

# Same low copay. Every time.

Pay the same copay for certain medications – every time you fill them.

With the Copay Assurance plan™, certain medications have a low, set copay – which you'll pay every time you fill your prescription at an in-network pharmacy.

## About this drug list

This is a list of Tier I generic specialty medications that have a low, set copay as of January 1, 2024.

- Medications are **listed alphabetically** by the complex medical condition they treat
- This drug list is **updated often**, so it isn't a full list of the generic specialty medications available at a set cost-share
- **There are other medications available at a low, set copay through the Copay Assurance plan;** however, those non-specialty generics, preferred brands, non-preferred brands and brand-name specialty medications are not listed here
- Log in to the **myCigna® App**<sup>1</sup> or **myCigna.com**<sup>®</sup> and use the Price a Medication tool to see how much your medication costs



**Pay the same low copay.  
Every time you fill.<sup>2</sup>**

**\$5** for all generic medications\*

**\$25** for preferred brand medications

**\$50** for non-preferred brand medications

**\$45** for brand-name specialty medications

\* Includes generic specialty medications

# Copay Assurance Plan Generic Specialty Drug List

## AIDS/HIV

abacavir  
abacavir-lamivudine  
abacavir-lamivudine-zidovudine  
atazanavir  
darunavir  
didanosine  
efavirenz  
efavirenz-emtricitabine-tenofovir  
efavirenz-lamivudine-tenofovir  
emtricitabine  
emtricitabine-tenofovir  
etravirine  
fosamprenavir  
lamivudine  
lamivudine hbv  
lamivudine-zidovudine  
lopinavir-ritonavir  
maraviroc  
nevirapine  
nevirapine er  
ritonavir  
stavudine  
tenofovir  
zidovudine

## Asthma/COPD/Respiratory

alyq  
ambrisentan  
bosentan  
epoprostenol  
sildenafil  
tadalafil  
treprostinil  
veletri

## Blood Modifiers/ Bleeding Disorders

aminocaproic acid  
tranexamic acid  
tranexamic acid-nacl

## Blood Pressure/ Heart Medications

droxidopa  
icatibant  
sajazir

## Blood Thinners/Anti-Clotting

argatroban-0.9% nacl  
enoxaparin  
fondaparinux

## Cancer

abiraterone  
adriamycin  
adrucil  
arsenic trioxide  
azacitidine  
bendamustine  
bexarotene  
bleomycin  
bortezomib  
busulfan  
capecitabine  
carboplatin  
carmustine  
cisplatin  
cladribine  
clofarabine  
cyclophosphamide  
cytarabine  
dacarbazine  
dactinomycin  
daunorubicin  
decitabine  
dexrazoxane  
docetaxel  
doxorubicin  
doxorubicin liposome  
epirubicin  
erlotinib  
etoposide

everolimus  
floxuridine  
fludarabine  
flourouracil  
fulvestrant  
gefitinib  
gemcitabine  
idarubicin  
ifosfamide  
imatinib  
irinotecan  
kemoplat  
lapatinib  
lenalidomide  
leuprolide  
melphalan  
mesna  
mitomycin  
mitoxantrone  
nelarabine  
oxaliplatin  
paclitaxel  
paraplatin  
pazopanib  
pemetrexed  
plerixafor  
romidepsin  
sorafenib  
sunitinib  
temozolomide  
temsirolimus  
thiotepa  
toposar  
topotecan  
valrubicin  
vinblastine  
vincasar pfs  
vincristine  
vinorelbine

# Copay Assurance Plan Generic Specialty Drug List

## Diabetes

mifepristone

## Diuretics

tolvaptan

## Eye Conditions

biolon

## Gastrointestinal/Heartburn

alosetron

## Hormonal Agents

cetorelix

deflazacort

desmopressin

fyremadel

ganirelix acetate

octreotide

paricalcitol

progesterone

## Infections

adefovir

cidofovir

entecavir

ganciclovir

pyrimethamine

ribavirin

tobramycin

## Miscellaneous

carglumic acid

cinacalcet

clovique

deferasirox

deferiprone

deferiprone (3 times a day)

dichlorphenamide

javygtor

miglustat

nitisinone

pirfenidone

riluzole

sapropterin

sodium phenylbutyrate

tetrabenazine

trientine

yargesa

## Multiple Sclerosis

dalfampridine er

dimethyl fumarate

fingolimod

glatiramer

glatopa

teriflunomide

## Nutritional/Dietary

betaine anhydrous

## Osteoporosis Products

ibandronate

pamidronate

teriparatide

zoledronic acid

## Pain Relief and Inflammatory Disease

penicillamine

## Parkinson's Disease

apomorphine

## Seizure Disorders

vigabatrin

vigadrone

vigpoder

## Sleep Disorders/Sedatives

tasimelteon

## Transplant Medications

azathioprine

cyclosporine

cyclosporine modified

engraf

mycophenolate

mycophenolic acid

sirolimus

tacrolimus

## Urinary Tract Conditions

tiopronin



1. App/online store terms and mobile phone carrier/data charges apply. Customers under age 13 (and/or their parent/guardian) will not be able to register at myCigna.com.
2. This is only an example of costs under the Copay Assurance plan. Actual discounts will vary. Copays shown here are for a 30-day supply.

**Para obtener ayuda en español llame al número en su tarjeta de Cigna Healthcare.**

Cigna Healthcare reserves the right to make changes to this drug list without notice. Your plan may cover additional medications; please refer to your enrollment materials for details. Cigna Healthcare does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna Healthcare may receive payments from manufacturers of certain preferred brand medications, and in limited instances, certain non-preferred brand medications, that may or may not be shared with your plan depending on its arrangement with Cigna Healthcare. Depending upon plan design, market conditions, the extent to which manufacturer payments are shared with your plan and other factors as of the date of service, the preferred brand medication may or may not represent the lowest-cost brand medication within its class for you and/or your plan.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

Product availability may vary by location and plan type and is subject to change. All group health insurance policies and health benefit plans contain exclusions and limitations. For costs and details of coverage, review your plan documents or contact a Cigna Healthcare representative.

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# DISCRIMINATION IS AGAINST THE LAW

## Medical coverage

Cigna complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Cigna does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Cigna:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact customer service at the toll-free number shown on your ID card, and ask a Customer Service Associate for assistance.

If you believe that Cigna has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by sending an email to [ACAGrievance@Cigna.com](mailto:ACAGrievance@Cigna.com) or by writing to the following address:

Cigna  
Nondiscrimination Complaint Coordinator  
PO Box 188016  
Chattanooga, TN 37422

If you need assistance filing a written grievance, please call the number on the back of your ID card or send an email to [ACAGrievance@Cigna.com](mailto:ACAGrievance@Cigna.com). You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, DC 20201  
1.800.368.1019, 800.537.7697 (TDD)  
Complaint forms are available at  
<http://www.hhs.gov/ocr/office/file/index.html>.



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## Proficiency of Language Assistance Services

**English** – ATTENTION: Language assistance services, free of charge, are available to you. For current Cigna customers, call the number on the back of your ID card. Otherwise, call 1.800.244.6224 (TTY: Dial 711).

**Spanish** – ATENCIÓN: Hay servicios de asistencia de idiomas, sin cargo, a su disposición. Si es un cliente actual de Cigna, llame al número que figura en el reverso de su tarjeta de identificación. Si no lo es, llame al 1.800.244.6224 (los usuarios de TTY deben llamar al 711).

**Chinese** – 注意：我們可為您免費提供語言協助服務。對於 Cigna 的現有客戶，請致電您的 ID 卡背面的號碼。其他客戶請致電 1.800.244.6224（聽障專線：請撥 711）。

**Vietnamese** – XIN LỜI Ý: Quý vị được cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Dành cho khách hàng hiện tại của Cigna, vui lòng gọi số ở mặt sau thẻ Hội viên. Các trường hợp khác xin gọi số 1.800.244.6224 (TTY: Quay số 711).

**Korean** – 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 현재 Cigna 가입자님들께서는 ID 카드 뒷면에 있는 전화번호로 연락해주시십시오. 기타 다른 경우에는 1.800.244.6224 (TTY: 다이얼 711)번으로 전화해주시십시오.

**Tagalog** – PAUNAWA: Makakakuha ka ng mga serbisyo sa tulong sa wika nang libre. Para sa mga kasalukuyang customer ng Cigna, tawagan ang numero sa likuran ng iyong ID card. O kaya, tumawag sa 1.800.244.6224 (TTY: I-dial ang 711).

**Russian** – ВНИМАНИЕ: вам могут предоставить бесплатные услуги перевода. Если вы уже участвуете в плане Cigna, позвоните по номеру, указанному на обратной стороне вашей идентификационной карточки участника плана. Если вы не являетесь участником одного из наших планов, позвоните по номеру 1.800.244.6224 (TTY: 711).

**Arabic** – برجاء الانتباه خدمات الترجمة المجانية متاحة لكم. لعملاء Cigna الحاليين برجاء الاتصال بالرقم المدون علي ظهر بطاقتكم الشخصية. او اتصل ب 1.800.244.6224 (TTY: اتصل ب 711).

**French Creole** – ATANSYON: Gen sèvis èd nan lang ki disponib gratis pou ou. Pou kliyan Cigna yo, rele nimewo ki dèyè kat ID ou. Sinon, rele nimewo 1.800.244.6224 (TTY: Rele 711).

**French** – ATTENTION: Des services d'aide linguistique vous sont proposés gratuitement. Si vous êtes un client actuel de Cigna, veuillez appeler le numéro indiqué au verso de votre carte d'identité. Sinon, veuillez appeler le numéro 1.800.244.6224 (ATS : composez le numéro 711).

**Portuguese** – ATENÇÃO: Tem ao seu dispor serviços de assistência linguística, totalmente gratuitos. Para clientes Cigna atuais, ligue para o número que se encontra no verso do seu cartão de identificação. Caso contrário, ligue para 1.800.244.6224 (Dispositivos TTY: marque 711).

**Polish** – UWAGA: w celu skorzystania z dostępnej, bezpłatnej pomocy językowej, obecni klienci firmy Cigna mogą dzwonić pod numer podany na odwrocie karty identyfikacyjnej. Wszystkie inne osoby prosimy o skorzystanie z numeru 1 800 244 6224 (TTY: wybierz 711).

**Japanese** – 注意事項: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。現在のCignaのお客様は、IDカード裏面の電話番号まで、お電話にてご連絡ください。その他の方は、1.800.244.6224 (TTY: 711)まで、お電話にてご連絡ください。

**Italian** – ATTENZIONE: Sono disponibili servizi di assistenza linguistica gratuiti. Per i clienti Cigna attuali, chiamare il numero sul retro della tessera di identificazione. In caso contrario, chiamare il numero 1.800.244.6224 (utenti TTY: chiamare il numero 711).

**German** – ACHTUNG: Die Leistungen der Sprachunterstützung stehen Ihnen kostenlos zur Verfügung. Wenn Sie gegenwärtiger Cigna-Kunde sind, rufen Sie bitte die Nummer auf der Rückseite Ihrer Krankenversicherungskarte an. Andernfalls rufen Sie 1.800.244.6224 an (TTY: Wählen Sie 711).

**Persian (Farsi)** – توجه: خدمات کمک زبانی، به صورت رایگان به شما ارائه می‌شود. برای مشتریان فعلی Cigna، لطفاً با شماره‌ای که در پشت کارت شناسایی شماست تماس بگیرید. در غیر اینصورت با شماره 1.800.244.6224 (شماره تلفن ویژه ناشنوايان: شماره 711 را شماره‌گیری کنید).