gabitril
	Keppra
	Keppra XR
	Lamictal
	Lamictal (blue, green, orange)
	Lamictal ODT
	Lamictal ODT (blue, green, orange)
	Lamictal XR
	Lamictal XR (blue, green, orange)
	lamotrigine
	lamotrigine (blue, green, orange)
	lamotrigine ER
	lamotrigine ODT
	levetiracetam
	levetiracetam ER
	Mysoline
	Neurontin
	oxcarbazepine
	Oxtellar XR
	Peganone
	Phenytek
	phenytoin tablet, suspension
	phenytoin ER
	primidone
	Qudexy XR
	roweepra
	roweepra XR
	Spritam
	subvenite
	subvenite (blue, green, orange)
	Tegretol
	Tegretol XR
	tiagabine
	Topamax
	topiramate
	topiramate ER
Trileptal	
Trokendi XR	
valproic acid	
Zarontin	
Zonegran	
zonisamide	

Maintenance medications

DRUG CLASS	MEDICATION NAME
URINARY TRACT CONDITIONS	alfuzosin ER
	Avodart
	cevimeline
	darifenacin ER
	Detrol
	Detrol LA
	Ditropan XL
	dutasteride
	dutasteride-tamsulosin
	Enablex
	Evoxac
	finasteride
	Flomax
	Gelnique
	guanidine
	Jalyn
	Myrbetriq
	oxybutynin
	oxybutynin ER
	Oxytrol
	pilocarpine
	Proscar
	Rapaflo
	Salagen
	silodosin
	solifenacin
	tamsulosin
	tolterodine
	tolterodine ER
	Toviaz
	trospium
	trospium ER
Uroxatral	
Vesicare	



1. You may be taking a medication that isn't actually available in a 90-day supply. Certain medications may only be packaged in lesser amounts. For example, three packages of oral contraceptives equal an 84-day supply. Even though it's not a "90-day supply," it's still considered a 90-day prescription.
2. State laws in **Texas** and **Louisiana** may require your plan to cover your medication at your current benefit level until your plan renews. This means that if your medication is taken off the drug list, is moved to a higher cost-share tier or needs approval from Cigna before your plan will cover it, these changes may not begin until your plan's renewal date. To find out if these state laws apply to your plan, please call Customer Service using the number on your Cigna ID card.
3. State law in **Illinois** may require your plan to cover your medications at your current benefit level until your plan renews. This means that if you currently have approval through a review process for your plan to cover your medication, the drug list change(s) listed here may not affect you until your plan renewal date. If you don't currently have approval through a coverage review process, you may continue to receive coverage at your current benefit level if your doctor requests it. To find out if this state law applies to your plan, please call Customer Service using the number on your Cigna ID card.
4. Internal Cigna analysis performed Jan 2019, utilizing 2018 Cigna national book of business average medication adherence (customer adherent > 80% PDC), 90-day supply vs. those who received a 30-day supply taking antidiabetics, RAS antagonist and statins.
5. Not all plans offer home delivery as a covered pharmacy option. Please log in to the myCigna app or website, or check your plan materials, to learn more about the pharmacies in your plan's network.

Cigna reserves the right to make changes to the Drug List without notice. Your plan may cover additional medications; please refer to your enrollment materials for details. Cigna does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna may receive payments from manufacturers of certain preferred brand medications, and in limited instances, certain non-preferred brand medications, that may or may not be shared with your plan depending on its arrangement with Cigna. Depending upon plan design, market conditions, the extent to which manufacturer payments are shared with your plan and other factors as of the date of service, the preferred brand medication may or may not represent the lowest-cost brand medication within its class for you and/or your plan.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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DISCRIMINATION IS AGAINST THE LAW

Medical coverage

Cigna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Cigna does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Cigna:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact customer service at the toll-free number shown on your ID card, and ask a Customer Service Associate for assistance.

If you believe that Cigna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by sending an email to ACAGrievance@Cigna.com or by writing to the following address:

Cigna
Nondiscrimination Complaint Coordinator
PO Box 188016
Chattanooga, TN 37422

If you need assistance filing a written grievance, please call the number on the back of your ID card or send an email to ACAGrievance@Cigna.com. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, DC 20201
1.800.368.1019, 800.537.7697 (TDD)
Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>.



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Proficiency of Language Assistance Services

English – ATTENTION: Language assistance services, free of charge, are available to you. For current Cigna customers, call the number on the back of your ID card. Otherwise, call 1.800.244.6224 (TTY: Dial 711).

Spanish – ATENCIÓN: Hay servicios de asistencia de idiomas, sin cargo, a su disposición. Si es un cliente actual de Cigna, llame al número que figura en el reverso de su tarjeta de identificación. Si no lo es, llame al 1.800.244.6224 (los usuarios de TTY deben llamar al 711).

Chinese – 注意：我們可為您免費提供語言協助服務。對於 Cigna 的現有客戶，請致電您的 ID 卡背面的號碼。其他客戶請致電 1.800.244.6224（聽障專線：請撥 711）。

Vietnamese – XIN LỜI Ý: Quý vị được cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Dành cho khách hàng hiện tại của Cigna, vui lòng gọi số ở mặt sau thẻ Hội viên. Các trường hợp khác xin gọi số 1.800.244.6224 (TTY: Quay số 711).

Korean – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 현재 Cigna 가입자님들께서는 ID 카드 뒷면에 있는 전화번호로 연락해주시십시오. 기타 다른 경우에는 1.800.244.6224 (TTY: 다이얼 711)번으로 전화해주시십시오.

Tagalog – PAUNAWA: Makakakuha ka ng mga serbisyo sa tulong sa wika nang libre. Para sa mga kasalukuyang customer ng Cigna, tawagan ang numero sa likuran ng iyong ID card. O kaya, tumawag sa 1.800.244.6224 (TTY: I-dial ang 711).

Russian – ВНИМАНИЕ: вам могут предоставить бесплатные услуги перевода. Если вы уже участвуете в плане Cigna, позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки участника плана. Если вы не являетесь участником одного из наших планов, позвоните по номеру 1.800.244.6224 (TTY: 711).

Arabic – برجاء الانتباه خدمات الترجمة المجانية متاحة لكم. لعملاء Cigna الحاليين برجاء الاتصال بالرقم المدون علي ظهر بطاقتكم الشخصية. او اتصل ب 1.800.244.6224 (TTY: اتصل ب 711).

French Creole – ATANSYON: Gen sèvis èd nan lang ki disponib gratis pou ou. Pou kliyan Cigna yo, rele nimewo ki dèyè kat ID ou. Sinon, rele nimewo 1.800.244.6224 (TTY: Rele 711).

French – ATTENTION: Des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes un client actuel de Cigna, veuillez appeler le numéro indiqué au verso de votre carte d'identité. Sinon, veuillez appeler le numéro 1.800.244.6224 (ATS : composez le numéro 711).

Portuguese – ATENÇÃO: Tem ao seu dispor serviços de assistência linguística, totalmente gratuitos. Para clientes Cigna atuais, ligue para o número que se encontra no verso do seu cartão de identificação. Caso contrário, ligue para 1.800.244.6224 (Dispositivos TTY: marque 711).

Polish – UWAGA: w celu skorzystania z dostępnej, bezpłatnej pomocy językowej, obecni klienci firmy Cigna mogą dzwonić pod numer podany na odwrocie karty identyfikacyjnej. Wszystkie inne osoby prosimy o skorzystanie z numeru 1 800 244 6224 (TTY: wybierz 711).

Japanese – 注意事項: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。現在のCignaのお客様は、IDカード裏面の電話番号まで、お電話にてご連絡ください。その他の方は、1.800.244.6224 (TTY: 711)まで、お電話にてご連絡ください。

Italian – ATTENZIONE: Sono disponibili servizi di assistenza linguistica gratuiti. Per i clienti Cigna attuali, chiamare il numero sul retro della tessera di identificazione. In caso contrario, chiamare il numero 1.800.244.6224 (utenti TTY: chiamare il numero 711).

German – ACHTUNG: Die Leistungen der Sprachunterstützung stehen Ihnen kostenlos zur Verfügung. Wenn Sie gegenwärtiger Cigna-Kunde sind, rufen Sie bitte die Nummer auf der Rückseite Ihrer Krankenversicherungskarte an. Andernfalls rufen Sie 1.800.244.6224 an (TTY: Wählen Sie 711).

Persian (Farsi) – توجه: خدمات کمک زبانی، به صورت رایگان به شما ارائه می‌شود. برای مشتریان فعلی Cigna، لطفاً با شماره‌ای که در پشت کارت شناسایی شماست تماس بگیرید. در غیر اینصورت با شماره 1.800.244.6224 تماس بگیرید (شماره تلفن ویژه ناشنوايان: شماره 711 را شماره‌گیری کنید).