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Government of the District of Columbia  
Department of Insurance, Securities and Banking

# 2022 RX GUIDE

## CONGESTIVE HEART FAILURE

If you or a family member covered under your health plan has heart failure, or is at risk of developing heart failure, knowing the cost of medications can help you make a more informed decision when selecting a plan.

This guide developed by the District of Columbia Department of Insurance, Securities and Banking provides an overview of several commonly prescribed drugs used to treat congestive heart failure. For each insurance company offering plans for sale on DC Health Link, the chart on the next page depicts the name of each drug along with the corresponding drug cost-sharing and any restrictions that may apply.

Each insurance company uses different language to explain its drug cost-sharing. Reference the chart on the next page alongside the Summary of Benefits and Coverage (SBC) for your potential plan to get an idea of your out-of-pocket prescription cost.

As you consider different plan options, also check your SBC to see whether your cost-sharing on prescription drugs will apply before or after you reach your deductible.

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  GOVERNMENT OF THE  
DISTRICT OF COLUMBIA  
MURIEL BOWSER, MAYOR

# 2022 Congestive Heart Failure Rx Review Guide

Covered Rheumatoid Arthritis Drugs		District of Columbia Insurance Companies							
		Aetna		CareFirst		Kaiser		United Healthcare	
Name (Generic)	Name (Brand)	Generic/Brand		Generic/Brand		Generic/Brand		Generic/Brand	
		Restrictions	Copay/ Coinsurance	Restrictions	Copay/ Coinsurance	Restrictions	Copay/ Coinsurance <sup>1</sup>	Restrictions	Copay/ Coinsurance <sup>2</sup>
Carvedilol	Coreg CR(capsule)	NR/NC	\$95-\$100/NC	NR/NC	\$0-\$25 / NC	NR/NR	\$25-\$110/ \$25-\$110	NC/NC	NC/NC
	Coreg (tablet)	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25 / NC	NR/NR	\$5-\$40/\$25-\$110	NR/NR	\$0-10/\$0-125
Metoprolol	Lopressor	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25 / NC	NR/NR	\$5-\$110/ \$25-\$110	NR/NR	\$0-10/\$0-125
Metoprolol	Toprol XL	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25 / NC	NR/NR	\$5-\$110/ \$25-\$110	NR/NR <sup>3</sup>	\$0-50/\$0-125
Lisinopril	Prinivil	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25 / NC	NR/NR	\$5-\$40/\$25-\$110	NR/NR	\$0-15/\$0-125
Lisinopril	Zestril	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25 / NC	NR/NR	\$5-\$40/\$25-\$110	NR/NC	\$0-10/NC
Captopril	Capoten	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25 / NC	NR/NC	\$5-\$40/NC	NR/NC	\$0-10/NC
Losartan	Cozaar	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25 / NC	NR/NR	\$5-\$40/\$25-\$110	NR/NR	\$0-10/\$0-125
Spironolactone	Aldactone	NR/NC	\$12-\$15/ NC	NA/NC	\$0-\$25 / NC	NR/NR	\$5-\$40/\$25-\$110	NR/NR	\$0-10/\$0-125
Eplerenone	Inspra	NR/NC	\$95-\$100/ NC	NR/NC	\$0-\$25 / NC	NR/NR	\$25-\$110/ \$25-\$110	NR/NR	\$0-50/\$0-125
Digoxin	Lanoxin	NR/NR	\$12-\$15/ \$55-65	NR/NR	\$0-\$25 / \$15-\$75	NR/NR	\$5-\$40/\$15-\$110	NR/NR	\$0-10/\$0-80
Hydralazine	Apresoline	NR/NC	\$12-\$15/NC	NR/NC	\$0-\$25 / NC	NR/NC	\$5-\$40/ NC	NR/NC	\$0-10/NC
Nitroglycerin	Nitro-Bid	NA/NR	NC/\$95-100	NA/NC	NA / NC	NA/NR	NA /\$25-\$110	NA/NR	NA/\$0-50
Isosorbide Mononitrate	Imdur	NR/NC	\$12-\$15/ NC	NC/NC	\$0-\$25 / NC	NR/NC	\$5-\$40/ NC	NR/NC	\$0-10/NC
Isosorbide Dinitrate	Isordil	NR/NC	\$12-\$15/ NC	NR/NR	\$0-\$25/ \$15-\$75	NR/NR	\$5-\$110/ \$25-\$110	NR/NC <sup>1</sup>	\$0-50/\$0-50
Furosemide	Lasix	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25/ NC	NR/NR	\$5-\$40 /\$25-\$110	NR/NR	\$0-10/\$0-125
Bumetanide	Bumex	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25/ NC	NR/NC	\$25-\$110/NC	NR/NR	\$0-10/\$0-80
Torsemide	Demadex	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25/ NC	NR/NR	\$5-\$40/\$25-\$110	NR/NR	\$0-10/NC
Metolazone	Zaroxolyn	NR/NC	\$12-\$15/ NC	NR/NC	\$0-\$25 / NC	NR/NC	\$5-\$40/NC	NR/NC	\$0-10/NC
Sacubitril/Valsartan	Entresto	NA/NR	NC/\$55-\$65	NR/NC	NA/ NC	NA/NR	NA/\$15-\$110	NA/PA	NA/\$0-125

**Note: Formularies are subject to change during the plan year. Please contact your insurance company for the most up to date information.**

KEY	
NC	Not Covered
NA	Not Applicable
NR	No Restrictions
ST	Step Therapy
PA	Pre-Authorization

\* The cost share for this drug could be a copayment or coinsurance depending on the plan. Generic co-insurance ranges between 0%-20%. Brand name co-insurance ranges between 0%-50%.

<sup>1</sup> The cost share for this drug could be a copayment or coinsurance depending on the plan. Coinsurance is 0%-20% after deductible.

<sup>2</sup> The cost share for this drug could be a copayment or coinsurance depending on the plan. Brand co-insurance is 30% - 50%.