

\$0 Preventive Medications Under the Affordable Care Act Premium Preferred Drug List (PDL) Closed Formulary

The Affordable Care Act (ACA) requires most group and individual health plans to waive cost share for in-network preventive services, including certain preventive medications and devices. This requirement does not apply to “grandfathered plans.” If you do not know whether your plan is subject to this requirement, please contact BCBSAZ. If your plan does not have ACA prevention, a cost share will apply.

This list may apply only for select grandfathered plans with the Premium PDL Closed Formulary. This list *does not* apply to plans with an “open” benefit design.

The United States Preventive Services Task Force (USPSTF) has identified certain medications as the recommended preventive medications.

There are two important things to remember about this mandate.

1. The cost share waiver does not apply if you use an out-of-network or non-contracted pharmacy provider, so make sure to check your pharmacy provider’s network status.
2. There are some medications and devices that can be used for both preventive care and to treat a medical condition. Cost share is waived only when the medication or device is prescribed for preventive care.

Questions?

Log in to MyBlueSM to find participating retail pharmacies, review your specific benefit information, and compare medication pricing and options. If you have questions, please call us.

Member Services	Phone Number	Standard Hours of Operation
Pharmacy Benefits	1 (866) 325-1794	24/7/365
BCBSAZ	Call the number on your ID card	8:30 a.m. to 4:30 p.m. Monday - Friday

Premium PDL ACA Prevention Drug List

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Drug	Status	Notes
Analgesics - Nonnarcotic		
*Salicylates***		
<i>adult aspirin regimen</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin 81</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin adult low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin adult low strength oral tablet delayed release</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin childrens</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin ec low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin ec low strength</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin low dose oral tablet chewable</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin low dose oral tablet delayed release</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin oral tablet 325 mg</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin oral tablet chewable</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>aspirin oral tablet delayed release 325 mg, 81 mg</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)

Drug	Status	Notes
<i>aspirin regimen</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
BAYER ADVANCED ASPIRIN REG ST	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
BAYER ASPIRIN EC LOW DOSE	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
BAYER ASPIRIN ORAL TABLET	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
BAYER ASPIRIN ORAL TABLET DELAYED RELEASE	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
BAYER LOW DOSE	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>childrens aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>cvs aspirin adult low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>cvs aspirin adult low strength</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>cvs aspirin ec oral tablet delayed release 81 mg</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>cvs aspirin low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>cvs aspirin low strength oral tablet delayed release</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>cvs aspirin oral tablet 325 mg</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)

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Drug	Status	Notes
<i>cvs genuine aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
ECOTRIN	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
ECOTRIN ARTHRTIS PAIN	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
ECOTRIN LOW STRENGTH	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>eq aspirin adult low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>eq aspirin low dose oral tablet chewable</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>eq aspirin oral tablet</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>eql aspirin ec oral tablet delayed release 325 mg</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>eql aspirin low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>genuine aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>gnp adult aspirin low strength oral tablet chewable</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>gnp aspirin low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>gnp aspirin oral tablet 325 mg</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)

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Drug	Status	Notes
<i>gnp aspirin oral tablet delayed release</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>goodsense aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>goodsense aspirin adults</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>goodsense aspirin low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>h-e-b aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>hm adult aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>hm aspirin ec</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>hm aspirin ec low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>hm aspirin oral tablet delayed release</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>kls aspirin low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>kp aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
MEDI-FIRST ASPIRIN	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
MEDIQUE ASPIRIN	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)

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Drug	Status	Notes
<i>meijer aspirin ec</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>mm aspirin oral tablet delayed release</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>px aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>px enteric aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>qc aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>qc aspirin low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>qc childrens aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>qc enteric aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>ra aspirin adult low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>ra aspirin adult low strength oral tablet chewable</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>ra aspirin childrens</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>ra aspirin ec</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>ra aspirin ec adult low st</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)

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Drug	Status	Notes
<i>ra aspirin oral tablet 325 mg</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>ra pain relief aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sb aspirin ec</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sb aspirin oral tablet</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sb childrens aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sb low dose asa ec</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sm aspirin adult low strength oral tablet delayed release</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sm aspirin ec</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sm aspirin ec low strength</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sm aspirin low dose</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
<i>sm childrens aspirin</i>	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
ST JOSEPH ASPIRIN ORAL TABLET DELAYED RELEASE	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)
ST JOSEPH LOW DOSE	\$0	QL (1 tab/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 45 Years)

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Drug	Status	Notes
Antineoplastics And Adjunctive Therapies		
*Antiestrogens***		
<i>tamoxifen citrate oral</i>	\$0	ACA (Tier 1 if ACA does not apply)
*Aromatase Inhibitors***		
<i>anastrozole oral</i>	\$0	QL (1 tab/day); DS (30 day supply max); ACA (Tier 1 if ACA does not apply)
<i>exemestane</i>	\$0	QL (1 tab/day); DS (30 day supply max); ACA (Tier 1 if ACA does not apply); F
<i>letrozole oral</i>	\$0	QL (1 tab/day); DS (30 day supply max); ACA (Tier 1 if ACA does not apply); F
Antivirals		
*Antiretroviral Combinations***		
<i>emtricitabine-tenofovir df oral tablet 200-300 mg</i>	\$0	QL (1 tab/day); ACA (Tier 3 if ACA does not apply)
*Misc. Antivirals***		
LAGEVRIO	\$0	QL (8 caps/day; 80 caps/year); Vaccine
Contraceptives		
*Biphasic Contraceptives - Oral***		
AZURETTE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
KARIVA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
PIMTREA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
SIMLIYA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>viorele</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
VOLNEA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
*Combination Contraceptives - Oral***		
AFIRMELLE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
ALTAVERA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>alyacen 1/35</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
APRI	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AUBRA EQ	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AUROVELA 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AUROVELA 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AUROVELA 24 FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AUROVELA FE 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AUROVELA FE 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AVIANE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
AYUNA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
BALZIVA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
BLISOVI 24 FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
BLISOVI FE 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
BLISOVI FE 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>briellyn</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
CHATEAL EQ	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
CRYSSELLE-28	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
CYRED EQ	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
DASETTA 1/35	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
DELYLA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ELINEST	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ENSKYCE ORAL TABLET 0.15-30 MG-MCG	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ESTARYLLA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>ethynodiol diac-eth estradiol</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
FALMINA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
HAILEY 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
HAILEY 24 FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
HAILEY FE 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
HAILEY FE 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
ISIBLOOM	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JULEBER	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JUNEL 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JUNEL 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JUNEL FE 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JUNEL FE 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JUNEL FE 24	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
KALLIGA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
KELNOR 1/35	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
KELNOR 1/50	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
KURVELO	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LARIN 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LARIN 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LARIN 24 FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LARIN FE 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LARIN FE 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
LESSINA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LEVORA 0.15/30 (28)	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LOW-OGESTREL	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LUTERA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>marlissa</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
MICROGESTIN 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
MICROGESTIN 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
MICROGESTIN 24 FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
MICROGESTIN FE 1.5/30	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
MICROGESTIN FE 1/20	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
MILI	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
MONO-LINYAH	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NECON 0.5/35 (28)	\$0	QL (28 tabs/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>norethindrone acet-ethinyl est oral tablet</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
<i>norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg</i>	\$0	QL (28 tabs/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NORTREL 0.5/35 (28)	\$0	QL (28 tabs/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NORTREL 1/35 (21)	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NORTREL 1/35 (28)	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NYLIA 1/35	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NYMYO	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
OCELLA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ORSYTHIA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
PHILITH	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
PORTIA-28	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
RECLIPSEN	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
SPRINTEC 28	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
SRONYX	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
SYEDA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TARINA 24 FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
TARINA FE 1/20 EQ	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TAYTULLA	\$0	QL (28 caps/21 days); ACA (Tier 3 if ACA/Women's Prevention does not apply); F
TYBLUME ORAL TABLET CHEWABLE	\$0	QL (28 tabs/21 days); ACA (Tier 3 if ACA/Women's Prevention does not apply); F
VIENVA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
VYFEMLA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
VYLIBRA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
WERA	\$0	QL (28 tabs/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
WYMZYA FE	\$0	QL (28 tabs/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ZOVIA 1/35 (28)	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ZUMANDIMINE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
*Combination Contraceptives - Transdermal***		
XULANE	\$0	QL (3 patches/28 days); ACA (Tier 3 if ACA/Women's Prevention does not apply); F
ZAFEMY	\$0	QL (3 patches/28 days); ACA (Tier 3 if ACA/Women's Prevention does not apply); F
*Combination Contraceptives - Vaginal***		
ELURYNG	\$0	QL (1 ring/month); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>etonogestrel-ethinyl estradiol</i>	\$0	QL (1 ring/month); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
HALOETTE	\$0	QL (1 ring/month); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
*Continuous Contraceptives - Oral***		
AMETHYST	\$0	QL (21 tabs/28 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F; AL (Min 12 Years)
DOLISHALE	\$0	QL (21 tabs/28 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F; AL (Min 12 Years)
<i>levonorgestrel-ethinyl estrad oral tablet 90-20 mcg</i>	\$0	QL (21 tabs/28 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F; AL (Min 12 Years)
*Emergency Contraceptives***		
AFTERA	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
AFTERPILL	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
CURAE	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
ECONTRA ONE-STEP	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
HER STYLE	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
<i>levonorgestrel oral tablet 1.5 mg</i>	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
MY CHOICE	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
MY WAY	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
NEW DAY	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
OPCICON ONE-STEP	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F

Drug	Status	Notes
OPTION 2	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
REACT	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
TAKE ACTION	\$0	QL (3 tabs/month); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
*Extended-Cycle Contraceptives - Oral***		
AMETHIA	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ASHLYNA	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
CAMRESE	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
CAMRESE LO	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
DAYSEE	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ICLEVIA	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
INTROVALE	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JAIMIESS	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JOLESSA	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>levonorgest-eth estrad 91-day</i>	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LOJAIMIESS	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
SETLAKIN	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
SIMPESSE	\$0	QL (1 tab/day); DS (91 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
*Progestin Contraceptives - Injectable***		
<i>medroxyprogesterone acetate intramuscular suspension</i>	\$0	QL (1 dose/90 days); DS (90 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe</i>	\$0	QL (1 dose/90 days); DS (90 day supply max); ACA (Tier 1 if ACA/Women's Prevention does not apply)
*Progestin Contraceptives - Oral***		
CAMILA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
DEBLITANE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ERRIN	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
HEATHER	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
INCASSIA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
JENCYCLA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LYLEQ	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LYZA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NORA-BE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>norethindrone oral</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NORLYDA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NORLYROC	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
SHAROBEL	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
*Triphasic Contraceptives - Oral***		
<i>alyacen 7/7/7</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ARANELLE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
DASETTA 7/7/7	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
ENPRESSE-28	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LEENA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
LEVONEST	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>levonorg-eth estrad triphasic oral tablet 50-30/75-40/125-30 mcg</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>norethindron-ethinyl estrad-fe</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
<i>norgestim-eth estrad triphasic</i>	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NORTREL 7/7/7	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
NYLIA 7/7/7	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
PIRMELLA 7/7/7	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TILIA FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI FEMYNOR	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-ESTARYLLA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F

Drug	Status	Notes
TRI-LEGEST FE	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-LINYAH	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-LO-ESTARYLLA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-LO-MARZIA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-LO-MILI	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-LO-SPRINTEC	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-MILI	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-NYMYO	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-SPRINTEC	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRIVORA (28)	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-VYLIBRA	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
TRI-VYLIBRA LO	\$0	QL (28/21 days); ACA (Tier 1 if ACA/Women's Prevention does not apply); F
VELIVET	\$0	QL (28/21 days); ACA (Tier 3 if ACA/Women's Prevention does not apply); F
Endocrine And Metabolic Agents - Misc.		
*Selective Estrogen Receptor Modulators (Serms)***		
<i>raloxifene hcl</i>	\$0	QL (1 tab/day); ACA (Tier 1 if ACA does not apply)
Hematopoietic Agents		
*Folic Acid/Folates***		
<i>folic acid tablet 1 mg oral (otc)</i>	\$0	QL (2 tabs/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)

Drug	Status	Notes
<i>folic acid tablet 1 mg oral (rx)</i>	\$0	QL (2 tabs/day); ACA (Tier 1 if ACA does not apply)
<i>kp folic acid oral tablet 1 mg</i>	\$0	QL (2 tabs/day); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
Laxatives		
*Bowel Evacuant Combinations***		
GAVILYTE-G	\$0	ACA (Tier 1 if ACA does not apply)
<i>peg 3350-kcl-na bicarb-nacl</i>	\$0	ACA (Tier 1 if ACA does not apply)
<i>peg-3350/electrolytes</i>	\$0	ACA (Tier 1 if ACA does not apply)
Medical Devices And Supplies		
*Cervical Caps***		
FEMCAP	\$0	QL (3 caps/month); DS (30 day supply max); ACA (Tier 3 if ACA/Women's Prevention does not apply); F
*Condoms - Female***		
FC2 FEMALE CONDOM	\$0	QL (12 condoms/month); DS (30 day supply max); ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); F
*Condoms - Male***		
<i>aimsco lubricated</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>condoms</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
DUREX EXTRA SENSITIVE THIN	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
DUREX REALFEEL	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
FANTASY LUBRICATED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
FANTASY LUBRICATED/SPERMICIDE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
KAMELEON LUBRICATED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)

Drug	Status	Notes
KIMONO COLORS	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono micro thin</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono micro thin plus</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono plus</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono ps</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono ps plus</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono sensation</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>kimono sensation plus</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
KIMONO SPECIAL	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
K-Y ME & YOU EXTRA LUBRICATED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
K-Y ME & YOU INTENSE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>maxx</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>maxx plus</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
REALITY LATEX CONDOMS	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
REALITY LATEX/ULTRA TEXTURED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
REALITY LATEX/ULTRA THIN	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)

Drug	Status	Notes
TRUSTEX COLOR CONDOMS + LUBE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX LUB/RIBBED/STUDED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX LUB/SPERMICIDE EX ST	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX LUB/SPERMICIDE XL	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX LUBRICATED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX LUBRICATED EX LARGE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX LUBRICATED EXTRA ST	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX LUBRICATED/SPERMICIDE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX NATURAL CONDOMS + LUBE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX NON-LUBRICATED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX RIA LUB/SPERMICIDE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX RIA LUBRICATED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX RIA NON-LUBRICATED	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TRUSTEX-NONOXYNOL-9/RIB/STUD	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
*Diaphragms***		
CAYA	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
OMNIFLEX DIAPHRAGM	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
WIDE-SEAL DIAPHRAGM 60	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)

Drug	Status	Notes
WIDE-SEAL DIAPHRAGM 65	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
WIDE-SEAL DIAPHRAGM 70	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
WIDE-SEAL DIAPHRAGM 75	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
WIDE-SEAL DIAPHRAGM 80	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
WIDE-SEAL DIAPHRAGM 85	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
WIDE-SEAL DIAPHRAGM 90	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
WIDE-SEAL DIAPHRAGM 95	\$0	ACA (Tier 3 if ACA/Women's Prevention does not apply)
*Misc. Devices***		
<i>folding paddle walker</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
Minerals & Electrolytes		
*Fluoride***		
<i>sodium fluoride oral solution 1.1 (0.5 f) mg/ml</i>	\$0	ACA (Tier 1 if ACA does not apply); AL (Max 6 Years)
<i>sodium fluoride oral tablet</i>	\$0	ACA (Tier 3 if ACA does not apply); AL (Max 6 Years)
<i>sodium fluoride oral tablet chewable</i>	\$0	ACA (Tier 1 if ACA does not apply); AL (Max 6 Years)
Psychotherapeutic And Neurological Agents - Misc.		
*Smoking Deterrents***		
<i>apo-varenicline</i>	\$0	QL (2 tabs/day); ACA (Smoking deterrent product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>bupropion hcl er (smoking det)</i>	\$0	QL (2 tabs/day); ACA (Smoking deterrent product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>cvs nicotine</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>cvs nicotine polacrilex</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)

Drug	Status	Notes
<i>eq nicotine mouth/throat gum 4 mg</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>eq nicotine mouth/throat lozenge</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>eq nicotine polacrilex</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>eq nicotine step 3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>eq nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>gnp nicotine mini</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>gnp nicotine mouth/throat gum 4 mg</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>gnp nicotine polacrilex</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>gnp nicotine transdermal</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>goodsense nicotine</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
HABITROL	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>hm nicotine polacrilex mouth/throat gum</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>hm nicotine polacrilex mouth/throat lozenge 2 mg</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)

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Drug	Status	Notes
<i>hm nicotine transdermal patch 24 hour 21 mg/24hr, 7 mg/24hr</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
KLS QUIT2	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
KLS QUIT4	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
NICORETTE MOUTH/THROAT GUM 4 MG	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
NICORETTE STARTER KIT MOUTH/THROAT GUM 4 MG	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>nicotine</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>nicotine mini</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>nicotine polacrilex mini</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>nicotine polacrilex mouth/throat</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>nicotine step 1</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>nicotine step 2</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>nicotine step 3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
NICOTROL	\$0	ACA (Smoking deterrent product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)

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Drug	Status	Notes
NICOTROL NS	\$0	QL (3 units/month); ACA (Smoking deterrent product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>px stop smoking aid</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>qc nicotine transdermal system</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>ra mini nicotine</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>ra nicotine gum mouth/throat gum 2 mg, 4 mg</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>ra nicotine mouth/throat</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>ra nicotine polacrilex mouth/throat lozenge</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>ra nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>sm nicotine</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>sm nicotine polacrilex</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
THRIVE MOUTH/THROAT GUM 2 MG	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)
<i>varenicline tartrate oral tablet</i>	\$0	QL (2 tabs/day); ACA (Smoking deterrent product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 18 Years)

Drug	Status	Notes
Toxoids		
*Toxoid Combinations***		
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	\$0	QL (1.5 units per 351 days); Vaccine
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	\$0	QL (1.5 units per 351 days); Vaccine
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (1.5 units per 351 days); Vaccine
DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5	\$0	QL (3 doses/year); Vaccine
INFANRIX	\$0	QL (3 doses/year); Vaccine
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (1 dose/lifetime); Vaccine; AL (Min 4 Years and Max 6 Years)
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (3 doses/year); Vaccine; AL (Max 6 Years)
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0	Vaccine
QUADRACEL INTRAMUSCULAR SUSPENSION	\$0	QL (1 dose/lifetime); Vaccine; AL (Min 4 Years and Max 6 Years)
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (1 dose/lifetime); Vaccine; AL (Min 4 Years and Max 6 Years)
TDVAX	\$0	QL (1.5 units per 351 days); Vaccine
TENIVAC INTRAMUSCULAR INJECTABLE 5-2 LFU	\$0	QL (1.5 units per 351 days); Vaccine
VAXELIS	\$0	Vaccine; AL (Max 5 Years)
Vaccines		
*Bacterial Vaccines***		
ACTHIB	\$0	Vaccine
BEXSERO	\$0	QL (1 units per 354 days); Vaccine; AL (Min 10 Years)
HIBERIX INJECTION	\$0	Vaccine
MENACTRA INTRAMUSCULAR SOLUTION	\$0	QL (0.5 units per 354 days); Vaccine; AL (Max 23 Years)
MENQUADFI INTRAMUSCULAR SOLUTION	\$0	QL (0.5 units per 354 days); Vaccine; AL (Max 23 Years)
MENVEO	\$0	Vaccine
PEDVAX HIB INTRAMUSCULAR SUSPENSION	\$0	Vaccine
PNEUMOVAX 23	\$0	QL (1 units per 354 days); Vaccine
PREVNAR 13	\$0	QL (0.5 units per lifetime); Vaccine
PREVNAR 20	\$0	QL (0.5 units per lifetime); Vaccine
TRUMENBA	\$0	QL (1.5 units per 354 days); Vaccine; AL (Min 10 Years and Max 26 Years)
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML	\$0	Vaccine
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	\$0	Vaccine

Drug	Status	Notes
VAXCHORA	\$0	Vaccine
VAXNEUVANCE	\$0	QL (0.5 units per lifetime); Vaccine
VIVOTIF	\$0	QL (4 units per month); Vaccine
*Viral Vaccine Combinations***		
M-M-R II INJECTION	\$0	Vaccine
PRIORIX	\$0	Vaccine
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (3 units per 354 days); Vaccine; AL (Min 18 Years)
*Viral Vaccines***		
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	\$0	QL (1 units per 274 days); Vaccine; AL (Min 6 Months)
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	QL (0.5 units per 274 days); Vaccine; AL (Min 6 Months)
DENGVAXIA	\$0	Vaccine
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	\$0	Vaccine
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	\$0	Vaccine
FLUAD QUADRIVALENT	\$0	QL (0.5 units per 274 days); Vaccine; AL (Min 65 Years)
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (0.5 units per 274 days); Vaccine; AL (Min 6 Months)
FLUBLOK QUADRIVALENT	\$0	QL (0.5 units per 274 days); Vaccine; AL (Min 18 Years)
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION	\$0	QL (1 units per 274 days); Vaccine; AL (Min 6 Months)
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (1 units per 274 days); Vaccine
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	QL (0.5 units per 274 days); Vaccine; AL (Min 6 Months)
FLUMIST QUADRIVALENT	\$0	QL (2 units per 274 days); Vaccine; AL (Min 6 Months)
FLUZONE HIGH-DOSE QUADRIVALENT	\$0	QL (0.7 units per 274 days); Vaccine; AL (Min 65 Years)
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION	\$0	QL (1 units per 274 days); Vaccine; AL (Min 6 Months)
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	QL (0.5 units per 274 days); Vaccine; AL (Min 6 Months)
GARDASIL 9	\$0	QL (1.5 units per lifetime); Vaccine; AL (Min 9 Years and Max 45 Years)
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML	\$0	QL (4 units per lifetime); Vaccine
HAVRIX INTRAMUSCULAR SUSPENSION 720 EL U/0.5ML	\$0	QL (2 units per lifetime); Vaccine
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	\$0	QL (1.5 units per 354 days); Vaccine; AL (Min 18 Years)
IXIARO	\$0	Vaccine

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Drug	Status	Notes
<i>novavax covid-19 vaccine</i>	\$0	Vaccine
PREHEVBRIO	\$0	Vaccine
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	\$0	Vaccine
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	\$0	Vaccine
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	\$0	QL (2 units per lifetime); Vaccine; AL (Min 50 Years)
<i>stamaril</i>	\$0	Vaccine
TICOVAC	\$0	Vaccine
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML	\$0	QL (2 units per lifetime); Vaccine
VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML	\$0	QL (4 units per lifetime); Vaccine
VARIVAX	\$0	QL (1 units per 354 days); Vaccine
YF-VAX SUBCUTANEOUS INJECTABLE	\$0	Vaccine
Vaginal And Related Products		
*Spermicides***		
ENCARE VAGINAL SUPPOSITORY	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
OPTIONS GYNOL II CONTRACEPTIVE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
TODAY SPONGE	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
VCF VAGINAL CONTRACEPTIVE VAGINAL GEL	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
Vitamins		
*Vitamin D***		
<i>aqueous vitamin d oral liquid 10 mcg/ml</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
BABY DDROPS ORAL LIQUID 10 MCG /0.028ML, 10 MCG/0.03ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>baby super daily d3 oral liquid 10 mcg /0.028ml</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

Drug	Status	Notes
<i>baby vitamin d3 oral liquid 10 mcg /0.028ml</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
BIO-D-MULSION FORTE ORAL LIQUID 50 MCG/0.04ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
BIO-D-MULSION ORAL LIQUID 10 MCG/0.04ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
BPROTECTED PEDIA D-VITE ORAL LIQUID 10 MCG/ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>cvs d3 oral capsule 10 mcg (400 unit), 125 mcg (5000 ut), 25 mcg (1000 ut), 50 mcg (2000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>cvs vitamin d3 oral capsule 250 mcg (10000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>cvs vitamin d3 oral tablet chewable 25 mcg (1000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d 1000 oral capsule</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d 1000 oral tablet chewable</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d 10000</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d 5000 oral capsule</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d-1000 extra strength</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d2000 ultra strength</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

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Drug	Status	Notes
<i>d3 2000</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 5000</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 adult</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 baby drops</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 high potency</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 kids</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 maximum strength oral capsule</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 oral tablet</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 oral tablet chewable 10 mcg (400 unit), 50 mcg (2000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3 oral tablet chewable 62.5 mcg (2500 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
<i>d3 super strength</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d3-1000</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d-3-5</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

Drug	Status	Notes
D3-50	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d-400</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d-5000</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
DDROPS BOOSTER ORAL LIQUID 15 MCG /0.028ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
DDROPS ORAL LIQUID 25 MCG /0.028ML, 25 MCG/0.03ML, 50 MCG /0.028ML, 50 MCG/0.03ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
DECARA ORAL CAPSULE 1.25 MG (50000 UT), 625 MCG (25000 UT)	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>delta d3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
DIALYVITE VITAMIN D 5000	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
DIALYVITE VITAMIN D3 MAX	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
D-VI-SOL ORAL LIQUID 10 MCG/ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>d-vite pediatric</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>eq d3 drops infants/childrens</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>eq1 vitamin d3 gummies</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

Drug	Status	Notes
<i>eql vitamin d3 oral capsule</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>finest nutrition vitamin d3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp d 1000</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp d 2000</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp vitamin d maximum strength</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp vitamin d oral tablet 25 mcg (1000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp vitamin d oral tablet chewable</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp vitamin d super strength</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp vitamin d3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>gnp vitamin d3 extra strength</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
HEALTHY KIDS VITAMIN D3	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>hm vitamin d3 oral tablet 25 mcg (1000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
KIDS FIRST VITAMIN D3 GUMMIES	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

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Drug	Status	Notes
<i>kls d3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>kp vitamin d oral capsule 25 mcg (1000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>kp vitamin d oral tablet chewable</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>kp vitamin d3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
MAXIMUM D3 ORAL CAPSULE 325 MCG (13000 UT)	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
MOMMY'S BLISS VIT D ORGANIC ORAL LIQUID 10 MCG /0.036ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>nat-rul vitamin d</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>natural vitamin d-3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
OPTIMAL D3	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
OPTIMAL D3 M	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
OPURITY VITAMIN D	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>pharmacist choice d-vitamin</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
PRONUTRIENTS VITAMIN D3	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

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Drug	Status	Notes
<i>qc vitamin d3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>ra vitamin d-3</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
RADIANCE PLATINUM VITAMIN D3	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
REPLESTA	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
REPLESTA NX	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>sm vitamin d</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>sm vitamin d3 oral capsule 125 mcg (5000 ut), 50 mcg, 50 mcg (2000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>sm vitamin d3 oral tablet</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>super daily d3 oral liquid 25 mcg /0.028ml, 50 mcg /0.028ml</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
THERA-D 2000	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
THERA-D 4000	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
THERA-D RAPID REPLETION	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
UPSPRING BABY VIT D ORAL LIQUID 10 MCG /0.025ML	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

Drug	Status	Notes
<i>vitachew vitamin d3 oral tablet chewable 25 mcg (1000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
VITAJEY DAILY D GUMMIES	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
VITAMELTS VITAMIN D	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d (cholecalciferol) oral capsule</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d (cholecalciferol) oral tablet</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d high potency</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d infant oral liquid 10 mcg/ml</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d oral capsule 50 mcg (2000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d oral liquid 10 mcg/ml</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d oral tablet 25 mcg (1000 ut), 50 mcg (2000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
VITAMIN D-1000 MAX ST	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 adult gummies</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 extra strength oral tablet chewable 25 mcg (1000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

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Drug	Status	Notes
<i>vitamin d3 gummies adult</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 gummies oral tablet chewable 25 mcg (1000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
VITAMIN D3 IMMUNE HEALTH	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 maximum strength</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d-3 oral capsule</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 oral capsule 1.25 mg (50000 ut), 10 mcg (400 unit), 125 mcg (5000 ut), 25 mcg (1000 ut), 250 mcg (10000 ut), 50 mcg (2000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 oral liquid 10 mcg/ml, 125 mcg/0.5ml, 125 mcg/ml, 25 mcg/spray, 30 mcg/15ml</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 oral tablet 10 mcg (400 unit), 125 mcg (5000 ut), 20 mcg (800 unit), 25 mcg, 25 mcg (1000 ut), 250 mcg (10000 ut), 50 mcg (2000 ut), 75 mcg (3000 ut)</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 oral tablet chewable</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 oral tablet dispersible</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
<i>vitamin d3 ultra potency oral tablet 1250 mcg</i>	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
WEEKLY-D	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
YUMVS VITAMIN D3	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

Drug	Status	Notes
YUMVS VITAMIN D3 ZERO ORAL TABLET CHEWABLE 25 MCG (1000 UT)	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)
YUMVS VITAMIN D3 ZERO ORAL TABLET CHEWABLE 62.5 MCG (2500 UT)	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.)
YUMVSKIDS VITAMIN D3 ZERO ORAL TABLET CHEWABLE 25 MCG (1000 UT)	\$0	ACA (OTC product only covered under ACA prevention benefit; otherwise excluded.); AL (Min 65 Years)

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BOOSTRIX	29	<i>drosiprone-ethinyl estradiol</i>	12
BPROTECTED PEDIA D-VITE	32	DUREX EXTRA SENSITIVE THIN	22
<i>brillyn</i>	11	DUREX REALFEEL	22
<i>bupropion hcl er (smoking det)</i>	25	D-VI-SOL	34
CAMILA	19	<i>d-vite pediatric</i>	34
CAMRESE	18	ECONTRA ONE-STEP	17
CAMRESE LO	18	ECOTRIN	6
		ECOTRIN ARTHRTIS PAIN	6
		ECOTRIN LOW STRENGTH	6
		ELINEST	12
		ELURYNG	16
		<i>emtricitabine-tenofovir df</i>	10
		ENCARE	31
		ENGERIX-B	30
		ENPRESSE-28	20
		ENSKYCE	12
		<i>eq aspirin</i>	6
		<i>eq aspirin adult low dose</i>	6
		<i>eq aspirin low dose</i>	6
		<i>eq d3 drops infants/childrens</i>	34
		<i>eq nicotine</i>	26
		<i>eq nicotine polacrilex</i>	26
		<i>eq nicotine step 3</i>	26
		<i>eq aspirin ec</i>	6
		<i>eq aspirin low dose</i>	6
		<i>eq vitamin d3</i>	35
		<i>eq vitamin d3 gummies</i>	34
		ERRIN	19
		ESTARYLLA	12
		<i>ethynodiol diac-eth estradiol</i>	12
		<i>etonogestrel-ethinyl estradiol</i>	16
		<i>exemestane</i>	10
		FALMINA	12
		FANTASY LUBRICATED	22
		FANTASY	
		LUBRICATED/SPERMICIDE	22
		FC2 FEMALE CONDOM	22
		FEMCAP	22
		<i>finest nutrition vitamin d3</i>	35
		FLUAD QUADRIVALENT	30
		FLUARIX QUADRIVALENT	30
		FLUBLOK QUADRIVALENT	30
		FLUCELVAX QUADRIVALENT	30
		FLULAVAL QUADRIVALENT	30
		FLUMIST QUADRIVALENT	30
		FLUZONE HIGH-DOSE	
		QUADRIVALENT	30
		FLUZONE QUADRIVALENT	30
		<i>folding paddle walker</i>	25
		<i>folic acid</i>	21, 22
		GARDASIL 9	30
		GAVILYTE-G	22
		<i>genuine aspirin</i>	6
		<i>gnp adult aspirin low strength</i>	6
		<i>gnp aspirin</i>	6, 7
		<i>gnp aspirin low dose</i>	6
		<i>gnp d 1000</i>	35
		<i>gnp d 2000</i>	35
		<i>gnp nicotine</i>	26
		<i>gnp nicotine mini</i>	26
		<i>gnp nicotine polacrilex</i>	26
		<i>gnp vitamin d</i>	35
		<i>gnp vitamin d maximum strength</i>	35
		<i>gnp vitamin d super strength</i>	35
		<i>gnp vitamin d3</i>	35
		<i>gnp vitamin d3 extra strength</i>	35

<i>goodsense aspirin</i>	7	KLS QUIT4	27	<i>nicotine mini</i>	27
<i>goodsense aspirin adults</i>	7	<i>kp aspirin</i>	7	<i>nicotine polacrilex</i>	27
<i>goodsense aspirin low dose</i>	7	<i>kp folic acid</i>	22	<i>nicotine polacrilex mini</i>	27
<i>goodsense nicotine</i>	26	<i>kp vitamin d</i>	36	<i>nicotine step 1</i>	27
HABITROL	26	<i>kp vitamin d3</i>	36	<i>nicotine step 2</i>	27
HAILEY 1.5/30	12	KURVELO	13	<i>nicotine step 3</i>	27
HAILEY 24 FE	12	K-Y ME & YOU EXTRA		NICOTROL	27
HAILEY FE 1.5/30	12	LUBRICATED	23	NICOTROL NS	28
HAILEY FE 1/20	12	K-Y ME & YOU INTENSE	23	NORA-BE	19
HALOETTE	16	LAGEVRIO	10	<i>norethin ace-eth estrad-fe</i>	14
HAVRIX	30	LARIN 1.5/30	13	<i>norethindrone</i>	19
HEALTHY KIDS VITAMIN D3	35	LARIN 1/20	13	<i>norethindrone acet-ethinyl est</i>	14
HEATHER	19	LARIN 24 FE	13	<i>norethindron-ethinyl estrad-fe</i>	20
<i>h-e-b aspirin</i>	7	LARIN FE 1.5/30	13	<i>norethin-eth estradiol-fe</i>	15
HEPLISAV-B	30	LARIN FE 1/20	13	<i>norgestimate-eth estradiol</i>	15
HER STYLE	17	LEENA	20	<i>norgestim-eth estrad triphasic</i>	20
HIBERIX	29	LESSINA	14	NORLYDA	19
<i>hm adult aspirin</i>	7	<i>letrozole</i>	10	NORLYROC	19
<i>hm aspirin</i>	7	LEVONEST	20	NORTREL 0.5/35 (28)	15
<i>hm aspirin ec</i>	7	<i>levonorgest-eth estrad 91-day</i>	18	NORTREL 1/35 (21)	15
<i>hm aspirin ec low dose</i>	7	<i>levonorgestrel</i>	17	NORTREL 1/35 (28)	15
<i>hm nicotine</i>	27	<i>levonorgestrel-ethinyl estrad</i>	14, 17	NORTREL 7/7/7	20
<i>hm nicotine polacrilex</i>	26	<i>levonorg-eth estrad triphasic</i>	20	<i>novavax covid-19 vaccine</i>	31
<i>hm vitamin d3</i>	35	LEVORA 0.15/30 (28)	14	NYLIA 1/35	15
ICLEVIA	18	LOJAIMIESS	18	NYLIA 7/7/7	20
INCASSIA	19	LOW-OGESTREL	14	NYMYO	15
INFANRIX	29	LUTERA	14	OCELLA	15
INTROVALE	18	LYLEQ	19	OMNIFLEX DIAPHRAGM	24
ISIBLOOM	13	LYZA	19	OPCICON ONE-STEP	17
IXIARO	30	<i>marlissa</i>	14	OPTIMAL D3	36
JAIMIESS	18	MAXIMUM D3	36	OPTIMAL D3 M	36
JENCYCLA	19	<i>maxx</i>	23	OPTION 2	18
JOLESSA	18	<i>maxx plus</i>	23	OPTIONS GYNOL II	
JULEBER	13	MEDI-FIRST ASPIRIN	7	CONTRACEPTIVE	31
JUNEL 1.5/30	13	MEDIQUE ASPIRIN	7	OPURITY VITAMIN D	36
JUNEL 1/20	13	<i>medroxyprogesterone acetate</i>	19	ORSYTHIA	15
JUNEL FE 1.5/30	13	<i>meijer aspirin ec</i>	8	PEDIARIX	29
JUNEL FE 1/20	13	MENACTRA	29	PEDVAX HIB	29
JUNEL FE 24	13	MENQUADFI	29	<i>peg 3350-kcl-na bicarb-nacl</i>	22
KALLIGA	13	MENVEO	29	<i>peg-3350/electrolytes</i>	22
KAMELEON LUBRICATED	22	MICROGESTIN 1.5/30	14	PENTACEL	29
KARIVA	10	MICROGESTIN 1/20	14	<i>pharmacist choice d-vitamin</i>	36
KELNOR 1/35	13	MICROGESTIN 24 FE	14	PHILITH	15
KELNOR 1/50	13	MICROGESTIN FE 1.5/30	14	PIMTREA	10
KIDS FIRST VITAMIN D3		MICROGESTIN FE 1/20	14	PIRMELLA 7/7/7	20
GUMMIES	35	MILI	14	PNEUMOVAX 23	29
<i>kimono</i>	22	<i>mm aspirin</i>	8	PORTIA-28	15
KIMONO COLORS	23	M-M-R II	30	PREHEVBRIO	31
<i>kimono micro thin</i>	23	MOMMY'S BLISS VIT D		PREVNAR 13	29
<i>kimono micro thin plus</i>	23	ORGANIC	36	PREVNAR 20	29
<i>kimono plus</i>	23	MONO-LINYAH	14	PRIORIX	30
<i>kimono ps</i>	23	MY CHOICE	17	PRONUTRIENTS VITAMIN D3	36
<i>kimono ps plus</i>	23	MY WAY	17	<i>px aspirin</i>	8
<i>kimono sensation</i>	23	<i>nat-rul vitamin d</i>	36	<i>px enteric aspirin</i>	8
<i>kimono sensation plus</i>	23	<i>natural vitamin d-3</i>	36	<i>px stop smoking aid</i>	28
KIMONO SPECIAL	23	NECON 0.5/35 (28)	14	<i>qc aspirin</i>	8
KINRIX	29	NEW DAY	17	<i>qc aspirin low dose</i>	8
<i>kls aspirin low dose</i>	7	NICORETTE	27	<i>qc childrens aspirin</i>	8
<i>kls d3</i>	36	NICORETTE STARTER KIT	27	<i>qc enteric aspirin</i>	8
KLS QUIT2	27	<i>nicotine</i>	27	<i>qc nicotine transdermal system</i>	28

<i>qc vitamin d3</i>	37	THERA-D 4000	37	VITAMELTS VITAMIN D	38
QUADRACEL	29	THERA-D RAPID REPLETION	37	<i>vitamin d</i>	38
<i>ra aspirin</i>	9	THRIVE	28	<i>vitamin d (cholecalciferol)</i>	38
<i>ra aspirin adult low dose</i>	8	TICOVAC	31	<i>vitamin d high potency</i>	38
<i>ra aspirin adult low strength</i>	8	TILIA FE	20	<i>vitamin d infant</i>	38
<i>ra aspirin childrens</i>	8	TODAY SPONGE	31	VITAMIN D-1000 MAX ST	38
<i>ra aspirin ec</i>	8	TRI FEMYNOR	20	<i>vitamin d3</i>	39
<i>ra aspirin ec adult low st</i>	8	TRI-ESTARYLLA	20	<i>vitamin d-3</i>	39
<i>ra mini nicotine</i>	28	TRI-LEGEST FE	21	<i>vitamin d3 adult gummies</i>	38
<i>ra nicotine</i>	28	TRI-LINYAH	21	<i>vitamin d3 extra strength</i>	38
<i>ra nicotine gum</i>	28	TRI-LO-ESTARYLLA	21	<i>vitamin d3 gummies</i>	39
<i>ra nicotine polacrilex</i>	28	TRI-LO-MARZIA	21	<i>vitamin d3 gummies adult</i>	39
<i>ra pain relief aspirin</i>	9	TRI-LO-MILI	21	VITAMIN D3 IMMUNE HEALTH	39
<i>ra vitamin d-3</i>	37	TRI-LO-SPRINTEC	21	<i>vitamin d3 maximum strength</i>	39
RADIANCE PLATINUM VITAMIN		TRI-MILI	21	<i>vitamin d3 ultra potency</i>	39
D3	37	TRI-NYMYO	21	VIVOTIF	30
<i>raloxifene hcl</i>	21	TRI-SPRINTEC	21	VOLNEA	10
REACT	18	TRIVORA (28)	21	VYFEMLA	16
REALITY LATEX CONDOMS	23	TRI-VYLIBRA	21	VYLIBRA	16
REALITY LATEX/ULTRA		TRI-VYLIBRA LO	21	WEEKLY-D	39
TEXTURED	23	TRUMENBA	29	WERA	16
REALITY LATEX/ULTRA THIN	23	TRUSTEX COLOR CONDOMS +		WIDE-SEAL DIAPHRAGM 60	24
RECLIPSEN	15	LUBE	24	WIDE-SEAL DIAPHRAGM 65	25
RECOMBIVAX HB	31	TRUSTEX		WIDE-SEAL DIAPHRAGM 70	25
REPLESTA	37	LUB/RIBBED/STUDED	24	WIDE-SEAL DIAPHRAGM 75	25
REPLESTA NX	37	TRUSTEX LUB/SPERMICIDE EX		WIDE-SEAL DIAPHRAGM 80	25
<i>sb aspirin</i>	9	ST	24	WIDE-SEAL DIAPHRAGM 85	25
<i>sb aspirin ec</i>	9	TRUSTEX LUB/SPERMICIDE XL	24	WIDE-SEAL DIAPHRAGM 90	25
<i>sb childrens aspirin</i>	9	TRUSTEX LUBRICATED	24	WIDE-SEAL DIAPHRAGM 95	25
<i>sb low dose asa ec</i>	9	TRUSTEX LUBRICATED EX		WYMZYA FE	16
SETLAKIN	18	LARGE	24	XULANE	16
SHAROBEL	20	TRUSTEX LUBRICATED EXTRA		YF-VAX	31
SHINGRIX	31	ST	24	YUMVS VITAMIN D3	39
SIMLIYA	10	TRUSTEX		YUMVS VITAMIN D3 ZERO	40
SIMPESSE	19	LUBRICATED/SPERMICIDE	24	YUMVSKIDS VITAMIN D3 ZERO ...	40
<i>sm aspirin adult low strength</i>	9	TRUSTEX NATURAL CONDOMS		ZAFEMY	16
<i>sm aspirin ec</i>	9	+ LUBE	24	ZOVIA 1/35 (28)	16
<i>sm aspirin ec low strength</i>	9	TRUSTEX NON-LUBRICATED	24	ZUMANDIMINE	16
<i>sm aspirin low dose</i>	9	TRUSTEX RIA LUB/SPERMICIDE	24		
<i>sm childrens aspirin</i>	9	TRUSTEX RIA LUBRICATED	24		
<i>sm nicotine</i>	28	TRUSTEX RIA NON-			
<i>sm nicotine polacrilex</i>	28	LUBRICATED	24		
<i>sm vitamin d</i>	37	TRUSTEX-NONOXYNOL-			
<i>sm vitamin d3</i>	37	9/RIB/STUD	24		
<i>sodium fluoride</i>	25	TWINRIX	30		
SPRINTEC 28	15	TYBLUME	16		
SRONYX	15	TYPHIM VI	29		
ST JOSEPH ASPIRIN	9	UPSPRING BABY VIT D	37		
ST JOSEPH LOW DOSE	9	VAQTA	31		
<i>stamaril</i>	31	<i>varenicline tartrate</i>	28		
<i>super daily d3</i>	37	VARIVAX	31		
SYEDA	15	VAXCHORA	30		
TAKE ACTION	18	VAXELIS	29		
<i>tamoxifen citrate</i>	10	VAXNEUVANCE	30		
TARINA 24 FE	15	VCF VAGINAL CONTRACEPTIVE	31		
TARINA FE 1/20 EQ	16	VELIVET	21		
TAYTULLA	16	VIENVA	16		
TDVAX	29	<i>viorele</i>	10		
TENIVAC	29	<i>vitachew vitamin d3</i>	38		
THERA-D 2000	37	VITAJoy DAILY D GUMMIES	38		

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