

DeSiard Pharmacy Network (DPN) is pleased to be Vantage Health Plan's preferred retail pharmacy network. The Tier I generics listed below are available at any DPN participating pharmacy for a **\$0 copay**.

Medications on this list are subject to modification or discontinuation at any time without notice. Prior Authorization and Quantity Limits are applicable for some medications. This benefit is administered by DeSiard Pharmacy Network and is not available to all plans.

For questions about this benefit, please call Vantage's Member Services representatives at **1-888-823-1910**. Visit **www.VantageHealthPlan.com/DPN** for the most recent list of DPN participating pharmacies and other frequently asked questions about DPN benefits.

THIS LIST IS NOT COMPREHENSIVE. TO SEE A FULL LIST, VISIT VANTAGEHEALTHPLAN.COM/RX

acyclovir cap	enalapril tab
allopurinol tab	enalapril/hydrochlorothiazide tab
amiloride tab	escitalopram tab
amiloride/hydrochlorothiazide tab	estradiol tab
amitriptyline tab	estradiol/norethindrone tab
amlodipine tab	famotidine tab
atenolol tab	fenofibrate cap 67mg, 134mg, 200mg
atenolol/chlorthalidone tab	fenofibrate tab 48mg, 54mg, 145mg, 160mg
atorvastatin tab 10mg, 20mg, 40mg, 80mg	fluocinonide cream 0.1%
baclofen tab	fluoxetine cap 10mg, 20mg, 40mg
benazepril tab	fluphenazine tab
benztropine tab	FLURBIPROFEN TAB
bisoprolol/hydrochlorothiazide tab	furosemide tab
bupirone tab	glimepiride tab
candesartan tab	glipizide tab or ER tab
captopril tab	GLUCOCARD SHINE TEST STRIPS
CAPTOPRIL/HYDROCHLOROTHIAZIDE TAB	GLUCOCARD SHINE METER
carvedilol tab	glyburide micronized tab
cetirizine tab	glyburide tab
chlorothiazide tab	guanfacine IR tab
chlorpromazine tab	GUANIDINE TAB
cholecalciferol cap 50000 unit	haloperidol tab
cimetidine tab	hydrochlorothiazide cap or tab
citalopram tab	ibuprofen tab
clonidine tab	indapamide tab
diclofenac sodium EC tab	irbesartan tab
dicyclomine cap or tab	irbesartan/hydrochlorothiazide tab
digoxin tab	isosorbide dinitrate tab
doxazosin tab	isosorbide dinitrate/hydralazine tab

isosorbide mononitrate tab or ER tab
 lisinopril tab
 lisinopril/hydrochlorothiazide tab
 loratadine tab
 loratadine chew tab
 losartan tab
 losartan/hydrochlorothiazide tab
 lovastatin tab
 medroxyprogesterone tab
 meloxicam tab
 metformin tab or ER tab
 methoxsalen cap
 methyl dopa tab
 metoclopramide tab
 metoprolol ER tab 25mg, 50mg
 metoprolol tab
 MULTI-LANCET DEVICE 2
 MULTIVITAMIN/FLUORIDE CHEW TAB
 naproxen tab
 nitroglycerin SL tab
 nortriptyline cap
 omeprazole cap
 oxybutynin tab or ER tab
 paroxetine tab 10mg, 20mg, 30mg, 40mg
 pediatric multiple vitamins/fluoride chew tab
 pediatric multiple vitamins/fluoride/iron soln
 pilocarpine ophth soln
 pravastatin tab
 prednisone tab
 PRENATAL VITAMINS (PRENATAL PLUS,
 PREPLUS, PRENAPLUS)
 propranolol tab
 RIGHT STEP PRENATAL VITAMINS
 rosuvastatin tab 5mg, 10mg, 20mg, 40mg
 sertraline tab 25mg, 50mg, 100mg
 simvastatin tab
 sodium sulfacetamide gel
 sodium sulfacetamide/sulfur gel
 spironolactone tab
 SYNTHROID TAB
 TECHLITE LANCET 28G, 30G
 telmisartan tab
 terazosin cap
 thiothixene cap
 tizanidine tab
 trazodone tab 50mg, 100mg, 150mg
 triamcinolone cream, lotion, ointment
 triamterene/hydrochlorothiazide cap or tab
 TRI-VIT/FLOURIDE/IRON DROPS
 TRUPLUS LANCET
 valsartan tab 40mg, 80mg, 160mg
 verapamil SR cap or tab
 verapamil tab
 warfarin tab
 zonisamide cap


DESIARD PHARMACY NETWORK DIABETIC SUPPLIES PROGRAM:

\$0 Copay for GLUCOCARD Shine® blood glucose strips. Up to a 100-day supply from DPN pharmacies allowed with a valid prescription.

Free GLUCOCARD Shine® Meter from DPN Pharmacies available with a prescription for GLUCOCARD Shine® blood glucose strips. The free meter includes ten complementary strips, ten lancets, and a lancing device. Limited to one meter per member per year.

(Cost share applies to the Glucocard strips and meters at non-DPN pharmacies.)

CURRENT AS OF DECEMBER 1, 2022

THIS LIST IS NOT COMPREHENSIVE. TO SEE A FULL LIST, VISIT [VANTAGEHEALTHPLAN.COM/RX](https://www.vantagehealthplan.com/rx)