Preventive Care Medications
$0 Cost-Share Medications & Products\textsuperscript{1, 2, 3}
Under the health reform law (Affordable Care Act), benefit plans must cover certain Preventive Care Medications at 100% - without charging a copay, coinsurance or deductible.

These products include:

- U.S. Preventive Services Task Force A & B Recommendation medications
- Food and Drug Administration (FDA)-approved prescription and Over-The-Counter (OTC) birth control (contraceptives) for women
- Flu shot and other vaccines

To follow this law, OptumRx is offering this updated list of no-cost Preventive Care Medications.

You can use your OptumRx member ID card to get the products on this list for no cost if they are:

- Prescribed by a health care professional
- Age- and condition-appropriate
- Filled at a network pharmacy

These products are available at no cost to you on both standard and high-deductible or consumer-driven health plans. To find a network pharmacy, login to optumrx.com, select “Pharmacy Locator” on the right hand side of the screen and enter your zip code or call the number on your OptumRx member ID card. If you get these drugs or products from an out-of-network pharmacy, you will have to pay the full cost for them. Male forms of birth control are not currently considered Preventive Care Medications under the Affordable Care Act.

### U.S. Preventive Services Task Force A & B Recommendation Medications and Supplements

A prescription is required to get these medications and supplements at no cost - even though most are available over-the-counter (OTC).

<table>
<thead>
<tr>
<th>Medication/Supplement</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OTC</strong></td>
<td></td>
</tr>
<tr>
<td>Aspirin - 81 mg</td>
<td>Prevent preeclampsia during pregnancy</td>
</tr>
<tr>
<td>Aspirin - 81 &amp; 325 mg</td>
<td>Prevent cardiovascular disease and colon cancer</td>
</tr>
<tr>
<td>Folic acid 400 &amp; 800 mcg</td>
<td>Prevent birth defects</td>
</tr>
<tr>
<td>Prenatal vitamins with 400 - 800 mcg folic acid</td>
<td></td>
</tr>
<tr>
<td>Bisacodyl EC Tab</td>
<td>Bowel preparation for colonoscopy needed for preventive colon cancer screening. Limit of one $0-cost fill per year.</td>
</tr>
<tr>
<td>Magnesium Citrate Sol</td>
<td>Bowel preparation for colonoscopy needed for preventive colon cancer screening. Limit of one $0-cost fill per year.</td>
</tr>
<tr>
<td>PEG 3350 (generic Miralax)</td>
<td>Bowel preparation for colonoscopy needed for preventive colon cancer screening. Limit of one $0-cost fill per year.</td>
</tr>
<tr>
<td>Only the OTC product may be covered at $0 cost-share. The prescription version of this product may be covered with a copay or coinsurance depending on your plan.</td>
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Continued
<table>
<thead>
<tr>
<th>Medication/Supplement</th>
<th>Reason</th>
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<tbody>
<tr>
<td><strong>Prescription</strong></td>
<td></td>
</tr>
<tr>
<td><em>Generic Colyte 240/22.74 g sold as:</em></td>
<td>Bowel preparation for colonoscopy needed for preventive colon cancer screening. Limit of one $0-cost fill per year.</td>
</tr>
<tr>
<td>PEG-3350/electrolytes</td>
<td></td>
</tr>
<tr>
<td>Gavilyte-C</td>
<td></td>
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<tr>
<td><em>Generic Golytely 236/22.7 g sold as:</em></td>
<td>Bowel preparation for colonoscopy needed for preventive colon cancer screening. Limit of one $0-cost fill per year.</td>
</tr>
<tr>
<td>PEG-3350/electrolytes</td>
<td></td>
</tr>
<tr>
<td>Gavilyte-G</td>
<td></td>
</tr>
<tr>
<td><em>Generic Nulytely sold as:</em></td>
<td>Bowel preparation for colonoscopy needed for preventive colon cancer screening. Limit of one $0-cost fill per year.</td>
</tr>
<tr>
<td>PEG-3350/NaCl/NaBicarbonate/KCl</td>
<td></td>
</tr>
<tr>
<td>Gavilyte-N</td>
<td></td>
</tr>
<tr>
<td>Trilyte</td>
<td></td>
</tr>
<tr>
<td>Fluoride chew tablets, drop (not toothpaste, rinses)</td>
<td>Prevent dental cavities if water source is deficient in fluoride</td>
</tr>
</tbody>
</table>

**Tobacco Cessation Medications**

If you need help to quit smoking or using tobacco products, these preventive medications are available at $0 cost-share. To qualify, you need to:

- Be age 18 or older
- Get a prescription for these products from your doctor, even if the products are sold over-the-counter (OTC)
- Fill the prescription at a network pharmacy

Up to 180 days of treatment are covered at no cost each year. Maximum daily dose quantity limits apply.

**Over-the-counter Medications**

- Nicotine Replacement Gum
- Nicotine Replacement Lozenge
- Nicotine Replacement Patch

**Prescriptions**

- Bupropion sustained-release (generic Zyban) Tablet

These three prescription medications are covered after members have tried: 1) One over-the-counter nicotine product and 2) Bupropion sustained-release (generic Zyban) separately.

- Chantix Tablet
- Nicotrol Inhaler
- Nicotrol Nasal Spray

**Human Immunodeficiency Virus Preventive Medications**

For members who have a higher chance to become infected with human immunodeficiency virus (HIV) but are not yet infected, these preventive medications are available at $0 cost-share. To qualify, a member must:

- Be at increased chance for first-time infection with HIV
- Obtain Prior Authorization

Most plans cover these medications at normal cost-share for the treatment of HIV infection. Your doctor must submit a ‘Health Care Reform - $0 HIV PrEP Preventive’ prior authorization form to request $0 cost-share for primary prevention, if you meet the coverage criteria. If you qualify, you can receive these drugs at $0 cost-share.

**HIV Preexposure Prophylaxis Medications (effective 1/1/20 or later depending on specific plan benefits)**

- Truvada
  - tenofovir tab 300mg (generic Viread)

Continued
Breast Cancer Preventive Medications

For members who have a higher chance for breast cancer but have not had breast cancer, these preventive medications are available at $0 cost-share. To qualify, a member must:

- Be age 35 or older
- Be at increased chance for the first occurrence of breast cancer – after risk assessment and counseling
- Obtain Prior Authorization

Most plans cover these medications at normal cost-share for the treatment of breast cancer, to prevent breast cancer recurrence and for other indications. Your doctor must submit a ‘Health Care Reform - $0 Breast Cancer Preventive’ prior authorization form to request $0 cost-share for primary prevention, if you meet the coverage criteria. If you qualify, you can receive these drugs at $0 cost-share for up to 5 years, minus any time you have been taking them for prevention.

**Breast Cancer Medications (prescription)**

- raloxifene
- tamoxifen

Statin Preventive Medications

The U.S. Preventive Service Task Force recommends that adults without a history of cardiovascular disease (CVD) — symptomatic coronary artery disease or stroke — use a low-to-moderate-dose statin for the primary prevention of CVD events in individuals who meet the following criteria:

- Are age 40-75, and
- Have one or more cardiovascular risk factors (high cholesterol, diabetes, hypertension, or smoking), and
- A calculated 10-year risk of a cardiovascular event of 10% or greater.

**Statins available at $0 cost-share**

- lovastatin (generic Mevacor) – All strengths (Ages 40-75 years)
- atorvastatin (generic Lipitor) 10 & 20 mg  Prior Authorization required to confirm risk of CVD
- simvastatin (generic Zocor) 5, 10, 20 & 40 mg  Prior Authorization required to confirm risk of CVD

*These medications are typically covered at the customary cost-share amount for your plan. Your doctor must submit a, “Health Care Reform - $0 Statin Preventive,” prior authorization form to request $0 cost share for primary prevention, if you meet the above coverage criteria.

Women’s Health: Birth Control Products

**Birth Control Caps & Diaphragms (Cervical)**

- Caya
- Femcap
- Omniflex
- Wide Seal

**Combination Birth Control Pills**

- Four Phase Birth Control Pills: Natazia

**Generic Alesse & Levite sold as:**
- Affirmelle
- Aubra
- Aubra Eq
- Aviane
- Delyla
- Falmina
- Larissa
- Lessina
- Levonor/Ethi 0.1-0.02
- Lutera
- Orsythia

**Generic Beyaz sold as:**
- Drospire/Eth Estr/Lev
- Rajani

**Generic Brevicon 0.5/35 & Modicon 0.5/35 sold as:**
- Necon 0.5/35
- Nortrel 0.5/35
- Wera 0.5/35

You can get a 3-month supply of your medication mailed to you with no cost for standard shipping. Just call the phone number on your OptumRx member ID card, and ask for home delivery.

Continued ➔
### Generic Cyclessa Pak sold as:
- Caziant Pak
- Cesia Pak
- Velvet Pak

### Generic Demulen 1/35 sold as:
- Ethy Eth Est 1-35
- Kelnor 1/35

### Generic Demulen 1/50 sold as:
- Ethynodiol 1-50
- Kelnor 1/50

### Generic Desogen-28 & Ortho-Cept sold as:
- Apri
- Cyred
- Cyred EQ
- Deso/ethinyl estradiol
- Emoquette
- Enskyce
- Isibloom
- Juleber
- Kalliga
- Recipsen
- Solia

### Generic Estrostep FE sold as:
- Tilia FE
- Tri-Legest FE

### Generic Femcon FE chewable sold as:
- Nore/Eth/Fer CHW
- Wymzya FE CHW
- Zenchent FE CHW

### Generic Generess FE CHW sold as:
- Kaitlib FE CHW
- Layolis FE CHW
- Noreth/Ethin FE CHW

### Generic Loestrin 24 FE sold as:
- Aurovela 24 FE
- Blisovi 24 FE
- Hailey 24 FE
- Junel 24 FE
- Larin 24 FE
- Noreth/Ethin Tab FE 1/20
- Tarina 24 FE

### Generic Loestrin 1/20 sold as:
- Aurovela 1/20
- Junel 1/20
- Larin 1/20
- Microgestin 1/20
- Noreth/Ethin 1/20

### Generic Loestrin 1.5/30 sold as:
- Aurovela 1.5/30
- Hailey 1.5/30
- Junel 1.5/30
- Larin 1.5/30
- Microgestin 1.5/30

### Generic Loestrin FE 1/20 sold as:
- Aurovela FE 1/20
- Blisovi FE 1/20
- Gildess FE 1/20
- Junel FE 1/20
- Larin FE 1/20
- Microgestin FE 1/20
- Noreth/Ethin FE 1/20
- Tarina FE 1/20

### Generic Loestrin FE 1.5/30 sold as:
- Aurovela FE 1.5/30
- Blisovi FE 1.5/30
- Gildess FE 1.5/30
- Junel FE 1.5/30
- Larin FE 1.5/30
- Microgestin FE 1.5/30

### Generic Lo/Ovral-28 sold as:
- Cryselle-28
- Elinest
- Low-Ogestrel

### Generic Loseasonique sold as:
- Amethyst Lo
- Camrese Lo
- Levonorgestrel and Ethinyl Estradiol

### Generic Lybrel 90-20Mgc sold as:
- Amethyst 90-20mcg
- Levo-Eth Est 90-20mcg

### Generic Minastrin 24 CHW sold as:
- Melodetta CHW 24 FE
- Mibelas 24 CHW FE
- Noreth/Ethin CHW FE 1/20

### Generic Minacrine 28 Day sold as:
- Azurette
- Bekyree
- Deso/ethinyl estradiol
- Kariva
- Kimioidess
- Pimtrean
- Simliya
- Viorele

### Generic Nordette-28 sold as:
- Altavera
- Ayuna
- Chateal
- Chateal Eq
- Kuvelo
- Levonor/ethinyl estradiol
- Levora-28
- Lilow
- Marlissa
- Portia-28

### Generic Ortho-Cyclen 0.25/35 sold as:
- Estarylla
- Femynor
- Mili 0.25/35
- Mono-Linyah
- Mononessa
- Norgestimate & Ethinyl Estradiol
  - 0.25mg-35mcg
- Previfem
- Sprintec 28
- Vylibra

### Generic Ortho-Novum 1/35-28 & Norinyl 1/35 sold as:
- Alyacen 1/35
- Cyclefem 1/35
- Dasetta 1/35
- Fecon 1/35
- Nortrel 1/35
- Pirmella 1/35

### Generic Ortho-Novum 7/7/7-28 sold as:
- Alyacen 7/7/7
- Cyclefem 7/7/7
- Dasetta 7/7/7
- Nortrel 7/7/7
- Pirmella 7/7/7

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You can get a 3-month supply of your medication mailed to you with no cost for standard shipping. Just call the phone number on your OptumRx member ID card, and ask for home delivery.
### Generic Ortho Tri-Cyclen sold as:
- Norgestimate/Ethinyl Estradiol
- Tri-Estaryll
- Tri-Femynor
- Tri-Linyah
- Tri-Mili
- Tri-Previcem
- Tri-Sprintec
- Tri-Vylibra
- Trinessa

### Generic For Ortho Tri-Cyclen Lo sold as:
- Norgest/Ethi Estradio
- Tri-Lo-Estaryll
- Tri-Lo-Marzia
- Tri-Lo Mili
- Tri-Lo-Sprintec
- Tri-Vylibra Lo
- Trinessa Lo

### Generic Ovcon-35 sold as:
- Balziva
- Briellyn
- Philit
- Vyfemla
- Zenchent

### Generic Ovral sold as:
- Ogestrel

### Generic Quartette sold as:
- Fayosim
- Levonor/Ethi tab Estradio
- Rivelsa

### Generic Safyral sold as:
- Dros/Eth Est tab Levomefo
- Tydemy

### Generic Seasonale sold as:
- Introvalle
- Jolessa
- Levonor/ethinyl estradiol
- Quasense
- Setlakin

### Generic Seasonique sold as:
- Amethia
- Ashlyna
- Camrese
- Daysee
- Levonor/ethi estradio
- Simpesss

### Generic Tri-Norinyl 28 sold as:
- Aranelle
- Leena

### Generic Triphasil sold as:
- Enpresse-28
- Levonest
- Levonor/Ethi
- Myzilra
- Trivora-28

### Generic Yasmin 28 3-0.03mg sold as:
- Drospr/Ethi 3-0.03mg
- Ocella 3-0.03mg
- Syeda 3-0.03mg
- Zarah 3-0.03mg
- Zumandimine 3-0.03mg

### Generic Yaz 3-0.02mg sold as:
- Drospr/Ethi 3-0.02
- Drospirenone/ethy est
- Gianvi
- Jasmie
- Lo-Zumandimi
- Loryna
- Nikki
- Vestura

### Progestin Only Birth Control Pills

### Birth Control Patches (Transdermal)

### Generic Ortho Evra sold as:
- Xulane

### Birth Control Shots (Injection)

### Medroxyprogesterone 150mg IM (Generic Depo-Provera contraceptive)

### Emergency Birth Control

### ella
- LeVonorgestrel 1.5mg, (generic Plan B One-Step)

### Over-The-Counter (OTC) Birth Control
- (must have a prescription and get them from a network pharmacy for OptumRx to cover the costs)

### Contraceptive films (e.g. VCF Vaginal)

### Contraceptive foams (e.g. VCF Vaginal Aer)

### Contraceptive gels (e.g. Gynol ii, Shur-Seal, VCF Vaginal)

### FC female (female condom)

### Generic emergency birth control (e.g. Aftera, EContra EZ, Econtra OS, Levonorgest tab 1.5mg, My Choice, My Way, New Day, Next Choice, Opcicon, Option 2, React, Take Action)

### Today Sponge

### Birth Control IUD’s and Implants

### Kyleena
- Liletta
- Mirena
- Nexplanon
- Paragard
- Skyla

### Some methods of birth control, such as IUDs and implants, may be available through your medical benefit and not your pharmacy benefit.

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You can get a 3-month supply of your medication mailed to you with no cost for standard shipping. Just call the phone number on your OptumRx member ID card, and ask for home delivery.
**Flu shot and other vaccines**

Plans must provide coverage without cost-sharing for immunizations that are recommended for routine use by the Advisory Committee on Immunization Practices (ACIP), a federal committee comprised of immunization experts that is convened by the Centers for Disease Control and Prevention. Vaccines may be covered by your medical benefit and not your pharmacy benefit.

Many vaccines can be obtained on a walk-in basis by presenting the OptumRx ID card at the time of service. Members should review their benefit plan to determine coverage for vaccines.

**Routine vaccines**

Age restrictions or limitations may apply. Check with your network pharmacy for specific age, flu shot and vaccine requirements.

### Flu Shots

- **Flu (Influenza)**
  - Afluria Quad
  - Fluarix Quad
  - Flublok Quad
  - Flucelvax Quad
  - Flulaval Quad
  - FluMist Quad
  - Fluvirin Quad
  - Fluzone HD
  - Fluzone Quad
  - (pediatric dose)

### Other Vaccines

- **Hepatitis A** (Adult and Pediatric)
  - Havrix, Vaqta

- **Hepatitis B** (Adult and Pediatric)
  - Engerix-B, Heplisav-B (adult only), Recombivax-HB

- **Human Papilloma Virus (HPV)** — Vaccine prevents HPV related cancers (ages 9 - 26 years)
  - Gardasil 9

- **Measles, Mumps, Rubella**
  - MMR-II

- **Meningococcal** — Vaccine prevents meningitis Groups A, C, Y and W-135
  - Menactra, Menveo

- **Meningococcal** — Vaccine prevents meningitis Group B
  - Bexsero, Trumenba

- **Pneumococcal** — Vaccine prevents pneumonia
  - Prevnar13, Pneumovax 23

- **Tdap** — Vaccine prevents tetanus, diptheria, pertussis
  - Adacel, Boostrix

- **Tetanus Diphtheria** — TD
  - Tenivac

- **Varicella** — Vaccine prevents chicken pox
  - Varivax

- **Zoster** — Vaccine prevents shingles
  - Shingrix (ages 50 years and older), Zostavax (ages 60 years and older)

*Vaccine type

Ask your employer or check your plan documents for your plan’s specific coverage details.

Not all vaccines on this list are available at all network pharmacies. Contact your local network pharmacy to confirm vaccine availability.
Frequently Asked Questions
Pharmacy Benefit Preventive Care Medications Coverage

What Preventive Care Medications are available at no cost?
Look at the list in this document, login to optumrx.com, or call the number on your OptumRx member ID card for a list of medications covered at $0 cost-share.
Please note, in order to get coverage at no cost for preventive care medications and products (including over-the-counter) you will need a prescription from your doctor.

Are all birth control products available at no cost?
No, only the products on the list for your plan will be $0 under the pharmacy benefit. The health reform law allows plans to use reasonable medical management to decide which birth control products will be provided at no cost.
If you choose a product from this list, your cost at the pharmacy will be $0. If you choose a covered birth control product that is not on the list, a copay or coinsurance may be required. This cost will apply to your deductible if you have one.

What if my doctor says I need birth control that is not on this list?
This list includes at least one form of birth control from FDA-approved methods typically available through your pharmacy benefit. If your doctor prescribes birth control not on our list for medical reasons, OptumRx will cover that recommended drug or product at no cost to you through our exceptions process. Just call the number on your OptumRx member ID card, and ask how to get coverage. Medical reasons may include side effects, whether the birth control is permanent or can be reversed, and whether you can use the product as required.
Some methods of birth control, such as IUDs and Implants, may be available through your medical benefit and not your pharmacy benefit.

Is my plan required to cover contraceptives?
Some plans may not have coverage for contraceptives if your employer elects a religious exemption. Also, some organizations (Employer Class Members) can choose not to cover contraceptives for religious reasons; OptumRx may provide or arrange for contraceptive coverage for members of Employer Class Members as allowed by the health reform law.

In either event, you will still have coverage without cost-share of the U.S. Preventive Services Task Force A & B Recommendation medications listed on the Preventive Care Medications list (such as aspirin).

If I’m at risk for preeclampsia during pregnancy, how can I get low-dose aspirin for no cost?
Low-dose or baby aspirin (81 mg) is available at no cost to pregnant women at risk for preeclampsia. If you are pregnant and at risk for preeclampsia, talk to your doctor about whether low-dose aspirin can help. If so, your doctor can give you a prescription for low-dose aspirin which can be filled at no cost to you at a network retail pharmacy.

If I need to take preparation medications before a preventive colonoscopy, how can I get these for no cost?
If you are scheduled for a preventive colonoscopy, ask your doctor for a prescription for one of the no cost preparation medications. You can fill this prescription at a retail network pharmacy at no cost to you. Note: There is a limit of one $0-cost fill per year.

What if my doctor prescribes a preparation medication for my preventive colonoscopy that is not on this list?
You can ask your doctor for a prescription for one of the medications on this list that your doctor feels would work for you. For some medical reasons, your doctor may decide you need a medication that is not on this list to prepare for your preventive colonoscopy. If so, you can request the medication you need by calling the number on your health plan ID card, and asking how to get coverage at no cost. Medical reasons may include side effects, and whether you can use the product as required.
If you need a prescription medication to prepare for a colonoscopy that is not preventive, these medications may still be covered with a copayment or coinsurance.

How can I get preventive medications to help me stop using tobacco for no cost?
If you are age 18 or older and want to quit using tobacco products, talk to your doctor about medications that can help. If your doctor decides this therapy is right for you, they may prescribe a generic over-the-counter or prescription medication.
Frequently Asked Questions continued...

The tobacco cessation products on this list are available at no cost to you if they are:
- Prescribed by your doctor
- Filled at a network pharmacy
- Meet use and quantity guidelines

If I’m at risk for HIV (Human Immunodeficiency Virus) but have not been infected, how can I get preventive drugs for $0 cost-share?
If you are a member not yet infected with HIV, talk to your doctor about your risk of getting HIV. If your doctor decides this treatment is appropriate for you, your doctor may offer to prescribe risk-reducing medications, such as Truvada or tenofovir 300mg tablet. Your doctor must submit a ‘Health Care Reform - $0 HIV PrEP Preventive’ prior authorization form to request $0 cost-share if you meet the coverage criteria.

If I’m at risk for breast cancer but have not had it, how can I get preventive drugs for $0 cost-share?
If you are a member age 35 or older, talk to your doctor about your risk of getting breast cancer if you have not had it. If your doctor decides this treatment is appropriate for you, your doctor may offer to prescribe risk-reducing medications, such as raloxifene or tamoxifen. Your doctor must submit a ‘Health Care Reform - $0 Breast Cancer Preventive’ prior authorization form to request $0 cost-share if you meet the coverage criteria.

If I’m at risk for cardiovascular disease, how can I get statin medications at no cost to me?
If you are a member age 40-75, and at risk for cardiovascular disease, your doctor may offer to prescribe statin medications. Select statins are covered at no cost-share for people who have certain risk factors for cardiovascular disease. Depending on the medication, your doctor may need to submit a ‘Health Care Reform - $0 Statin Preventive’ prior authorization form to request $0 cost-share if you meet coverage criteria. For members who don’t meet this $0 cost-share criteria or don’t request prior authorization, statins will continue to be covered at the customary cost-share amount for your plan.

How many Preventive Care Medications can I get?
Some products have quantity limits based on FDA approved dosing or product packaging. Coverage is limited to up to a 30 day supply at retail pharmacies or up to a 90 day supply from home delivery.

Will this drug list change?
Drug lists can and do change, so it’s always good to check. You can find the most updated information by:
- Logging in to optumrx.com, or
- Calling the number on your OptumRx member ID card.

What if I have a high-deductible or consumer-driven health (CDH) plan?
The same no cost options on the list applicable to your plan will be available to you. If you fill a prescription for covered birth control products that are not on your plan’s no cost drug list, you will need to pay the full cost, until your deductible is reached.

Are the no cost Preventive Care Medications available at both retail and home delivery pharmacies?
Preventive Care Medications are available at network retail pharmacies. Most are also available at the OptumRx® Home Delivery Pharmacy for plans with a home delivery benefit. The OptumRx Home Delivery Pharmacy can mail a 3-month supply of your medication right to you with no cost for standard shipping. That means you can order 4 times a year instead of making 12 trips to pick up your medication. To start using home delivery, just call the number on your OptumRx member ID card.

What if the health care reform law requirements for Preventive Care Medication coverage change?
If the law requiring plans to provide preventive care medications at no cost changes, information on how your costs may change will be available to you by:
- Logging in to optumrx.com, or
- Calling the number on your OptumRx member ID card.
1. Please note this list is subject to change.

2. Always refer to your benefit plan materials to determine your coverage for medications and cost-share. Some medications may not be covered under your specific benefit. Where differences are noted, the benefit plan documents will govern.

3. All branded medications are trademarks or registered trademarks of their respective owners.

4. The listed age limits are based on U.S. Preventive Services Task Force Recommendations; coverage for additional populations may also apply as required.

5. When informed, an issuer must accommodate any member when one of the zero cost contraceptives may be medically inappropriate as determined by the member’s health care provider and waive the otherwise applicable cost-sharing for a contraceptive not currently covered at zero cost.

6. If your pharmacy benefit plan is grandfathered under the ACA, these drugs may be covered at the normal cost-share.

7. Not all vaccines on this list are available at all participating pharmacies. Members should contact their participating pharmacy of choice to confirm vaccine availability.