

HSA SPECIAL MAINTENANCE DRUG LIST 2026

Certain prescription drugs are covered on high deductible health plans under a special maintenance benefit. This particular maintenance benefit designates limited prescription drugs in specific categories to be covered before you meet your deductible or out-of-pocket expenses.

The drugs listed below are grouped into medication categories. Each category includes an alphabetical list of drugs. Please verify with your plan if the generic version of a drug must be tried before filling the brand version.

ANTIDEPRESSANT MEDICATIONS

- › Citalopram Hydrobromide
- › Escitalopram Oxalate
- › FLUoxetine HCl
- › Fluvoxamine Maleate
- › PARoxetine HCl
- › PARoxetine HCl ER
- › Sertraline HCl

BLOOD GLUCOSE METER

- › FreeStyle Freedom
- › FreeStyle Lite
- › FreeStyle Sidekick II
- › FreeStyle System
- › OneTouch Ultra
- › OneTouch Verio

BONE MEDICATIONS

- › Alendronate Sodium
- › Ibandronate Sodium
- › Raloxifene HCl
- › Risedronate Sodium

CARDIOVASCULAR MEDICATIONS

- › Atenolol
- › Benazepril HCl
- › Bisoprolol Fumarate
- › Captopril
- › Carvedilol
- › Carvedilol Phosphate ER
- › Enalapril Maleate
- › Fosinopril Sodium
- › Lisinopril
- › Metoprolol Succinate ER
- › Metoprolol Tartrate
- › Moexipril HCl
- › Nadolol
- › Perindopril Erbumine
- › Propranolol HCl
- › Propranolol HCl ER
- › Qbrelis
- › Quinapril HCl
- › Ramipril
- › Sorine
- › Sotalol HCl
- › Sotalol HCl (AF)
- › Timolol Maleate
- › Trandolapril

CHOLESTEROL MEDICATIONS

- › Atorvastatin Calcium
- › Rosuvastatin Calcium
- › Simvastatin

CONTINUOUS GLUCOSE MONITOR

- › Dexcom Receiver
- › Dexcom Sensor
- › Dexcom Transmitter
- › FreeStyle Libre Reader
- › FreeStyle Libre Sensor

DIABETIC MEDICATIONS

- › Basaglar KwikPen
- › Glimepiride
- › Glipizide
- › Glipizide ER
- › Glipizide XL
- › Glipizide-MetFORMIN HCl
- › GlyBURIDE
- › GlyBURIDE Micronized
- › GlyBURIDE-MetFORMIN
- › HumaLOG
- › HumaLOG Junior KwikPen
- › HumaLOG KwikPen
- › HumaLOG Mix 50/50
- › HumaLOG Mix 50/50 KwikPen
- › HumaLOG Mix 75/25
- › HumaLOG Mix 75/25 KwikPen
- › Humulin 70/30
- › Humulin 70/30 KwikPen
- › Humulin N
- › Humulin N KwikPen
- › Humulin R
- › Humulin R U-500 (CONCENTRATED)
- › Humulin R U-500 KwikPen
- › Insulin Lispro
- › Insulin Lispro (1 Unit Dial)
- › Insulin Lispro Junior KwikPen
- › Insulin Lispro Prot & Lispro
- › MetFORMIN HCl
- › MetFORMIN HCl ER
- › Nateglinide
- › Pioglitazone HCl
- › Pioglitazone HCl-Metformin HCl
- › Repaglinide
- › Rezvoglar

DIABETIC SUPPLIES

- › Insulin Pen Needle
- › Insulin Syringe/Needle U-100
- › Lancets Misc.

DIABETIC TEST STRIPS

- › FreeStyle InuLinx Test
- › FreeStyle Lite Test
- › FreeStyle Test
- › OneTouch Ultra
- › OneTouch Verio

RESPIRATORY MEDICATIONS

- › Arnuity Ellipta
- › Budesonide
- › Qvar RediHaler

Please refer to your benefit materials for coverage details and the plan website for current information, as this publication is subject to change.

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