



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.

ConnectiCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-251-7722 (TTY: 1-800-833-8134). ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-251-7722 (TTY: 1-800-833-8134).

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 5 years of age whose water is low in fluoride.

Who's covered? Children age 6 months through 5 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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Vitamin D – To help prevent falls in community-dwelling adults age 65 years or older who are at risk.

Who's covered? Adults 65 years of age and older

What's covered? Oral generic only (prescription/over-the-counter) with single content of up to 1,000 IU per dose and dual combination products containing calcium and vitamin D2 or D3 when prescribed by a physician

Examples: *calcium citrate + D*
calcium 500 mg + D
vitamin D3 - 1,000 unit capsule
vitamin D3 - 400 unit softgel

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.

Examples: 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-
Inactivated Poliovirus (IPV)	Diphtheria Acellular Pertussis (Tdap)
Influenza (Flu)	Varicella (Chicken Pox)

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.

Preventive Medications Covered Under the Affordable Care Act (ACA)

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

levonorgestrel

my way

next choice

opcicon one-step

option 2

PLAN B ONE-STEP**

react

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*

Sponge

TODAY CONTRACEPTIVE

SPONGE*

Vaginal Ring

NUVARING*

Oral Contraceptive – Continuous

amethia / lo

ashlyna

camrese

daysee

introvale

jolessa

levonorgestrel-e.e.

LOSEASONIQUE**

QUARTETTE*

quasense

SEASONIQUE**

Oral Contraceptive – Progestin ONLY

camila

deblitane

errin

heather

jencycla

jolivette

lyza

nora-be

norethindrone

norlyroc

ORTHO MICRONOR**

sharobel

*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>kaitlib fe</i>	ORTHO-CYCLEN**
<i>alyacen</i>	<i>kariva</i>	ORTHO-NOVUM**
<i>amethyst</i>	<i>kelnor 1-35</i>	OVCON-35**
<i>apri</i>	<i>kimidess</i>	<i>philith</i>
<i>aranelle</i>	<i>kurvelo</i>	<i>pimtrea</i>
<i>aubra</i>	<i>larin / fe / 24 fe</i>	<i>pirmella</i>
<i>aviane</i>	<i>larissia</i>	<i>portia</i>
<i>azurette</i>	<i>layolis fe</i>	<i>previfem</i>
<i>balziva</i>	<i>leena</i>	<i>rajani</i>
<i>bekyree</i>	<i>lessina</i>	<i>reclipsen</i>
BEYAZ**	<i>levonest</i>	SAFYRAL*
<i>blisovi fe / 24 fe</i>	<i>levora-28</i>	<i>setlakin</i>
BREVICON**	LO LOESTRIN FE*	<i>sprintec</i>
<i>briellyn</i>	LOESTRIN / FE**	<i>sronyx</i>
<i>camrese / lo</i>	<i>lomedica 24 fe</i>	<i>syeda</i>
<i>caziant</i>	<i>loryna</i>	<i>tarina fe</i>
<i>chateal</i>	<i>low-ogestrel</i>	TAYTULLA*
<i>cryselle</i>	<i>lutera</i>	<i>tilia fe</i>
<i>cyclafem</i>	<i>marlissa</i>	<i>tri-estarylla</i>
CYCLESSA**	<i>microgestin / fe</i>	<i>tri-legest fe</i>
<i>cyred</i>	MICROGESTIN 24 FE**	<i>tri-linyah</i>
<i>dasetta</i>	MINASTRIN 24 FE*	<i>tri-lo-estarylla</i>
<i>delyla</i>	MIRCETTE**	<i>tri-lo-marzia</i>
DESOGEN**	<i>mono-linyah</i>	<i>trinessa / lo</i>
<i>desogestrel-e.e.</i>	<i>mononessa</i>	TRI-NORINYL**
<i>drospirenone-e.e.</i>	<i>myzilra</i>	<i>tri-previfem</i>
<i>elinest</i>	NATAZIA*	<i>tri- and tri-lo sprintec</i>
<i>emoquette</i>	<i>necon</i>	<i>trivora-28</i>
<i>enpresse</i>	<i>nikki</i>	<i>velivet</i>
<i>enskyce</i>	<i>norethindrone-e.e.</i>	<i>vestura</i>
<i>estarylla</i>	<i>norgestimate-e.e.</i>	<i>vienva</i>
ESTROSTEP FE**	<i>norgestrel-e.e.</i>	<i>violele</i>
<i>falmina</i>	NORINYL 1+35**	<i>vyfemla</i>
FEMCON FE**	<i>norlyroc</i>	<i>wera</i>
<i>femynor</i>	<i>nortrel</i>	<i>wymzya fe</i>
GENERESS FE**	<i>ocella</i>	YASMIN 28**
<i>gianvi</i>	<i>ogestrel</i>	YAZ**
<i>gildagia</i>	<i>orsythia</i>	<i>zarah</i>
<i>juleber</i>	ORTHO TRI-CYCLEN / LO**	<i>zenchent / fe</i>
<i>junel / fe / fe 24</i>	ORTHO-CEPT**	<i>zovia</i>

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