Advantage Prescription Drug List (PDL)[1,2,3,4,5]

PPACA* $0 Cost-share Preventive Medications

Effective: January 1, 2023



United Healthcare

*PPACA - Patient Protection and Affordable Care Act

U.S. Preventive Services Task Force A & B recommendation medications and supplements[6]

The health reform law (Affordable Care Act) makes certain preventive medications and supplements available to you at no cost—both prescription and over-the-counter (OTC). The following preventive medications are covered at 100% with $0 copay when:

- Prescribed by a health care professional, and
- Age and/or condition appropriate, and
- Filled at a network pharmacy

Medication/Supplement	Population	Reason
Over-the-Counter		
Aspirin – 81 mg	Persons who are at risk for preeclampsia during pregnancy	Prevent preeclampsia during pregnancy
Aspirin – 81, 162 & 325 mg - expires 4/30/2023	Recommended age 50-59	Prevent cardiovascular disease and colorectal cancer
Folic acid 400 & 800 mcg	Women who are or may become pregnant	Prevent birth defects
Bisacodyl EC[7]	Recommended age 45-75	Bowel preparation for colonoscopy needed for colon cancer screening
Magnesium Citrate[7]	Recommended age 45-75	Bowel preparation for colonoscopy needed for colon cancer screening
PEG 3350 (generic Miralax)[7] Only the OTC product is covered at $0 cost share. The prescription version of this product may require a copay or coinsurance depending on your plan.	Recommended age 45-75	Bowel preparation for colonoscopy needed for colon cancer screening
Prescription		
Generic Colyte 240/22.74 g[7] sold as: PEG-3350/electrolytes Gavilyte-C	Recommended age 45-75	Bowel preparation for colonoscopy needed for colon cancer screening
Generic Golytely 236/22.7 g[7] sold as: PEG-3350/electrolytes Gavilyte-G	Recommended age 45-75	Bowel preparation for colonoscopy needed for colon cancer screening
Generic Nulytely[7] sold as: PEG-3350/NaCl/NaBicarbonate/KCl Gavilyte-N Trilyte	Recommended age 45-75	Bowel preparation for colonoscopy needed for colon cancer screening
Fluoride tablets, solution (not toothpaste, rinses)	Children age 0-16 years	Prevent dental cavities if water source is deficient in fluoride

Birth control

Over-the-counter birth control (contraceptives) for women

Birth Control Contraceptives	
The following forms of birth control (contraceptives) are available OTC and will be covered at $0 cost share when prescribed by a health care professional and filled at a network pharmacy.	
Contraceptive films	Contraceptive suppositories
Contraceptive foams	Emergency birth control (contraceptives) (AfterPill, generic for Plan B, generic for Plan B One-Step)
Contraceptive gels	Condoms
Contraceptive sponges	

Prescription birth control (contraceptives)

KEY
pill = Hormonal Birth Control Pill (oral contraceptive)
ring = Hormonal Birth Control Ring (contraceptive vaginal ring)
shot = Hormonal Birth Control Shot (injectable contraceptive)
patch = Hormonal Birth Control Patch (contraceptive transdermal patch)

Brand Birth Control (contraceptives)	
pill	Lo Loestrin FE
Generic Birth Control (contraceptives)	
pill	Afirmelle, Aubra, Aubra EQ, Aviane, Delyla, Falmina, Larissia, Lessina, Levonorgestrel/Ethinyl Estradiol 0.1/0.02 mg, Lutera, Orsythia, Sronyx, Vienva (generic Alesse)
pill	Altavera, Ayuna, Chateal, Chateal EQ, Kurvelo, Levonorgestrel/Ethinyl Estradiol 0.15/0.03 mg, Levora-28, Lillow, Marlissa, Portia-28 (generic Nordette)
pill	Alyacen 1/35, Cyclafem 1/35, Dasetta 1/35, Nortrel 1/35, Nylia 1/35, Pirmella 1/35 (generic Ortho-Novum 1/35)
pill	Alyacen 7/7/7, Cyclafem 7/7/7, Dasetta 7/7/7, Nortrel 7/7/7, Nylia 7/7/7, Pirmella 7/7/7 (generic Ortho-Novum 7/7/7)
pill	Apri, Cyred, Cyred EQ, Desogestrel/Ethinyl Estradiol 0.15/0.03 mg, Emoquette, Enskyce, Isibloom, Juleber, Kalliga, Reclipsen, Solia (generic Desogen, Ortho-Cept)
pill	Aranelle, Leena (generic Tri-Norinyl)
pill	Aurovela, Junel, Larin, Microgestin, Norethindrone/Ethinyl Estradiol 1 mg/20 mcg (generic Loestrin 1 mg/20 mcg)
pill	Aurovela, Hailey, Junel, Larin, Microgestin, Norethindrone/Ethinyl Estradiol 1.5 mg/30 mcg (generic Loestrin 1.5 mg/30 mcg)
pill	Aurovela 24 FE, Blisovi 24 FE, Hailey 24 FE, Junel 24 FE, Larin 24 FE, Microgestin 24 FE, Norethindrone/Ethinyl Estradiol 1 mg/20 mcg - FE (24), Tarina 24 FE (generic Loestrin 24 FE)
pill	Aurovela FE, Blisovi FE, Gildess FE, Hailey FE, Junel FE, Larin FE, Microgestin FE, Norethindrone/Ethinyl Estradiol/FE, Tarina FE (generic Loestrin FE)
pill	Balziva, Briellyn, Norethindrone/Ethinyl Estradiol 0.4 mg/35 mcg, Philith, Vyfemla (generic Ovcon-35)
pill	Camila, Deblitane, Errin, Heather, Incassia, Jencycla, Lyleq, Lyza, Nora-BE, Norethindrone 35 mcg, Norlyda, Norlyroc, Sharobel, Tulana (generic Micronor, Nor-Q-D)
pill	Caziant, Cesia, Velivet (generic Cyclessa)
pill	Charlotte 24 FE, Melodetta 24 FE, Mibelas 24 FE, Norethindrone/Ethinyl Estradiol FE 1/0.02 mg Chewable (generic Minastrin 24 FE)
pill	Cryselle-28, Elinest, Low-Ogestrel (generic Lo/Ovral)
ring	Eluryng, Etonogestrel/Ethinyl Estradiol 0.12/0.015 mg/24 hr (generic NuvaRing)
pill	Enpresse-28, Levonest, Levonorgestrel/Ethinyl Estradiol 6-5-10, Trivora-28 (generic Triphasil)
pill	Estarylla, Femynor, Mili, Mono-Linyah, Mononessa, Norgestimate/Ethinyl Estradiol 0.25/0.035 mg, Nymyo, Previfem, Sprintec-28, Vylibra (generic Ortho-Cyclen)
pill	Ethynodiol Diacetate/Ethinyl Estradiol 1/0.035 mg, Kelnor 1/35, Zovia 1/35, Zovia 1/35E (generic Demulen 1/35)
pill	Ethynodiol Diacetate/Ethinyl Estradiol 1/0.05 mg, Kelnor 1/50 (generic Demulen 1/50)
pill	Iclevia, Introvale, Jolessa, Levonorgestrel/Ethinyl Estradiol 0.15/0.03 mg, Setlakin (generic Seasonale)

Generic Birth Control (contraceptives)	
shot	Medroxyprogesterone Acetate 150 mg (generic Depo-Provera 150 mg)
pill	Necon 0.5/35, Nortrel 0.5/35, Wera 0.5/35 (generic Brevicon, Modicon)
pill	Norgestimate/Ethinyl Estradiol 0.18-0.215-0.25/0.035 mg, Tri-Estarylla, Tri Femynor, Tri-Linyah, Tri-Mili, Trinessa, Tri-Nymyo, Tri-Previfem, Tri-Sprintec, Tri-Vylibra (generic Ortho Tri-Cyclen)
pill	Tilia FE, Tri-Legest FE (generic Estrostep FE)
pill	Tyblume
patch	Xulane, Zafemy (generic Ortho Evra)

Prescription cervical caps and diaphragms for birth control (contraceptives)

Brand Cervical Caps
Femcap
Brand Diaphragms
Caya
Omniflex
Wide-Seal

Prescription emergency birth control (contraceptives)

Brand Emergency Birth Control (contraceptives)
AfterPill
ella
Plan B One-Step
Generic Emergency Birth Control (contraceptives)
Aftera, EContra EZ, EContra One Step, Levonorgestrel 1.5 mg, My Choice, My Way, New Day, Opcicon One-Step, Option 2, React, Take Action (generic Plan B One-Step)

Tobacco cessation medications[6]

If you need help to quit smoking or using tobacco products, these preventive medications are available to you at $0 cost share. To qualify, you need to:

- Be age 18 or older.
- Get a prescription for these products from your doctor, even if the products are sold over-the-counter (OTC).
- Fill the prescription at a network pharmacy.

Over-the-Counter Tobacco Cessation Medications
Nicotine Replacement Gum
Nicotine Replacement Lozenge
Nicotine Replacement Patch
Prescription Tobacco Cessation Medications
Bupropion sustained-release (generic Zyban) Tablet
The following three prescription medications are covered with prior authorization after members have tried 1) One over-the-counter nicotine product and 2) Bupropion sustained-release (generic Zyban) separately. Prior authorization[9] is required for each 90-day drug supply.[8,10]
Nicotrol Inhaler
Nicotrol Nasal Spray
varenicline tartrate (generic Chantix) tablet

Human Immunodeficiency Virus (HIV) preventive medications

For members who have a higher chance to become infected with HIV but are not yet infected, these preventive medications are available at $0 cost share. To qualify, a member must:

- Be at an increased chance for first-time infection with HIV
- If required, obtain prior authorization

If you qualify, you can receive these drugs at $0 cost-share

HIV Pre-exposure Prophylaxis Medications	
emtricitabine + tenofovir disoproxil fumarate 200-300mg tab (generic Truvada)	
tenofovir disoproxil fumarate tab 300mg (generic Viread)[11]	Prior authorization required to confirm use is for HIV prevention

Breast cancer preventive medications[6]

For members who are at increased risk for breast cancer but have not had breast cancer, these preventive medications are available at $0 cost-share. To qualify, you must:

- Be age 35 or older, and
- Be at an increased risk for the first occurrence of breast cancer—after risk assessment and counseling, and
- Obtain prior authorization

These medications are typically covered at the customary cost-share amount for your plan for the treatment of breast cancer, to prevent breast cancer recurrence and for other indications. They are available at $0 cost-share to prevent the first occurrence of breast cancer if a prior authorization is obtained. If you qualify, you can receive these drugs at $0 cost-share for up to five years, minus any time you have been taking them for prevention.

Breast Cancer Medications	
anastrozole[12]	Prior authorization required to confirm use is for breast cancer prevention
exemestane[12]	Prior authorization required to confirm use is for breast cancer prevention
letrozole[12]	Prior authorization required to confirm use is for breast cancer prevention
raloxifene[12]	Prior authorization required to confirm use is for breast cancer prevention
tamoxifen[12]	Prior authorization required to confirm use is for breast cancer prevention

Statin preventive medications[6]

The U.S. Preventive Service Task Force recommends that adults without a history of cardiovascular disease (CVD) —symptomatic coronary artery disease or stroke—use a low-to-moderate-dose statin for the prevention of CVD events in individuals who meet the following criteria:

- Are age 40-75, **and**
- Have one or more cardiovascular risk factors (high cholesterol, diabetes, hypertension, or smoking), **and**
- Have a calculated 10-year risk of a cardiovascular event of 10% or greater

Statin Medications	
lovastatin (generic Mevacor) – All strengths	
atorvastatin (generic Lipitor) 10 & 20 mg[13]	Prior authorization required to confirm risk of CVD
simvastatin (generic Zocor) 5, 10, 20 & 40 mg[13]	Prior authorization required to confirm risk of CVD

Gonococcal Ophthalmia Neonatorum preventive medication

The U.S. Preventive Service Task Force recommends prophylactic ocular topical erythromycin ointment administration for all newborns to prevent gonococcal ophthalmia neonatorum. Typically this medication is administered after birth in a hospital setting and covered under the medical benefit. If the birth of a newborn occurs outside of the hospital setting, administration of this medication after birth is still recommended and may be covered under the pharmacy benefit.

This medication is typically covered at the customary cost-share amount for your plan. However, it is available at $0 cost-share for newborn babies 0-1 month of age. For parents trying to get this medication before the birth of the baby, a prior authorization from your health care provider is required to receive this drug at $0 cost-share.

Gonococcal Ophthalmia Neonatorum Medication	
erythromycin ophthalmic ointment 0.5%[14]	Prior authorization required if outside of age limit to confirm use is for gonococcal ophthalmia neonatorum prevention

Frequently asked questions

Under the health reform law, health plans must cover certain medications as recommended by the U.S. Preventive Services Task Force (USPSTF) A & B Recommendation and the Health Resources & Services Administration (HRSA) women's health guidelines, including FDA-approved prescription and over-the-counter (OTC) contraceptives for women[7] at 100% without charging a copayment, coinsurance or deductible when:

- Prescribed by a health care professional, and
- Age and/or condition appropriate, and
- Filled at a network pharmacy.

To comply with these regulations, UnitedHealthcare offers this list of $0 cost-share Preventive Care Medications.

Which preventive care medications are available at $0 cost share?

Refer to the list in this document, sign in to **myuhc.com**, or call the number on the back of your health plan ID card for a list of medications covered at $0 cost share.

Please note, in order to obtain coverage at no cost for preventive care medications and products (including over-the-counter) you will need a prescription from your health care professional.

Your **medical benefit** will also cover other forms of birth control such as IUDs, implants and surgical sterilization (having your tubes tied).

What if my plan has a religious or moral exemption for covering contraceptives?

Some plans may not have coverage for contraceptives if your employer or plan sponsor elects a religious or moral exemption under applicable law. However, you will still have coverage at $0 cost share of the U.S. Preventive Services Task Force A & B Recommendation medications listed on the Preventive Care Medications list, such as aspirin, tobacco cessation and breast cancer preventive medications.

If I need to take preparation medications before a preventive colonoscopy, how can I get these for no cost?

If you are scheduled for a preventive colonoscopy, ask your doctor for a prescription for one of the $0 cost preparation medications. You can fill this prescription at a retail network pharmacy.

If you need a prescription medication to prepare for a colonoscopy that is **not preventive**, these medications may still be covered with a copayment or coinsurance.

If I'm at risk for cardiovascular disease, how can I get statin medications at no cost to me?

If you are a member age 40-75, and at risk for cardiovascular disease, your doctor may offer to prescribe statin medications. Select statins are covered at no cost share through 4/30/2023 for individuals who have certain risk factors for cardiovascular disease. Depending on the medication, your doctor may need to submit a prior authorization request to get medications approved for you at no additional cost if you meet coverage criteria. For members who don't meet this $0 cost-share criteria or don't request prior authorization, those statins will continue to be covered at the customary cost-share amount for your plan.

How can I get preventive medications to help me stop using tobacco at no cost?

If you are age 18 or older and want to quit using tobacco products, talk to your doctor about medications that can help. If your doctor decides this therapy is right for you, they may prescribe an over-the-counter or prescription medication.

Your doctor can submit a prescription for you at $0 cost share if you are also getting counseling to help you stop using tobacco products. Your doctor can provide this counseling or help you to find a provider.

If I'm at risk for HIV (Human Immunodeficiency Virus) but have not been infected, how can I get preventive drugs for $0 cost share?

If you are a member not yet infected with HIV, talk to your doctor about your risk of getting HIV. If your doctor decides this treatment is right for you, your doctor may offer to prescribe risk-reducing medications, such as emtricitabine + tenofovir disoproxil fumarate 200-300mg tablet (generic Truvada), or tenofovir disoproxil fumarate 300mg tablet. If required, your doctor must submit a prior authorization request and meet the coverage criteria for $0 cost share.

If I'm at risk for breast cancer, how can I get preventive medications for no cost?

If you are a member age 35 or older, talk to your doctor about your risk of getting breast cancer if you have not had it.

If your doctor decides these drugs are right for you, your doctor may offer to prescribe risk-reducing medications, such as anastrozole, exemestane, letrozole, raloxifene or tamoxifen.

Your doctor can submit a prior authorization request to get these approved for you at $0 cost share if you meet coverage criteria.

How can I get aspirin to prevent preeclampsia during pregnancy for no cost?

Low-dose or baby aspirin (81 mg) is available at no cost to pregnant persons at risk for preeclampsia. If you are pregnant and at risk for preeclampsia, ask your doctor about whether low-dose aspirin can help. If so, your doctor can give you a prescription for low-dose aspirin to be filled at a retail network pharmacy at no additional cost to you.

How can I get medications to prevent gonococcal ophthalmia neonatorum in my newborn's eyes?

Erythromycin ophthalmic ointment 0.5% is available at no cost to newborns 0-1 month of age. If you are a parent trying to get this medication before the birth of your baby, a prior authorization from your health care provider is required to receive this drug at $0 cost share.

Will this drug list change?

Drug lists can and do change, so it's always good to check. You can find updated information by:

- Signing in to **myuhc.com**, and going to Pharmacy Information
- Calling the number on your health plan ID card

What if I have a high-deductible or consumer-driven health (CDH) plan?

The same no-cost options on the list applicable to your plan will be available to you if you are in one of these plans. If you fill a prescription for covered products not on your plan's no-cost drug list, you will need to pay the full cost, until your pharmacy plan deductible is reached.

Are the no-cost Preventive Care Medications available at both retail and mail pharmacies?

Preventive Care Medications are available at both network retail pharmacies and the mail-order pharmacy for plans with a mail-order benefit.

What if the health care reform law requirements for preventive care medication coverage change?

If the law requiring plans to provide preventive care medications at no additional cost changes, information on how your costs may be impacted will be available to you by:

- Signing in to **myuhc.com**, and going to Pharmacy Information
- Calling the number on your health plan ID card

What if my doctor prescribes a similar preventive medication that is not on this list?

The health reform law allows plans to use reasonable medical management to decide which product/medications are provided at $0 cost share. If you choose a no-cost product from the list applicable to your plan, your cost at the pharmacy will be $0. If you choose a covered product/medication that is not on the list, a copay or coinsurance may be required. And this cost will apply to your deductible if you have one.

You can ask your doctor for a prescription for one of the medications on this list that your doctor feels would work for you. For some medical reasons, your doctor may decide you need a medication that is not on this list.[15] If so, you can request the medication you need by calling the number on your health plan ID card, and asking how to obtain coverage at no additional cost. Medical reasons may include side effects, and whether you can use the medication/product as required. Your doctor may visit **uhcprovider.com** for details on how to submit and what information to include with **Patient Protection and Affordable Care Act $0 Cost-Share Preventive Medications Exemption Requests**.

Questions?

Sign in to **myuhc.com** and go to Pharmacy Information or call the number on your health plan ID card.

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[1] Please note this list is subject to change.

[2] Always refer to your benefit plan materials to determine your coverage for medications and cost share. Some medications listed on the PDL may not be covered under your specific benefit. Where differences are noted, the benefit plan documents will govern.

[3] All brand-name medications are trademarks or registered trademarks of their respective owners.

[4] This list does not cover the states of California, Connecticut, Delaware, District of Columbia, Illinois, Maryland, Massachusetts, New Jersey, New York, Oregon, or Washington. If your pharmacy benefit is administered in one of these states please refer to your state specific PPACA $0 Cost-share Preventive Care Medications List.

[5] Generally state insurance laws do not apply to ASO ERISA groups.

[6] The listed age limits are based on U.S. Preventive Services Task Force Recommendations; coverage for additional populations may also apply as required.

[7] The first fill within a 12-month period will automatically process at $0 cost-share. Additional fills may be covered at the customary cost-share amount for your plan. However, one additional fill during the 12-month period is available at $0 cost-share for colon cancer screening if a prior authorization is obtained.

[8] If your pharmacy benefit plan is administered in Kentucky, you are eligible for a total of 180 days of medication dispensed as 30-day fills over a period of 365 days before prior authorization or step therapy requirements will be applied to additional quit attempts.

[9] If your pharmacy benefit plan is administered in West Virginia, these products are not subject to prior authorization or the two 90-day treatment course restriction.

[10] If your pharmacy benefit plan is administered in Colorado, these products are not subject to prior authorization.

[11] These medications are typically covered at the customary cost-share amount for your plan. However, they are available at $0 cost share when used for HIV prevention if a prior authorization is obtained. If you qualify based on criteria above, you can receive these drugs at $0 cost share.

[12] These medications are typically covered at the customary cost-share amount for your plan. However, they are available at $0 cost share when used for breast cancer prevention if a prior authorization is obtained. If you qualify based on criteria above, you can receive these drugs at $0 cost share.

[13] These medications are typically covered at the customary cost-share amount for your plan. However, they are available at $0 cost share to prevent cardiovascular disease if a prior authorization is obtained. If you qualify based on criteria above, you can receive these drugs at $0 cost share.

[14] These medications are typically covered at the customary cost-share amount for your plan. However, they are available at $0 cost share to prevent gonococcal ophthalmia neonatorum if a prior authorization is obtained. If you qualify based on criteria above, you can receive these drugs at $0 cost share.

[15] When informed by a member's health care provider, UnitedHealthcare will accommodate a coverage exception request for any member when one of the $0 cost medications listed on the Preventive Care Medications list may be medically inappropriate as determined by the health care provider for that member and UnitedHealthcare will waive the otherwise applicable cost-sharing for a medication not represented on the Preventive Care Medications list.

508 Compliant

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