



## Some medications are free with your plan under the Affordable Care Act (ACA)\*

We want to make it easy for our members to get the care they need. Especially preventive care, which can help prevent health problems from becoming serious.

The federal government decides what medications are most important for preventive health. And we cover those at 100% when you meet certain age and gender requirements; have a prescription from a health care provider (even for over-the-counter, or OTC, medicines); and fill your prescription at an in-network pharmacy.

\*"Free" means that you will not have a copay or have to pay money toward your deductible or coinsurance for the medication. Other rules may apply, including age and gender requirements and frequency limitation rules. Review your plan documents for a list of covered preventive services and medications. The "ACA" designation in the formulary, or drug list, for your plan refers to the Affordable Care Act, also known as Obamacare or health care reform. The ACA requires health plans to cover many preventive care services and drugs without making members pay anything toward their costs. This list is subject to change. For the most up-to-date list of covered drugs, visit the Pharmacy Center on [connecticare.com](http://connecticare.com).

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# Preventive Medications Covered Under the Affordable Care Act (ACA)

Please note: Generic drug examples are italicized and in lowercase letters.

Brand-name drug examples are not italicized and are in uppercase letters.

**Aspirin** – To prevent cardiovascular disease and colon cancer in men and women, and preeclampsia in pregnant women after 12 weeks gestation who are at high risk.

**Who's covered?** Adults under age 60

**What's covered?** Generic over-the-counter products only, up to 325 mg when prescribed by a physician

**Examples:** *aspirin chewable 81 mg*  
*aspirin enteric coated tablet 325 mg*

**Cholesterol/ Statins** – To prevent cardiovascular disease for individuals at high risk.

**Who's covered?** Adults age 40 – 75 with one or more cardiovascular risk factors, such as dyslipidemia, diabetes, hypertension or smoking

**What's covered?** Select generic strengths of low- to moderate-dose statins for primary prevention of cardiovascular disease

**Examples:** *atorvastatin*  
*fluvastatin*  
*lovastatin*  
*pravastatin*  
*rosuvastatin*  
*simvastatin*

**Oral Fluoride** – To prevent cavities in children 6 months through 16 years of age whose water is low in fluoride.

**Who's covered?** Children age 6 months through 16 years

**What's covered?** Generic only (prescription/over-the-counter) single entity and combo products providing up to 0.5 mg/day when prescribed by a physician

**Examples:** *sodium fluoride chewable tablet 0.25 to 0.5 mg*  
*sodium fluoride solution 0.25 mg to 0.5 mg/ml oral drops*  
*tri-vit with fluoride 0.25 mg to 0.5 mg/ml*

**Folic Acid** – To prevent birth defects in women who are planning and capable of pregnancy.

**Who's covered?** Women through age 50

**What's covered?** Generic only (prescription/over-the-counter) 0.4 mg – 0.8 mg single entity as well as combo products when prescribed by a physician

**Examples:** *folic acid 0.4 mg (400 mcg)*  
*folic acid 0.8 mg (800 mcg)*

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**Smoking Cessation** – To help adults quit tobacco use in order to prevent future health-related issues.

**Who's covered?** Adults 18 years of age and older

**What's covered?** All FDA-approved tobacco cessation products (prescription/over-the-counter) when prescribed by a physician

**Examples:** *bupropion HCL SR 150 mg (ZYBAN 150 mg)*  
*CHANTIX*  
*nicotine 21 mg/24 hr patch*

**Bowel Preps** – Agents used to cleanse the bowel prior to colonoscopy. Colonoscopies screen for colorectal and related cancers.

**Who's covered?** Adults age 50 to 75

**What's covered?** Generic only (prescription/over-the-counter) when prescribed by a physician (limit 2 prescriptions per 365 days)

**Examples:** *gavilyte – h kit*  
*peg 3350 powder*  
*peg-prep kit*

**Immunizations** – To prevent certain illness in people of all ages. Provider must adhere to the FDA/CDC age/frequency/gender guidelines.

<b>Examples:</b> Diphtheria	Measles, Mumps, Rubella (MMR)
Haemophilus Influenzae Type B (Hib)	Meningococcal
Hepatitis A	Pneumococcal
Hepatitis B	Rotavirus
Herpes Zoster (Shingles)	Tetanus-Acellular, Pertussis (DTap)
Human Papillomavirus (HPV)	Tetanus-Diphtheria/Tetanus-Diphtheria Acellular Pertussis (Tdap)
Inactivated Poliovirus (IPV)	Varicella (Chicken Pox)
Influenza (Flu)	

For adult and child & adolescent immunization schedules (for persons aged 0-6 years, 7-18 years and "catch-up schedule"), visit [cdc.gov/vaccines/schedules](http://cdc.gov/vaccines/schedules).

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**Breast Cancer Prevention** – For the primary prevention of women at increased risk of breast cancer.\*

**Who's covered?** "High risk" women 35 years of age and older who meet criteria

**What's covered?** Generic *tamoxifen* and *raloxifene* when prescribed by a physician and clinical criteria are met

\*Requires preauthorization to determine if clinical criteria are met

**Women's Contraception** – For the prevention of pregnancy in women.

The following contraceptives are provided at a zero cost share as mandated by the Affordable Care Act (ACA). Please note that single-source brand\* and multi-source brand\*\* contraceptives are only available at a zero cost share when specific plan requirements are met. The list is subject to change to remain compliant with ACA guidelines.

Members: The terms of your health plan will ultimately determine coverage and cost sharing. For specific questions about your coverage, please call the phone number printed on your ID card.

## Cervical Cap

FEMCAP\*

## Diaphragm

CAYA CONTOURED\*

WIDE SEAL DIAPHRAGM\*

## Emergency

AFTERA\*\*

*econtra ez*

*fallback solo*

*my way*

*new day*

*next choice*

*opicon one-step*

*option 2*

PLAN B ONE-STEP\*\*

TAKE ACTION\*

## Emergency/progestin blocker

ELLA\*

## Female Condom

FC2 FEMALE CONDOM\*

## Implantable Rod

NEXPLANON\*

## Injection

DEPO-PROVERA\*\*

DEPO-SUBQ PROVERA 104\*

*medroxyprogesterone acetate*

## IUD Copper

PARAGARD T 380-A\*

## IUD/progestin

KYLEENA\*

LILETTA\*

MIRENA\*

SKYLA\*

## Patch

*xulane*

## Spermicide

CONCEPTROL\*

*gynol ii*

VCF FOAM

VCF GEL\*

## Sponge

TODAY CONTRACEPTIVE

SPONGE\*

## Vaginal Ring

NUVARING\*

## Oral Contraceptive –

### Continuous

*amethia / lo*

*ashlyna*

*camrese / lo*

*daysee*

FAYOSIM

*introvale*

*jolessa*

*levonorgestrel-e.e.*

LOSEASONIQUE\*\*

QUARTETTE\*\*

*quasense*

*rivelsa*

SEASONIQUE\*\*

*setlakin*

## Oral Contraceptive – Progestin ONLY

*camila*

*deblitane*

*errin*

*heather*

*incassia*

*jencycla*

*jolivette*

*lyza*

*nora-be*

*norethindrone*

*norlyda*

*norlyroc*

ORTHO MICRONOR\*\*

*sharobel*

*tulana*

\*Indicates single-source brand product | \*\*Indicates multi-source brand product

# Preventive Medications Covered Under the Affordable Care Act (ACA)

## Women's Contraception – For the prevention of pregnancy in women. (continued)

### Oral Contraceptives – Combined

<i>altavera</i>	<i>kelnor 1-35</i>	<i>pimtreea</i>
<i>alyacen</i>	<i>kurvelo</i>	<i>pirmella</i>
<i>amethyst</i>	<i>larin / fe / 24 fe</i>	<i>portia</i>
<i>apri</i>	<i>larissia</i>	<i>previfem</i>
<i>aranelle</i>	<i>layolis fe</i>	<i>rajani</i>
<i>aubra / eq</i>	<i>leena</i>	<i>reclipsen</i>
<i>aviane</i>	<i>lessina</i>	<i>SAFYRAL**</i>
<i>azurette</i>	<i>levonest</i>	<i>setlakin</i>
<i>BALCOLTRA</i>	<i>levonorgestrel-e.e.</i>	<i>sprintec</i>
<i>balziva</i>	<i>levora-28</i>	<i>sronyx</i>
<i>bekyree</i>	<i>lillow</i>	<i>syeda</i>
<i>BEYAZ**</i>	<i>LO LOESTRIN FE*</i>	<i>tarina fe</i>
<i>blisovi fe / 24 fe</i>	<i>LOESTRIN / FE**</i>	<i>TAYTULLA*</i>
<i>BREVICON**</i>	<i>lomedica 24 fe</i>	<i>tilia fe</i>
<i>briellyn</i>	<i>loryna</i>	<i>tri-estarylla</i>
<i>camrese / lo</i>	<i>low-ogestrel</i>	<i>trifemynor</i>
<i>caziant</i>	<i>lutera</i>	<i>tri-legest fe</i>
<i>chateal / eq</i>	<i>marlissa</i>	<i>tri-lynyah</i>
<i>cryselle</i>	<i>melodetta 24 fe</i>	<i>tri-lo-estarylla</i>
<i>cyclafem</i>	<i>mibelas 24 fe</i>	<i>tri-lo-marzia</i>
<i>CYCLESSA**</i>	<i>microgestin / fe</i>	<i>tri-mili</i>
<i>cyred / eq</i>	<i>MICROGESTIN 24 FE**</i>	<i>trinessa / lo</i>
<i>dasetta</i>	<i>mili</i>	<i>TRI-NORINYL**</i>
<i>delyla</i>	<i>MINASTRIN 24 FE**</i>	<i>tri-previfem</i>
<i>desogestrel-e.e.</i>	<i>MIRCETTE**</i>	<i>tri- and tri-lo sprintec</i>
<i>drosiprenone-e.e.</i>	<i>mono-lynyah</i>	<i>trivora-28</i>
<i>elimest</i>	<i>mononessa</i>	<i>tri-vylibra</i>
<i>emoquette</i>	<i>myzilra</i>	<i>tydemy</i>
<i>enpresse</i>	<i>NATAZIA*</i>	<i>velivet</i>
<i>enskyce</i>	<i>necon</i>	<i>vienva</i>
<i>estarylla</i>	<i>nikki</i>	<i>viorele</i>
<i>ESTROSTEP FE**</i>	<i>norethindrone-e.e.</i>	<i>vyfemla</i>
<i>ethynodiol-e.e.</i>	<i>norgestimate-e.e.</i>	<i>vylibra</i>
<i>falmina</i>	<i>norgestrel-e.e.</i>	<i>wera</i>
<i>femynor</i>	<i>nortrel</i>	<i>wymzya fe</i>
<i>GENERESS FE**</i>	<i>ocella</i>	<i>YASMIN 28**</i>
<i>gianvi</i>	<i>ogestrel</i>	<i>YAZ**</i>
<i>isibloom</i>	<i>orsythia</i>	<i>zarah</i>
<i>juleber</i>	<i>ORTHO TRI-CYCLEN / LO**</i>	<i>zenchent / fe</i>
<i>junel / fe / fe 24</i>	<i>ORTHO-CYCLEN**</i>	<i>zovia</i>
<i>kaitlib fe</i>	<i>ORTHO-NOVUM**</i>	
<i>kariva</i>	<i>philith</i>	

\*Indicates single-source brand product | \*\*Indicates multi-source brand product