Preventive care can help keep you healthy and may even save your life. Getting routine health exams and screenings can help catch problems early, when they’re easier to treat. And getting the right preventive care services can help you manage your health conditions and stay healthy.

Under the Affordable Care Act (ACA), pharmacy benefits must cover certain categories of preventive care drugs and products at 100%. That means you don’t have to pay a share of the cost—no copay, deductible or percentage of the cost (coinsurance).

**How do I get these drugs at no cost?**

Talk with your doctor about choosing the medication or product that’s right for you. To get these preventive drugs, including over-the-counter (OTC) drugs or products:

- They must be right for your age and condition.
- You’ll need to get a prescription from your doctor (even for OTC products).
- Remember, only you and your doctor can decide on the medications you need and what’s best for your health.

**Preventive drugs and products, by category**

Here’s a list of medications Anthem plans will cover with no cost-share for you under the ACA. Keep in mind that this list can change. Brand-name drugs are listed with a first capital letter. Non-brand drugs (generics) are in lowercase letters.

### ASPIRIN

Coverage includes generic over-the-counter 81mg and 325mg aspirin products to prevent preeclampsia in pregnant women and to prevent cardiovascular disease and colorectal cancer in adults 60-69 years old.

- Adult low dose aspirin oral
- Aspirin 81 oral
- Aspirin childrens oral
- Aspirin low dose oral
- Aspirin oral
- Aspirin-trin oral
- Bayer aspirin oral
- Bufferin oral
- Children’s aspirin oral e.c. prin oral
- Ecotrin low strength oral
- Ecotrin oral
- Enteric coated aspirin oral
- Lite coat aspirin oral
- Lo-dose aspirin oral
- Tri-buffered aspirin oral

### BOWEL PREP

Coverage includes generic prescription and over-the-counter products and are limited to two (2) bowel prep kits per year for adults 50 - 75 years old.

- Alophein oral
- Bisacodyl oral
- Bisacodyl-g oral
- Citrate of magnesium oral
- Citroma oral
- Clearlax oral
- Ducodyl oral
- Fleet laxative oral
- Gavilax oral
- Gavilyte-c oral
- Gavilyte-g oral
- Gavilyte-n oral
- Gentle laxative oral
- Gentile laxal oral
- Glycolax oral
- Laxaclear oral
- Laxalyx oral
- Laxative (bisacodyl) oral
- Laxative feminine oral
- Laxative peg 3350 oral
- Magnesium citrate oral
- Milk of magnesia concentrated oral
- Milk of magnesia oral
- Natura-lax oral
- Oral saline laxative oral
- Peg 3350-electrolytes oral
- Peg 3350 oral
- Peg-electrolyte soln oral
- Peg-prep oral
- Phosphate laxative oral
- Polyethylene glycol 3350 oral
- Powder lax oral
- Purelax oral
- Smooth lax oral
- Trilyte with flavor packets oral

### CARDIOVASCULAR

Full coverage for low-to-moderate dose generic statins will be limited to members 40-75 years old with one or more cardiovascular risk factor such as dyslipidemia, diabetes, hypertension, or smoking but who have not experienced a cardiovascular disease event.

- Aторvastatin oral
- Fluvastatin oral
- Lovastatin oral
- Pravastatin oral
- Rosuvastatin oral
- Simvastatin oral

### BREAST CANCER

You may be required to get preapproval for the services associated with the drugs in this category.

-Raloxifene oral
- Soltamox oral

### CONTRACEPTION

This benefit also applies to those younger than age 19.

- A cost share may apply for other prescription contraceptives, based on your drug benefits.
- Your cost share may be waived if your doctor decides that using the multisource brand is medically necessary.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Formulation</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>
ACA Preventive Care Drug List

chateau oral
chateau eq oral
Conceptril Vaginal
crysell 7/7/7 (28) oral
cyclafem 1/35 (28) oral
cyclafem 7/7/7 (28) oral
cyred oral
cyred eq oral
daseta 7/7/7 (28) oral
daseta 1/35 (28) oral
daysee oral
debiltane oral
delya (28) oral
desog-e.estradiol/ e.estradiol oral
desogestrel-ethinyl estradiol oral
drospirenone- e.estradiol-lm.fao oral
drospirenone-ethinyl estradiol oral
econtra 1/20 oral
econtra ez oral
econtra one-step oral
eliest oral
Elia Oral
eluryng ring
emoquette oral
enpresse oral
enskye oral
errin oral
estarylia oral
etonogestrel/ethinyl estradiol
ethynodiol diac-eth estradiol oral
fallback solo oral
falmina (28) oral
fayosim oral
Fc2 Female Condom
Femcap Vaginal
femynor oral
gianvi (28) oral
gildagia oral
gildess oral
gildess 24 fe oral
gildess fe oral
gynol li vaginal
hailey 24 fe oral
heather oral
incassia oral
introvale oral
isibloom oral
jasmoral
jencycla oral
jolessa oral
jolivette oral
juleter oral
juelen oral
juelen fe 20 (21) oral
juelen 1/50 (21) oral
juelen 1/35 (28) oral
juelen 1/20 (28) oral
juelen fe 24 oral
juelen fe 1/20 (28) oral
juelen fe 1/50 (28) oral
juelen 0.5/35 (28) oral
kurvelo oral
l norgest/e.estradiol- e.estradiol oral
larin 1/35/30 (21) oral
larin 1/20 (21) oral
larin 24 fe oral
larin 20 (28) oral
larin 1/20 (28) oral
larin 1/50 (28) oral
larin 1/35 (28) oral
larin 7/7/7 (28) oral
laritasia oral
layolis fe oral
leen 28 oral
lessina oral
levenest (28) oral
levenorgestrel-ethinyl estradiol
levonorg-eth estrad triphasic oral
levora 0.15/30 (28) oral
levora 0.20 (28) oral
lilow oral
Lo Loestrin Fe Oral
lomedia 24 fe oral
loryna (28) oral
low-ogestrel (28) oral
lo-zumandimine oral
lutera (28) oral
lyza oral
marlissa oral
melodetta 24 fe oral
mibelas 24 fe oral
microgestin 1.5/30 (21) oral
microgestin 1/20 (21) oral
microgestin fe 1.5/30 (28) oral
microgestin fe 1/20 (28) oral
mili oral
mono-linyah oral
mononesa (28) oral
my choice oral
my way oral
myzilera oral
Natazia Oral
necon 0.5/35 (28) oral
necon 1/50 (28) oral
necon 7/7/7 (28) oral
new day oral
next choice one dose oral
nikki (28) oral
nora-be oral
noreth-ethinyl estradiol-iron oral
noretindrone (contraceptive) oral
noretindrone ac-eth estradiol oral
noretindrone- e.estradiol-iron oral
norgestimate-ethinyl estradiol oral
norgestrel-ethinyl estradiol oral
norlyda oral
norlyroc oral
nortrel 0.5/35 (28) oral
nortrel 1/35 (21) oral
nortrel 1/20 (28) oral
nortrel 1/20 (21) oral
nortrel 1/35 (28) oral
nortrel 1/20 (28) oral
nortrel 0.5/35 (28) oral
ocell oral
ogestrel (28) oral
opicon one-step oral
option-2 oral
orsynthia oral
philith oral
pimtra (28) oral
pirmella oral
plan b one-step oral
portia oral
previfem oral
quasense oral
rajani oral
react oral
recipzen (28) oral
rivelsa oral
setlakin oral
sharobel oral
simeriya oral
simpesse oral
sprintec (28) oral
sronyx oral
syeda oral
take action oral
tarina fe oral
tarina fe 1/20 (28) oral
Taytulla Oral
tila fe oral
Today contraceptive Sponge Vaginal
tri-femynoral
tri-estarylia oral
tri-estrel axial oral
tri-lo-estarylia oral
tri-lo-marzia oral
tri-lo-sprintec oral
tri-mili oral
trinessa (28) oral
trinessa lo oral
triestra (28) oral
trivi-estra (28) oral
trivi-sprintec (28) oral
trivora (28) oral
trivi-libra oral
trivi-lybra lo oral
tulan oral
tydemy oral
vaginal contraceptive film vaginal
vaginal contraceptive foam vaginal
Vcf contraceptive film vaginal
Vcf contraceptive gel vaginal
velivet triphasic regimen (28) oral
vestura (28) oral
vienna oral
viorele (28) oral
vyfemla (28) oral
wera (28) oral
Wide-Seal Diaphragm 60 Vaginal
Wide-Seal Diaphragm 65 Vaginal
Wide-Seal Diaphragm 70 Vaginal
Wide-Seal Diaphragm 75 Vaginal
Wide-Seal Diaphragm 80 Vaginal
Wide-Seal Diaphragm 85 Vaginal
Wide-Seal Diaphragm 90 Vaginal
Wide-Seal Diaphragm 95 Vaginal
Wymzfe oral
xulane transdermal
zarah oral
zhenct (28) oral
zhenct fe oral
zovia 1/35e (28) oral
zovia 1/50e (28) oral
zumandimine oral
FLUORIDE
fluor-a-day (with xylitol) oral
fluoride (sodium) oral
fluoritab oral
ludent fluoride oral
multivitamin with fluoride oral
multi-vitamin with fluoride drops
multi-vitamin with fluoride oral
tablet, chewable
multivitamins with fluoride oral
multivit-fluor (vit e acetate) oral
mvc-fluoride oral
triple vitamin with fluoride oral
tri-vitamin with fluoride oral
vitra oral
vitamins a,c,d and fluoride oral
FOLIC ACID
Coverage for generic only, prescription and over-the-counter included for women ages 55 or younger who are planning and able to get pregnant.
b complex 1 oral
b complex 100 oral
b complex vitamin b12 oral
b complex vitamin c-folic acid oral
b-100 complex oral
balance b-100 oral
balance b-50 oral
balanced b-100 complex oral
balanced b-100 oral
balanced b-50 complex oral
balanced b-50 oral
b-complex oral
b-complex with vitamin c oral
b complex 100 oral
b complex 1 oral
get pregnant.

SMOKING CESSATION
Coverage includes prescription and over-the-counter, brand and generic for members greater than 18 years old.
buproprion hcl (smoking deter) oral
Chantix Continuing Monthly Box Oral
Chantix Oral
Chantix Starting Monthly Box Oral
Nicoderm CQ Transdermal nicorelief buccal
Nicorette Buccal Gum 2 Mg
Nicorette Buccal Gum 4 Mg
Nicorette Buccal Lozenge
Nicorette Buccal Mini Lozenge
nicotine (polacrilex) buccal
nicotine transdermal Nicotrol Inhalation
Nicotrol Ns Nasal nts step 1 transdermal quit 2 buccal
quit 4 buccal stop smoking aid buccal Zyban Oral

VACCINES
Acctiss (Pf) Intramuscular
Adacel(Tdap Adolest/Adult)(Pf) Intramuscular
Afluria 2018-2019 Intramuscular
Afluria 2018-2019 (Pf) Intramuscular
Afluria Quad 2019-2020 Intramuscular
Afluria Quad 2018-2019 Bcg Vaccine, Live (Pf) Intramuscular
Percutaneous Bexsero Intramuscular
Boostrix Tdap Intramuscular
Cervarix Intramuscular
Comvax
Daptacel (Dtap Pediatric) (Pf) Intramuscular
Engerix-B (Pf) Intramuscular
Engerix-B Pediatric (Pf) Intramuscular
Fluad 2018-2019 Intramuscular
Flucelvax Quad 2018-2019 Intramuscular
Fluarix Quad 2018-2019 Intramuscular
Fluarix Quad 2019-2020 Intramuscular
Flublok Quad 2018-2019 Intramuscular
Flublok Quad 2019-2020 Intramuscular
Flucelvax Quad 2018-2019 Intramuscular
Flucelvax Quad 2019-2020 Intramuscular
Fluvirin 2019-2020 Intramuscular
Fluvirin 2018-2019 Nasal
Flumist Quad 2018-2019 Nasal
Flumist Quad 2019-2020 Nasal
Fluvirin 2018-2019 Intramuscular
Fluvirin 2019-2020 Intramuscular
Fluzone High-Dose 2019 (Pf) Intramuscular
Fluzone Intraderm Quad 2019 Intradermal
Fluzone Quad 2019-2020 Intramuscular
Gardasil 9 (Pf) Intramuscular
Havrix (Pf) Intramuscular
Heplisav-B Intramuscular
Hiberix (Pf) Intramuscular
Infanrix (Dtap) (Pf) Intramuscular
Ipol Injection
Kinrix (Pf) Intramuscular
Menactra (Pf) Intramuscular
Menhibrix (Pf) Intramuscular
Menomune - A/C/Y/W-135 (Pf) Subcutaneous
Menomune - A/C/Y/W-135 Subcutaneous
Menveo A-C-Y-W-135-Dip (Pf) Intramuscular
M-M-R li (Pf) Intramuscular
Petform (Pf) Intramuscular
Pediaflex (Pf) Intramuscular
Pentacel (Pf) Intramuscular
Pentacel Acthib Component (Pf) Intramuscular
Pentacel Achthib Component (Pf) Intramuscular
Pneumovax 23 Infection
Prevnar 13 (Pf) Intramuscular
Proquad (Pf) Intramuscular
Quadlacel (Pf) Intramuscular
Recombivax Hb (Pf) Intramuscular
Rotarix Oral
Rotatet Qucine Oral
Shingrix (Pf) Intramuscular
Tenivac (Pf) Intramuscular
Tetanus, Diphtheria toxoid
 tetanus toxoid
tetanus booster
tetanus toxoid-adjuvant
trivalent diphtheria toxoid

PREP
Effective 7/1/2020 for group benefits and 1/1/2021 for individual benefits.
Emtriva 200mg
tenofavor 300mg
Truvada 200-300mg

ACA Preventive Care Drug List
The range of preventive care services covered at no cost share when provided in-network is designed to meet the requirements of federal and state law. The Department of Health and Human Services has defined the preventive services to be covered under federal law with no cost share as those services described in the U.S. Preventive Services Task Force A and B recommendations, the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) and certain guidelines for infants, children, adolescents, and women supported by the Health Resources and Services Administration (HRSA) Guidelines. You may have additional coverage under your insurance policy. To learn more about what your plan covers, see your Certificate of Coverage or call the Member Services number on your ID card.

2 Limited to two (2) bowel prep screenings per year.
3 You may be required to get preapproval for these services.
4 Full coverage for statins will be limited to members with cardiovascular risk factors but who have not experienced a cardiovascular disease event.
5 This benefit also applies to those younger than age 19.
6 Your cost share may be waived if your doctor decides that using the multisource brand is medically necessary.

This list may change without notice which may affect your benefit coverage. To be sure your medication is covered under the PreventiveRx benefit, call the member services number located on your ID card.

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You have the right to get this information and help in your language for free. Call the Member Services number on your ID card for help. (TTY/TDD: 711)

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