

Help your Medicare patients save money with \$0 generics



Highmark offers one of the most comprehensive drug formularies in the market. This includes several Preferred Generic medications which are the lowest cost medications offered. By prescribing a Preferred Generic, your patients will receive quality medications with minimal out-of-pocket expenses which can lead to better adherence and overall health.

During the Initial Coverage Phase, Preferred Generics can be as low as a **\$0 copay when filled at a Preferred Pharmacy** for members with the Preferred Pharmacy benefit. **Express Scripts Mail Order**, major chains such as **Giant Eagle, CVS, Costco, Walmart, Sam’s Club, Target, Giant Pharmacy, Weis, Fruth, Martin’s Pharmacy, Allegheny Health Network Pharmacies, Shoprite, Kroger** and a number of independent pharmacies are included in the Preferred Pharmacy Network.

The following medications are in the Preferred Generics tier across all Highmark Medicare Formularies. Additional medications may be available on the Preferred Generics tier depending on the member’s individual formulary. To locate a Preferred Pharmacy or view individual formularies, please refer to www.highmarkblueshield.com/medicare for more information.

CHOLESTEROL	DIABETES	HYPERTENSION	
Atorvastatin	Glimepiride	Amlodipine-Benazepril	Lisinopril
Lovastatin	Glipizide	Benazepril	Lisinopril-Hctz
Pravastatin	Glipizide Er	Benazepril-Hctz	Losartan
Simvastatin	Glipizide-Metformin	Candesartan	Losartan-Hctz
	Metformin	Candesartan-Hctz	Moexipril
	Metformin Er (generic Glucophage Xr)	Captopril	Perindopril
	Nateglinide	Captopril-Hctz	Quinapril
	Pioglitazone	Enalapril	Quinapril-Hctz
		Enalapril-Hctz	Ramipril
		Fosinopril	Trandolapril
		Fosinopril-Hctz	Valsartan (40mg, 80mg, 160mg)
		Irbesartan	



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The Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarjeta de identificación (TTY: 711).

请注意：如果您说中文，可向您提供免费语言协助服务。请拨打您的身份证背面的号码（TTY：711）。