



**BlueCross  
BlueShield**

Federal Employee Program.

## 2023 Generic Incentive Program List

Your cost-share may be waived for the first four generic prescriptions fills or refills if you purchase a brand name drug on the Generic Incentive Program List and then change to a qualifying corresponding generic drug while still a member of the Plan.

Discuss with your healthcare provider to see if there's an alternative generic drug that can appropriately treat your condition.

Brand Name Drugs	Generic Drugs
CELEBREX	celecoxib capsules
BANZEL	rufinamide tablets/suspension
DEPAKOTE, DEPAKOTE ER, DEPAKOTE SPRINKLES	divalproex tablets del-rel, divalproex tablets ext-rel, divalproex sprinkles
DILANTIN, DILANTIN-125, PHENYTEK	phenytoin
KEPPRA, KEPPRA XR	levetiracetam, levetiracetam ext-rel
LAMICTAL, LAMICTAL XR	lamotrigine, lamotrigine ext-rel
NEURONTIN	gabapentin (generic)
TEGRETOL, TEGRETOL XR, CARBATROL	carbamazepine, carbamazepine ext-rel
TOPAMAX, QUDEXY XR	topiramate, topiramate ext-rel, topiramate sprinkles
TRILEPTAL	oxcarbazepine tablets/suspension
ABILIFY	aripiprazole tablets/solution
CLOZARIL	clozapine tablets
GEODON	ziprasidone
INVEGA TABLETS	paliperidone ext-rel tablets

Please consult your plan for further information. This information relates to prescription benefit plan coverage only and is not medical advice. Talk to your doctor or health care provider about this information. CVS Caremark® and the Blue Cross and Blue Shield Service Benefit Plan assume no liability whatsoever for treatment decisions made as a result of this information. This document contains references to brand name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark® or the Blue Cross and Blue Shield Service Benefit Plan. These listings do not imply or constitute an endorsement, sponsorship or recommendation by CVS Caremark or the Service Benefit Plan. Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.



**BlueCross  
BlueShield**

Federal Employee Program.

Brand Name Drugs	Generic Drugs
LITHOBID	lithium carbonate ext-rel tablets 300 mg
PAMELOR	nortriptyline capsules/solution
RISPERDAL	risperidone tablets/ orally disintegrating tablets/solution
SAPHRIS	asenapine tablets SL
SEROQUEL, SEROQUEL XR	quetiapine, quetiapine ext-rel
WELLBUTRIN SR	bupropion tablets SR
ZYPREXA, ZYPREXA ZYDIS	olanzapine
CELEXA, LEXAPRO, PROZAC, PAXIL, PAXIL CR, ZOLOFT	citalopram tablets/solution, escitalopram tablets/solution, fluoxetine, paroxetine hcl, paroxetine hcl ext-rel, sertraline tablets/solution
PRISTIQ, CYMBALTA, EFFEXOR XR	desvenlafaxine succ ext-rel tablets, duloxetine capsules, venlafaxine ext-rel capsules
AVODART, FLOMAX, JALYN, PROSCAR, RAPAFLO	dutasteride capsules, dutasteride-tamsulosin capsules, finasteride tablets, silodosin capsules, tamsulosin capsules
IMITREX TABLETS, MAXALT TABLETS, MAXALT-MLT TABLETS, RELPAX TABLETS, ZOMIG TABLETS, ZOMIG ZMT TABLETS	eletriptan tablets, rizatriptan tablets, rizatriptan orally disintegrating tablets, sumatriptan tablets, zolmitriptan tablets, zolmitriptan orally disintegrating tablets
MAXITROL	neomycin/polymyxin B/dexamethasone ophthalmic suspension/ointment
ISTALOL, TIMOPTIC, TIMOPTIC-XE	timolol maleate ophthalmic solution

Please consult your plan for further information. This information relates to prescription benefit plan coverage only and is not medical advice. Talk to your doctor or health care provider about this information. CVS Caremark® and the Blue Cross and Blue Shield Service Benefit Plan assume no liability whatsoever for treatment decisions made as a result of this information. This document contains references to brand name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark® or the Blue Cross and Blue Shield Service Benefit Plan. These listings do not imply or constitute an endorsement, sponsorship or recommendation by CVS Caremark or the Service Benefit Plan. Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.

TTY/TDD: 1-800-624-5077



**BlueCross.  
BlueShield.**

Federal Employee Program.

Brand Name Drugs	Generic Drugs
AZOPT, TRUSOPT	brinzolamide ophthalmic, dorzolamide ophthalmic
TRAVATAN Z, XALATAN	latanoprost ophthalmic solution 0.005%, travoprost ophthalmic solution
ACULAR	ketorolac ophthalmic solution 0.5%
PLAVIX	clopidogrel tablets
AMBIEN, AMBIEN CR, LUNESTA, ROZEREM	eszopiclone tablets, ramelteon tablets, zaleplon capsules, zolpidem tablets, zolpidem tablets ext-rel

Please consult your plan for further information. This information relates to prescription benefit plan coverage only and is not medical advice. Talk to your doctor or health care provider about this information. CVS Caremark® and the Blue Cross and Blue Shield Service Benefit Plan assume no liability whatsoever for treatment decisions made as a result of this information. This document contains references to brand name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark® or the Blue Cross and Blue Shield Service Benefit Plan. These listings do not imply or constitute an endorsement, sponsorship or recommendation by CVS Caremark or the Service Benefit Plan. Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.

TTY/TDD: 1-800-624-5077