



MASSACHUSETTS

Blue MedicareRxSM (PDP)

We've got you covered

Our most commonly covered drugs

Below is a list of the most common brand-name and generic drugs covered in the Blue MedicareRxSM (PDP) plans.

For a more comprehensive Blue MedicareRx drug list by plan, please visit our website at **www.RxMedicarePlans.com**. If you prefer a copy of the drug listing, or need assistance locating a specific drug, please call **1-800-678-2265**, 8:00 a.m. to 8:00 p.m. EST, 7 days a week. TTY/TDD users call **1-800-522-1254**.

<i>acetaminophen-codeine</i>	<i>citalopram hbr</i>	<i>furosemide</i>
ADVAIR DISKUS	<i>clindamycin hcl</i>	<i>gabapentin</i>
<i>alendronate sodium</i>	<i>clobetasol propionate</i>	<i>glimepiride</i>
<i>allopurinol</i>	<i>clonazepam</i>	<i>glipizide</i>
<i>alprazolam</i>	<i>clopidogrel</i>	<i>hydrochlorothiazide</i>
<i>amlodipine besylate</i>	CRESTOR	<i>hydrocodone-acetaminophen</i>
<i>amox tr-potassium clavulanate</i>	<i>diltiazem 24hr er</i>	<i>ibuprofen</i>
<i>amoxicillin</i>	<i>donepezil hcl</i>	<i>isosorbide mononitrate er</i>
<i>atenolol</i>	<i>doxazosin mesylate</i>	<i>ketoconazole</i>
<i>atorvastatin calcium</i>	<i>doxycycline hyclate</i>	<i>klor-con m20</i>
<i>azithromycin</i>	<i>duloxetine hcl</i>	LANTUS SOLOSTAR
BD ULTRA-FINE PEN NEEDLE	<i>erythromycin</i>	<i>latanoprost</i>
<i>carvedilol</i>	<i>escitalopram oxalate</i>	<i>levofloxacin</i>
<i>celecoxib</i>	<i>fenofibrate</i>	<i>levothyroxine sodium</i>
<i>cephalexin</i>	<i>finasteride</i>	<i>lisinopril</i>
<i>chlorhexidine gluconate</i>	FLOVENT HFA	<i>lisinopril-hydrochlorothiazide</i>
<i>ciprofloxacin hcl</i>	<i>fluoxetine hcl</i>	<i>lorazepam</i>
	<i>fluticasone propionate</i>	<i>losartan potassium</i>

➞ Please see the back of this page for more Blue MedicareRx covered drugs.

<i>losartan-hydrochlorothiazide</i>	<i>omeprazole</i>	TAMIFLU
<i>lovastatin</i>	<i>oxybutynin chloride er</i>	<i>tamsulosin hcl</i>
<i>meclizine hcl</i>	<i>oxycodone hcl</i>	<i>timolol maleate</i>
<i>meloxicam</i>	<i>oxycodone-acetaminophen</i>	<i>tramadol hcl</i>
<i>metformin hcl</i>	<i>pantoprazole sodium</i>	<i>trazodone hcl</i>
<i>metformin hcl er</i>	<i>paroxetine hcl</i>	<i>triamcinolone acetonide</i>
<i>methylprednisolone</i>	<i>potassium chloride</i>	<i>triamterene-hydrochlorothiazide</i>
<i>metoprolol succinate</i>	<i>pravastatin sodium</i>	<i>valacyclovir</i>
<i>metoprolol tartrate</i>	<i>prednisolone acetate</i>	<i>valsartan</i>
<i>mirtazapine</i>	<i>prednisone</i>	<i>valsartan-hydrochlorothiazide</i>
<i>montelukast sodium</i>	<i>ranitidine hcl</i>	<i>venlafaxine hcl er</i>
<i>mupirocin</i>	<i>sertraline hcl</i>	<i>warfarin sodium</i>
<i>naproxen</i>	<i>simvastatin</i>	XARELTO
<i>nitrofurantoin mono-macro</i>	<i>spironolactone</i>	ZETIA
NITROSTAT	<i>sulfamethoxazole-trimethoprim</i>	<i>zolpidem tartrate</i>
<i>ofloxacin</i>	SYNTHROID	

- Drugs listed in all CAPS identify brand-name drugs (e.g. SYNTHROID).
- Drugs listed in lowercase *italics* identify generic drugs (e.g. *azithromycin*).

Blue MedicareRx plans include most eligible Medicare Part D generic drugs.

This is not a complete list of drugs covered by our plan. For a complete listing, please call **1-800-678-2265**, 8:00 a.m. to 8:00 p.m. EST, 7 days a week. TTY/TDD users call **1-800-522-1254**, or visit **www.RxMedicarePlans.com**. The comprehensive formulary may be amended at any time throughout the plan year. We will provide notice in advance to affected members of any formulary changes.

The formulary may change at any time. You will receive notice when necessary.

Effective as of January 1, 2016

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