



MASSACHUSETTS

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 group plan, please visit our website at **Groups.RxMedicarePlans.com**. If you prefer a copy of the drug listing, or need assistance locating a specific drug, please call **1-800-678-2265**, February 15 through September 30, 8:00 a.m. to 8:00 p.m. ET, Monday through Friday, and October 1 through February 14, 8:00 a.m. to 8:00 p.m. ET, seven days a week. TTY/TDD users call **711**.

acetaminophen/codeine

ADVAIR DISKUS

alendronate sodium

allopurinol

alprazolam

amlodipine besylate

amos levothyroxine sodium

amoxicillin

amoxicillin/clavulanate p

atenolol

atorvastatin calcium

azithromycin

carvedilol

celecoxib

cephalexin

chlorhexidine gluconate

ciprofloxacin hcl

citalopram hydrobromide

clindamycin hcl

clonazepam

clopidogrel

diltiazem hcl er

donepezil hcl

doxycycline hyclate

duloxetine hcl

ELIQUIS

erythromycin

escitalopram oxalate

ezetimibe

finasteride

FLOVENT HFA

fluconazole

fluoxetine hcl

fluticasone propionate

furosemide

gabapentin

glimepiride

glipizide

hydrochlorothiazide

hydrocodone/acetaminophen

ibuprofen

isosorbide mononitrate er

jantoven

ketoconazole

latanoprost

levofloxacin

levothyroxine sodium

lisinopril

lisinopril/hydrochlorothi

lorazepam

losartan potassium

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

<i>losartan potassium/hydroc</i>	<i>omeprazole</i>	SYMBICORT
<i>lovastatin</i>	<i>oseltamivir phosphate</i>	SYNTHROID
<i>meclizine hcl</i>	<i>oxybutynin chloride er</i>	<i>tamsulosin hcl</i>
<i>meloxicam</i>	<i>oxycodone hcl</i>	<i>timolol maleate</i>
<i>metformin hcl</i>	<i>oxycodone/acetaminophen</i>	<i>tramadol hcl</i>
<i>metformin hcl er</i>	<i>pantoprazole sodium</i>	<i>trazodone hcl</i>
<i>methylprednisolone dose p</i>	<i>paroxetine hcl</i>	<i>triamcinolone acetonide</i>
<i>metoprolol succinate er</i>	<i>potassium chloride er</i>	<i>triamterene/hydrochloroth</i>
<i>metoprolol tartrate</i>	<i>pravastatin sodium</i>	<i>valacyclovir hcl</i>
<i>metronidazole</i>	<i>prednisolone acetate</i>	<i>valsartan</i>
<i>mirtazapine</i>	<i>prednisone</i>	<i>venlafaxine hcl er</i>
<i>montelukast sodium</i>	<i>ranitidine hcl</i>	VENTOLIN HFA
<i>mupirocin</i>	<i>rosuvastatin calcium</i>	<i>warfarin sodium</i>
<i>nitrofurantoin monohydrat</i>	<i>sertraline hcl</i>	XARELTO
<i>nitroglycerin</i>	<i>simvastatin</i>	<i>zolpidem tartrate</i>
<i>nystatin</i>	<i>spironolactone</i>	
<i>ofloxacin</i>	<i>sulfamethoxazole/trimetho</i>	

- 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**, February 15 through September 30, 8:00 a.m. to 8:00 p.m. ET, Monday through Friday, and October 1 through February 14, 8:00 a.m. to 8:00 p.m. ET, seven days a week. TTY/TDD users call **711**, or visit **Groups.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, 2018

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