

Effective January 1, 2024

The Enhanced Zero Doller Drug List includes drugs on our Value Formulary offered at no cost share.

This list is not a complete list and does not contain any prior authorization, step therapy or quantity level limit requirements. Refer to your respective formulary for a complete list of drugs at CapitalBlueCross.com/formulary.

alendronate sodium	enalapril maleate/hctz	nortriptyline hcl
aliskiren	escitalopram oxalate	olanzapine
amitriptyline hcl	fluoxetine hcl	olmesartan medoxomil
amlodipine besylate/benazepril hcl	fluphenazine hcl	paliperidone er
amlodipine besylate/valsartan	fluvoxamine maleate	paroxetine hcl
aripiprazole	fosinopril sodium	perphenazine
atorvastatin calcium	glimepiride	pioglitazone hcl
azasan	glipizide	protriptyline hcl
azathioprine	glipizide er	quetiapine fumarate
benazepril hcl	glyburide	quetiapine fumarate er
benazepril hcl/hctz	haloperidol	quinapril hcl
bupropion hcl	ibandronate sodium	ramipril
bupropion hcl er (sr)	imipramine hcl	risperidone
bupropion hcl er (xl)	irbesartan	sertraline hcl
calcitonin-salmon	irbesartan/hctz	simvastatin
captopril	lisinopril	sulfasalazine
chlorpromazine hcl	lisinopril/hctz	thiothixene
citalopram	lithium carbonate	trazodone hcl
clomipramine hcl	Iosartan potassium	trifluoperazine hcl
clozapine	losartan potassium/hctz	valsartan
desipramine hcl	loxapine	valsartan/hctz
desvenlafaxine er	metformin hcl	venlafaxine hcl
doxepin hcl	metformin hcl er	venlafaxine hcl er
duloxetine hcl	mirtazapine	ziprasidone hcl
enalapril maleate	nateglinide	nortriptyline hcl

Important notice for fully insured individual and employer group plans in Pennsylvania: Advertised health insurance policies or programs may not cover all your healthcare expenses. Read your contract or benefit booklet (certificate of coverage) carefully to determine which healthcare services are covered. Questions? Please call 800.962.2242 or the number on the back of your ID card (TTY: 711).

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