



Some medicines are a \$0 copay with your plan under the Affordable Care Act (ACA)*

We want to make it easy for our members to get the care they need. Especially preventive care, which can help prevent health problems from becoming serious.

The federal government decides what medicines are most important for preventive health. And we cover those in full when you meet certain age and gender requirements; have a prescription from a health care professional (even for over-the-counter (OTC) medicines); and fill your prescription at an in-network pharmacy.

*\$0 means that you will not have a copay or have to pay money toward your deductible or coinsurance for the medicine. Other rules may apply, including age and gender requirements and frequency limitation rules. Review your plan documents for a list of covered preventive services and medicines. The ACA designation in the formulary, or drug list, for your plan refers to the Affordable Care Act, also known as Obamacare or health care reform. The ACA requires health plans to cover many preventive care services and drugs without making members pay anything toward their costs. This list is subject to change. For the most up-to-date list of covered drugs, visit the pharmacy section at emblemhealth.com.

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Preventive Medicines Covered Under the Affordable Care Act (ACA)

Please note: Generic drug examples are italicized and in lowercase letters.

Brand-name drug examples are not italicized and are in uppercase letters.

Aspirin

Who's covered? No age limit.

What's covered? Generic over-the-counter products.

Examples: *aspirin chewable 81 mg.*

Cholesterol/Statins

Who's covered? Adults 40 through 75 years old.

What's covered? Select generic strengths of low-to-moderate-dose statins and high-dose statins for primary prevention of cardiovascular disease.

Examples:

atorvastatin

fluvastatin lovastatin

pitavastatin

pravastatin rosuvastatin

simvastatin

Oral Fluoride

Who's covered? Children 6 months through 16 years old.

What's covered? Generic only (prescription/over-the-counter) single entity and combo products when prescribed by a physician.

Examples:

sodium fluoride chewable tablet

sodium fluoride solution

tri-vit with fluoride

Folic Acid

Who's covered? No age restriction.

What's covered? Generic only (prescription/over-the-counter) 0.4 mg – 0.8 mg single entity as well as combo products when prescribed by a physician.

Examples:

folic acid 0.4 mg (400 mcg)

folic acid 0.8 mg (800 mcg)

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Smoking Cessation

Who's covered? Adults 18 years and older.

What's covered? All FDA-approved smoking cessation products (prescription/over-the-counter) when prescribed by a physician.

Examples:

bupropion HCL SR 150 mg (ZYBAN 150 mg)

Chantix (varenicline)

nicotine patch

Bowel Preps

Who's covered? Adults 45 through 75 years old.

What's covered? Generic only (prescription/over-the-counter) when prescribed by a physician (limit two prescriptions per 365 days).

Examples:

gavilyte – h kit

peg 3350 powder peg-prep kit

Immunizations – To prevent certain illness in people of all ages. Health care professional must adhere to the FDA/CDC age/frequency/gender guidelines.

Examples:	Anthrax	Meningococcal
	Chikungunya	Pneumococcal
	Cholera	Polio
	COVID-19	Rabies
	Dengue	Respiratory syncytial virus (RSV) Rotavirus
	Diphtheria	Shingles
	Haemophilus Infuenzae Type B (Hib)	Tetanus-Acellular, Pertussis (DTap)
	Hepatitis A	Tetanus-Diphtheria/Tetanus- Diphtheria
	Hepatitis B	Acellular Pertussis (Tdap)
	Herpes Zoster (Shingles)	Tick-borne encephalitis (TBE)
	Human Papillomavirus (HPV)	Typhoid
	Inactivated Poliovirus (IPV)	Varicella (Chicken Pox)
	Influenza (Flu)	Yellow Fever
	Measles, Mumps, Rubella (MMR)	

For adult, child, and adolescent immunization schedules (for persons 0 through 18 years old and “catch-up schedule”), visit [cdc.gov/vaccines/schedules](https://www.cdc.gov/vaccines/schedules).

HIV Prep – To prevent Human Immunodeficiency Virus (HIV).

Who's covered? Persons of any age lacking a history of treatment for HIV.

What's covered? *Emtricitabine/Tenofovir Disoproxil Fumarate* 200 mg/300 mg dose only.

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Breast Cancer Prevention

Who's covered? Persons 35 years and older who meet criteria.

What's covered? Generic *tamoxifen*, *anastrozole*, *exemestane*, SOLTAMOX, and *raloxifene* when prescribed by a physician and clinical criteria are met.

*Requires preauthorization to determine if clinical criteria are met.

Women's Contraception – For the prevention of pregnancy in women.

The following contraceptives are provided at a zero cost-share (when filled at an in-network pharmacy) as mandated by the ACA. Please note that single-source brand* and multi-source brand** contraceptives are only available at a zero cost-share when specific plan requirements are met. The list is subject to change to remain compliant with ACA guidelines.

Members: The terms of your insurance plan will ultimately determine coverage and cost-sharing. For specific questions about your coverage, please call the phone number printed on your ID card.

*Indicates single-source brand product

**Indicates multi-source brand product

Preventive Medicines Covered Under the Affordable Care Act (ACA)

Cervical Cap FEMCAP*

Diaphragm

CAYA CONTOURED*
WIDE SEAL DIAPHRAGM*

Emergency

after pill
AFTERA**
curae
econtra ez
econtra one-step
her style
levonorgestrel
my choice
my way
new day
opcicon one-step
option 2
PLAN B ONE-STEP**
TAKE ACTION**

Emergency/progestin blocker

ELLA*

Female Condom

FC2 FEMALE CONDOM*

Implantable Rod

NEXPLANON*

Injection

DEPO-PROVERA**
DEPO-SUBQ PROVERA
104*
medroxyprogesterone acetate

IUD Copper

PARAGARD T 380-A*

IUD / Progestin

KYLEENA*
LILETTA*
MIRENA*
SKYLA*

Patch

Norelgestrom-EE
Xulane
Zafemy

Spermicide

VCF FILM*

VCF GEL*

Sponge

TODAY CONTRACEPTIVE
SPONGE*

Vaginal Ring

ANNOVERA*
eluryng
enilloring
etonogestrol-ethynyl
estradiol
haloette

Oral Contraceptive – Continuous

amethia
ashlyna
camrese / lo
daysee
iclevia
jaimiess
jolessa
levonorgestrel-e.e.
lojaimiess
loseasonique
rivelsa
simpesse

Oral Contraceptive – Progestin ONLY

camila
deblitane
emzahh
errin
heather
incassia
jencycla
lyza
nora-be
norethindrone
norlyda
OPILL
sharobe
tulana

Oral Contraceptives – Combined

afirmelle
altavera
alyacen
amethia
amethyst
apri

aranelle
ashlyna
aubra / eq
aurovelle / fe / fe 24
aviane
ayuna
azurette
balziva
BEYAZ**
blisovi fe / 24 fe
brielllyn
camrese/lo
caziant
charlotte 24 fe
chateal / eq
cryselle
cyclafem
cyred / eq
dasetta
daysee
desogestrel-e.e.
dolishale
drospirenone-e.e.
drospirenone-e.e.-levomef
emoquette
enpresse
enskyce
estarylla
ethynodiol-e.e.
falmina
femlyv
femynor
finzala
gemma
generess fe
hailey / fe 24
iclevia
isibloom
jaimiess
jasmiel
jolessa
joyeayx
juleber
junel / fe / fe 24
kaitlib fe
kalliga
kariva
kelnor
kurvelo
larin / fe / 24 fe
larissia
layolis fe
leena
lessina
levonest
levonorgestrel-e.e.

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**Indicates multi-source brand product

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levora-28
lillow
lojaimiess
loryna
low-ogestrel
lo-zumandimine
lutra
marlissa
merzee
mibelas 24 fe
microgestin / fe
*microgestin 24 fe***
mili
mono-linyah
necon
nikki
norethindrone-e.e.
norethindrone-e.e. / fe
norgestimate-e.e.
norgestrel-e.e.
nortrel
nylia
nymyo
ocella
orsythia
pimtrea
pirmella
portia
previfem
reclipsen
rivelsa
setlakin
simliya
simpesse
sprintec
sronyx
syeda
tarina fe
taysofy
tilia fe
tri-estarylla
tri femynor
tri-legest fe
tri-linyah
tri-lo-estarylla
tri-lo-marzia
tri-mili
tri-milli / lo
tri-nymo
tri-previfem
tri- and tri-lo sprintec
trivora-28
tri-vylibra
tri-vylibra / lo
turqoz
tydemy

velivet
vestura
vienva
viorele
volnea
vyfemla
vylibra
wera
wymzya fe
*YAZ***
zarah
zovia
zumandimine / lo

Vaginal Gel
Phexxi
VCF

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