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. Check your plan materials or visit myCigna.com for more information. You can also use the Prescription Drug Price Quote tool on myCigna.com to compare prices at local retail pharmacies and Cigna Home Delivery Pharmacy™. 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.

Religious exemptions to covering contraceptives

PPACA allows certain employers to exclude coverage for contraceptive services 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, and Cigna will offer to pay for your contraceptive services and specific medications at no additional cost to you if you choose. This coverage isn’t administered, funded by or connected in any way to your employer’s health coverage, and is private and confidential.

Your healthcare professional

Talk with your doctor about choosing the medication or product that’s right for you. If your doctor feels a certain contraceptive product (on this list) isn’t medically appropriate for you, have your doctor 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 doctor.
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
  - Available beginning 9/1/15 for females of childbearing age at risk of preeclampsia during pregnancy

- Adult Low Dose Aspirin
- Adult Low Dose Aspirin EC
- Aspir EC 81
- Aspirin 81 mg
- Aspir-Low
- Bayer Chewable Aspirin
- Children's Aspirin
- Children's Chewable Aspirin
- Ecotrin 81 mg
- Halfprin
- Low Dose Aspirin
- Low Dose Aspirin EC
- St. Joseph Aspirin

**EMERGENCY CONTRACEPTION**
Available to **Females**
- Ella
- My Way
- Next Choice One Dose
- Take Action

**FALL PREVENTION / VITAMIN D SUPPLEMENTATION**
- *adults 65 years of age and older to prevent falls*
- Children's Replesta
- Children's Vitamin D
- D3 Dots
- D3-2000
- D3-50
- Decara
- Delta D3
- Dialyte Vitamin D3 Max
- Dialyvite Vitamin D
- D-Vi-Sol
- D-Vita
- Just D
- Kids Vitamin D3
- Maximum D3
- Optimal D3
- Replesta
- Replesta NX
- Thera-D
- Vitamin D
- Vitamin D3
- Vitamin D-400

**BARRIER CONTRACEPTION**
Available to **Females**
- Conceptrol
- FC2 Female Condom
- Femcap
- Gynol II
- Options Conceptrol Vaginal Contraceptive
- Options Gynol II Vaginal Contraceptive
- Today Contraceptive Sponge
- VCF Vaginal Contraceptive Film
- VCF Vaginal Contraceptive
- Foam
- Wide Seal Diaphragm 60
- Wide Seal Diaphragm 70
- Wide Seal Diaphragm 75
- Wide Seal Diaphragm 80
- Wide Seal Diaphragm 85
- Wide Seal Diaphragm 90
- Wide Seal Diaphragm 95
- Wide Seal Diaphragm 95

**BREAST CANCER PREVENTION (FEMALES)**
- *effective on plan anniversary date beginning September 1, 2014.*
- raloxifene
- tamoxifen

**FOLIC ACID SUPPLEMENTATION**
Available to **Females** (Only products containing 0.4 mg-0.8 mg of folic acid are included)
- Classic Prenatal
- Daily Prenatal
- Folic Acid
- KPN
- Maxinata
- 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
- Urosex

**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
- Crysele-28
- Cyclafem 1/35
- Cyclafem 7/7/7
- Dasetta 1/35
- Dasetta 7/7/7
- Daysee
desogestrel/ethinyl estradiol
drospirenone/ethinyl estradiol
Elinest
Emoquette
Enpresse-28
Enskyce
Errin
Estarylla
Falmina
Generess Fe
Gianvi
Gildagia
Gildess 1.5/30
Gildess 1/20
Gildess FE 1.5/30
Gildess FE 1/20
Heather
Introvale
Jencycla
Jolissa
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
Levones
levonorgestrel
levonorgestrel and ethinyl estradiol
levonorgestrel/ethyl estradiol L
Levora 0.15/30-28
Loryna
Low-Ogestrel
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
Myxilra
Necon 0.5/35-28
Necon 1/35
Necon 1/7/7
Nora-Be	norethindrone
norgestimate/ethinyl estradiol
norgestrel/ethinyl estradiol
Nortrel 0.5/35 (28)
Nortrel 1/35
Nortrel 7/7/7
Nuvaring (Available 7/11/2015)
Ocella
Orsathyia
Philith
Pimtrea
Pirmella 1/35
Pirmella 7/7/7
Portia-28
Previsem
Quasense
Recilpsen
Sprintec 28
Sronyx
Syeda
Tilia FE
Tri-Estarylla
Tri-Legest FE
Tri-Linyah
Trinessa
Tri-Previfem
Tri-Sprintec
Trivora-28
Velivet
Vestura
Violele
Vyfemla
All health benefit plans and insurance policies contain exclusions and limitations. 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 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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