# 2018 NO COST-SHARE PREVENTIVE MEDICATIONS

### by drug category

At Cigna, your health and well-being is important to us. We want you to live life to the fullest. Taking your preventive medications regularly can help you get - and stay - healthy.

# Health care reform requires coverage of certain preventive medications at no cost-share to you

Health care reform under the Patient Protection and Affordable Care Act (PPACA) requires plans to cover certain preventive medications and products at 100%, or no cost-share (\$0) to you.\* The U.S. Preventive Services Task Force and the Institute of Medicine provides guidance on which drug classes should be covered. These recommendations are meant to help prevent disease, as well as meet women's unique health care needs.

### **Preventive medication coverage**

This drug list shows the prescription medications and over-the-counter medicines (available without a prescription) and products available to you at no cost-share (copay, coinsurance and/or deductible). This list is updated as the U.S. Preventive Services Task Force makes new recommendations.

You should log into **myCigna.com** or check your plan materials to learn more about how your plan covers preventive medications. You can also use the Drug Cost tool to estimate how much your medications may cost.

### Religious exemptions to the coverage of contraceptives

PPACA allows certain employers to exclude contraceptives from coverage due to religious beliefs. If you're a woman with medical coverage though one of these employers, Cigna will let you know that your plan does not cover these medications. Where required by law, Cigna will offer to pay for your contraceptives and/or certain medications at no extra cost to you (if you choose). This coverage is private and confidential and isn't administered, funded by or connected in any way to your employer's health coverage.

### Choosing the right preventive medication

There are many preventive medications covered under PPACA. You should talk with your doctor to find out which medication or product may be right for you. If your doctor feels a certain contraceptive medication or smoking cessation medication on this list isn't right for you, ask your doctor to call us. Together, we'll look for other medications and products (not on this list) that may be available at no cost-share to you. For preventive medications (including over-the-counter medicines) to be covered, you'll need to get a prescription from your doctor.

### Together, all the way.



<sup>\*</sup> The no-cost share preventive coverage under the Affordable Care Act remains in effect at this time. Should health care reform change, we will review the guidance at that time.

This drug list shows the prescription medications and over-the-counter medicines and products available to you at no cost-share under PPACA. This list is updated as the U.S. Preventive Services Task Force makes new recommendations.

### **Aspirin Products**

Ascriptin Aspir 81 aspirin aspirin EC Aspir-low

Bayer chewable aspirin

buffered aspirin

Bufferin

children's aspirin

Ecotrin EcPirin

Lite Coat Aspirin low-dose aspirin EC tri-buffered aspirin

#### **Breast Cancer Prevention**

### Available to females

raloxifene tamoxifen

### **Barrier Contraception**

#### Available to females

Caya Contoured Conceptrol

FC2 Female Condom

Femcap Gynol II

Today Contraceptive Sponge

**VCF** 

Wide Seal Diaphragm

# **Bowel Prep Products for Colorectal Cancer Screenings**

### Available to males and females 50-75 years of age

Alophen bisacodyl Bisa-lax Clearlax

Colyte With Flavor Packets

Correctol Ducodyl Dulcolax Gavilax Gavilyte-C Gavilyte-G Gavilyte-N Gentle laxative

Gentlelax
Gialax
Glycolax
GoLytely
Healthylax
Laxaclear
laxative tablet

Miralax Moviprep Natura-lax

Nulytely With Flavor Packs

Osmoprep peg 3350

peg 3350-electrolyte peg 3350 with flavor packs

peg-prep Powderlax Prepopik Purelax Smoothlax Suprep

TriLyte with flavor packets

women's laxative

#### Cholesterol Medications\*

### Available to males and females 40-75 years of age

atorvastatin 10mg, 20mg fluvastatin 20mg, 40mg fluvastatin ER 80mg lovastatin 20, 40mg

pravastatin 10mg, 20mg, 40mg,

80 mg

rosuvastatin 5mg, 10mg

simvastatin 10 mg, 20mg, 40 mg

### **Emergency Contraception**

#### Available to females

Aftera Econtra EZ Ella

Fallback solo levonorgestrel

My Way

Next Choice One Dose

Opcicon One-Step

Option 2 React Take Action

### **Hormonal Contraception^\***

#### Available to females

Altavera
Alyacen
Amethia
Amethia LO
Apri
Aranelle
Ashlyna
Aubra
Aviane

Aviane
Azurette
Balziva
Bekyree
Blisovi 24 FE
Blisovi FE
Briellyn
Camila
Camrese
Camrese lo
Caziant

Chateal
Cryselle
Cyclafem
Cyred
Dasetta
Daysee
Deblitane
Delyla

desogestrel-ethinyl estradiol desogestr-eth estrad eth estra drospirenone-eth estra-levomef drospirenone-ethinyl estradiol

Elinest
Emoquette
Enpresse
Enskyce
Errin
Estarylla

ethynodiol-ethinyl estradiol

Falmina Fayosim

<sup>+</sup> For plans renewing on or after November 1, 2017, these medications are covered at no cost (\$0) as preventive medications under the Patient Protection and Affordable Care Act (PPACA). This means that, as of your plan's renewal date, you won't pay any money to fill a prescription for these medications. PPACA coverage requirements do not apply to all plans; for those plans, you'll have to pay your plan's preventive cost-share to fill these medications. To find out how your plan covers PPACA preventive medications, log into myCigna.com and use the Drug Cost tool or check your plan materials.

### **Hormonal Contraception^\***

(continued)

Femynor Gianvi Gildagia Heather introvale Isibloom Jencycla Jolessa Jolivette Juleber Junel Junel FE Junel FE 24 Kaitlib FE Kariva Kelnor 1-35 Kimidess Kurvelo

Larin 24 FE Larin FE Larissia Layolis FE Leena Lessina levonest

Larin

levonorgestrel-eth estradiol levonorg-eth estrad eth estrad

Levora-28 Lomedia 24 FE

Loryna low-ogestrel Lutera Lyza Marlissa Mibelas 24 FE

Microgestin
Microgestin 24 FE
Microgestin FE
Mono-Linyah
Mononessa
Myzilra
Necon

Nora-be norethindrone

Nikki

norethindron-ethinyl estradiol norethin-eth estra-ferrous fum norgestimate-ethinyl estradiol Norlyda Norlyroc Nortrel Ocella Orsythia Philith Pimtrea Pirmella

Pirmella
Portia
Previfem
Quasense
Rajani
Reclipsen
Rivelsa
Setlakin
Sharobel
Sprintec
Sronyx
Syeda
Tarina FE
Tilia FE

Tri-Estarylla Tri-Legest FE Tri-Linyah Tri-Lo-Estarylla Tri-Lo-Marzia

Tri-Lo-Sprintec

Tri Femynor

Trinessa
Trinessa LO
Tri-Previfem
Tri-Sprintec
Trivora-28
Velivet
Vestura
Vienva
Viorele
Vyfemla

Wymzya FE Xulane Zarah Zenchent Zenchent FE Zovia 1-35e Zovia 1-50e

Wera

^ If your doctor feels these medications aren't right for you, ask him/her to call us. There may be other brands available at no

cost-share to you

\* Generic hormonal contraceptives are available at no cost-share to you, even though they may not be listed here

### Fall Prevention/Vitamin D Supplementation

Available to adults 65 years of age and older to prevent falls

Baby D Drops Baby vitamin D3

D3-2000 D3-50 D drops Decara Delta D3

Dialyvite Vitamin D3 Max

D-vi-sol D-vita Just D

Kids vitamin D3 Maximum D3 Optimal D3 Optimal D3 M Replesta Replesta NX Super Daily D3

Thera-D Vitajoy daily D vitamin D vitamin D3 vitamin D-400

### **Folic Acid Supplementation**

Available to females (Only includes products containing 0.4 mg-0.8 mg of folic acid)

Daily prenatal

FA-8 folic acid KPN

One daily prenatal Perry Prenatal Prenatal

Prenatal complete

Prenatal formula
Prenatal Formula-DHA
Prenatal multi + DHA
Prenatal multivitamin
Prenatal multivitamin-DHA

Prenatal vitamin

Right Step prenatal vitamins

Urosex

### Pediatric Multivitamins Containing Fluoride and Fluoride Supplements

### Available to males and females six months - six years of age

Escavite Escavite D Floriva 0.25mg, 0.5mg Floriva drops Fluorabon Fluor-a-Day fluoride 0.25mg, 0.5mg Fluoritab Flura-Drops Ludent fluoride 0.25mg, 0.5mg multivitamin-iron-fluoride multivitamin with fluoride MVC-fluoride 0.25mg, 0.5mg Poly-Vi-Flor 0.25mg, 0.5mg Poly-Vi-Flor FS 0.25mg, 0.5mg Poly-Vi-Flor with Iron 0.25mg, 0.5mg Poly-vi-sol with Iron

Poly-vita with iron
polyvitamin with iron
polyvitamin-fluoride
Quflora ped drop
sodium fluoride 0.25mg, 0.5mg
Texavite LQ
Tri-vi-flor
tri-vit with fluoride-iron
tri-vitamin with fluoride drops
vitamins A, C, D and fluoride

## Pediatric Iron-Containing Products/Fluoride Supplementation

### Available to males and females six months - 12 months of age

children's iron
Fer-in-sol
fer-iron
children's ferrous sulfate
lcar
lronup
Novaferrum drops
Wee Care

### **Smoking Cessation^\***

#### Quantity limits apply

bupropion SR 150mg (generic for Zyban)
nicoderm CQ
Nicorelief
Nicorette
nicotine gum
nicotine lozenge
nicotine patch
NTS
Quit 2
Quit 4

stop smoking aid

- ^ If your doctor feels these medications aren't right for you, ask him/her to call us. There may be other brands available at no costshare to you
- \* Generic nicotine replacement therapy (known as "store-brands" are available at no cost-share to you, even though they may not be listed here)



Cigna reserves the right to make changes to this drug list without notice. Your plan may cover additional medications; please refer to your enrollment materials for details. Cigna does not take responsibility for any medication decisions made by the doctor or pharmacist. Cigna may receive payments from manufacturers of certain preferred brand medications, and in limited instances, certain non-preferred brand medications, that may or may not be shared with your plan depending on its arrangement with Cigna. Depending upon plan design, market conditions, the extent to which manufacturer payments are shared with your plan and other factors as of the date of service, the preferred brand medication may or may not represent the lowest-cost brand medication within its class for you and/or your plan.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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