Individual & Family Plans

Insured by Cigna Health and Life Insurance Company

NO COST-SHARE PREVENTIVE MEDICATIONS by drug category

At Cigna, your health and well-being is most important, and we want you to be at your 100% best. It's good to take care of yourself. Getting the right preventive care services at the right time can help you stay healthy.

Health care reform requires coverage of specific preventive medications with no patient cost-sharing

The Patient Protection and Affordable Care Act (PPACA) requires that certain categories of drugs and other products be included in preventive care services coverage based on recommendations from the U.S. Preventive Services Task Force as well as the Institute of Medicine. These recommendations are meant to help prevent disease and meet women's unique health care needs, and are updated periodically to reflect new advances in science and medicine.

Preventive medication coverage

The following prescription medications (as well as certain over-the-counter medications) and products may be available to you with no cost-sharing (copay, coinsurance and/or deductible) depending on your plan. Visit

Cigna.com/ifp-drug-list for more information. Once you are a customer, you can review your policy or use the Prescription Drug Price Quote tool on myCigna.com to compare prices at local retail pharmacies and Cigna Home Delivery PharmacySM. If you have questions, you can call customer service using the number on the back of your ID card, 24 hours a day, 365 days a year, and we'll be happy to help.

Your healthcare professional

Talk with your health care professional about choosing the medication or product that's right for you. If your health care professional feels a certain contraceptive product (on this list) isn't medically appropriate for you, have your health care professional contact us to determine what other contraceptive products (not on this list) may be available with no cost-sharing. For preventive medications (including over-the-counter medications) or products to be covered, you'll need to get a prescription from your health care professional.



This list represents the medications that Cigna administered plans will cover with no cost-sharing due to PPACA requirements. Please note: this list is subject to change.

ASPIRIN PRODUCTS

Available to: Males: 45 - 79 years Females: 55 - 79 years

Adult Low Dose Aspirin Adult Low Dose Aspirin EC

Ascriptin

Aspir 81 Aspirin

Aspirin Buffered

Aspirin EC

Aspir-Low

Aspir-Trin

Aspricin

Aspridrox

Bayer Aspirin Bayer Chewable

Children's Aspirin

Children's Chewable Aspirin

Ecotrin

Ecpirin

Lite Coat Aspirin

Lo-Dose Aspirin EC

Low Dose Aspirin

Low Dose Aspirin EC

Miniprin

St. Joseph Aspirin

Tri-Buffered Aspirin

TX-Prin

BARRIER CONTRACEPTION

Available to females

Conceptrol Inserts Conceptrol w/applicator

Encare

FC Female Condom

FC2 Female Condom

Femcap

Gynol II

Gynol II Extra Strength

Omniflex Diaphram

Options Conceptrol Vaginal

Contraceptive

Options Gynol II Vaginal

Contraceptive

Orth-Gynol

Ortho Diaphragm All-

Flex/65MM

Ortho Diaphragm All-

Flex/70MM

Ortho Diaphragm All-

Flex/75MM

Ortho Diaphragm All-

Flex/80MM

Ortho Diaphragm Coil Spring

Kit 100

Ortho Diaphragm Coil Spring Kit 105

Ortho Diaphragm Coil Spring

Ortho Diaphragm Flat Spring

Ortho Diaphragm Flat Spring

Ortho Diaphragm Flat Spring

Ortho Diaphragm Flat Spring Kit 70

Ortho Diaphragm Flat Spring Kit 75

Ortho Diaphragm Flat Spring Kit 80

Ortho Diaphragm Flat Spring Kit 85

Ortho Diaphragm Flat Spring Kit 90

Ortho Diaphragm Flat Spring

Prentif Cavity-Rim Cervical Cap

Prentif Fitting Set

Shur-Seal

Today Sponge

VCF Vaginal Contraceptive

Film

VCF Vaginal

Contraceptive Foam

Wide-Seal Silicone Diaphragm Kit 60

Wide-Seal Silicone

Diaphragm Kit 65

Wide-Seal Silicone

Diaphragm Kit 70

Wide-Seal Silicone

Diaphragm Kit 75

Wide-Seal Silicone Diaphragm Kit 80

Wide-Seal Silicone

Diaphragm Kit 85

Wide-Seal Silicone

Diaphragm Kit 90

Wide-Seal Silicone

Diaphragm Kit 95

BREAST CANCER PREVENTION

Available to females

raloxifene tamoxifen

EMERGENCY CONTRACEPTION Available to females

Ella My Way

Next Choice Next Choice One Dose

Take Action

FALL PREVENTION/ VITAMIN D SUPPLEMENTATION

Available to adults 65 years of age and older

Bio-D-Mulsion

Bio-D-Mulsion Forte Children's Replesta

Children's Vitamin D

D₃ Dots

D3-50

Decara

Delta D3

Dialyte Vitamin D3 Max

Dialyvite Vitamin D

D-Vi-Sol D-Vita

Just D

Kids Vitamin D3

Maximum D3

Replesta

Replesta NX

Thera-D

Vitamin D

Vitamin D3

Vitamin D-400

FOLIC ACID SUPPLEMENTATION

Available to females (only products containing from 0.4 mg-0.8 mg of folic acid are included)

Classic Prenatal Daily Prenatal Engran-HP Folic Acid

KPN Maxinate

Natalins Natelle-EZ

One Daily Prenatal

P-D Natal Plus With Folic Acid

Prenatal

Prenatal Formula

Prenatal Multi + DHA Prenatal OTC

Prenatal Vitamins

Preque 10

Right Step Prenatal Vitamins

Stuart Prenatal

Stuart Prenatal + DHA

HORMONAL CONTRACEPTION^*

Available to females

Altavera

Alyacen 1/35

Alyacen 7/7/7

Amethia

Amethia Lo

Apri

Aranelle

Aubra Aviane

Azurette

Balziva

Briellyn

Camila Camrese

Camrese Lo

Caziant

Chateal Cryselle-28

Cyclafem 1/35

Cyclafem 7/7/7 Dasetta 1/35

Dasetta 7/7/7

Davsee

desogestrel/ethinyl estradiol drospirenone/ethinyl

estradiol

Elinest

Emoquette

Enpresse-28 Enskyce

Errin

Estarylla Falmina

Gianvi

Gildagia

Gildess 1.5/30

Gildess 1/20

Gildess FE 1.5/30 Gildess FE 1/20

Heather

Introvale

Jencycla Jolessa

Jolivette

Junel 1.5/30 Junel 1/20

Junel FE 1.5/30

Junel FE 1/20

Kariva
Kurvelo
Larin 1/20
Larin FE 1.5/30
Larin FE 1/20
Leena
Lessina
Levonest
levonorgestrel

levonorgestrel and ethinyl

estradiol

estradiol

levonorgestrel/ethinyl

Levora 0.15/30-28 Loryna Low-Ogestrel Lutera

Lutera Lyza Marlissa

medroxyprogesterone acetate

150 MG/ML
Microgestin 1.5/30
Microgestin 1/20
Microgestin FE
Microgestin FE 1.5/30
Mono-Linyah
Mononessa
Myzilra
Necon 0.5/35-28
Necon 1/35
Necon 7/7/7

Nora-Be norethindrone norgestimate/ethinyl

estradiol

Pirmella 1/35

Pirmella 7/7/7

norgestrel/ethinyl estradiol

Nortrel 0.5/35 (28)
Nortrel 1/35
Nortrel 7/7/7
Ocella
Orsythia
Philith
Pimtrea

Portia-28 Previfem Quasense Reclipsen Sprintec 28 Sronyx Syeda Tilia FE Tri-Estarylla Tri-Legest FE Tri-Linyah Trinessa Tri-Previfem Tri-Sprintec Trivora-28 Velivet Vestura Viorele Vyfemla Wera Wymzya FE Xulane

Zarah

Zeosa

Zenchent

Zenchent FE

Zovia 1/35E

- ^ If your health care professional feels these medications are medically inappropriate, have them call us. Brands may be available with no cost-sharing to you.
- * Generic hormonal contraceptives are available at no cost-sharing to you, even though they may not be listed here.

PEDIATRIC IRON-CONTAINING PRODUCTS/FLUORIDE SUPPLEMENTATION

Available to males and females: six - 12 months Children's Ferrous Sulfate Children's Iron Fer-In-Sol Fer-Iron

Ferrous Sulfate Flura Drops

Icar Wee Care

PEDIATRIC MULTIVITAMINS

(containing fluoride and fluoride supplements)

Available to males and females: six months - six years

ADC w/Fluoride
Escavite
Escavite D
Fluorabon
Fluora-day
Fluoride
Fluoritab
Flura-drops

Flura-drops
Ludent Fluoride
Multivitamine w-l

Multivitamins w-Fluoride-Iron Multivitamins with Flouride MVC-Fluoride

Polytab Poly-VI-Flor Poly-VI-Flor with Iron Polyvitamins with Fluoride

Quflora Sodium Fluoride TL-Fluourivite

Triple Vitamin w/Fluoride Tri-VI-Flor

Tri-VI-Floro

Tri-vitamin with Fluoride

Tri-vite w/Fluoride Tri-vite w/Fluoride Iron Vitamins A,C,D & Fluoride

SMOKING CESSATION^*

Quantity limitations apply.

bupropion (generic for Zyban®)

May also be known as:
Bupropion HCl SR 12HR

Buproban

nicotine replacement

therapy* (patches, gum and lozenges)

May also be known as:

Commit

Nicoderm Nicorelief Nicorette

Nicotine Polacrilex Gum Nicotine Polacrilex Lozenge Nicotine TD Patch 24HR Nicotine Transdermal System

- ^ If your doctor feels these medications are medically inappropriate, have them call us. Brands may be available with no costsharing to you.
- * Generic nicotine replacement therapy (so called "store-brands," are available at no costsharing to you, even though they may not be listed here.)



Medical insurance policies contain exclusions and limitations. 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 or purchase 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. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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