

Health Care Reform Update

The Affordable Care Act (ACA) requirements below apply to medications dispensed pursuant to a written prescription and subject to FDA guidelines.

Preventive Care Medications and Coverage Requirements under the ACA		
Medication	Copay	Limits
Aspirin 81 mg	\$0; N/A to Deductible	Ages 45 through 78 for Males; Ages 55 through 78 for Females; OTC Generics and Legend Generics
Fluoride Supplements (Oral)	\$0; N/A to Deductible	Ages 6 Months through Age 6; Allow OTC
Folic Acid (400 mcg and 800 mcg only)	\$0; N/A to Deductible	Ages 11 through 48 for Females; OTC Generics and Legend Generics
Iron Supplements	\$0; N/A to Deductible	Ages 6 Months through 12 Months; OTC Generics and Legend Generics
Smoking Deterrents (Oral, gum, lozenges, patches, oral inhaler, and nasal inhaler)	\$0; N/A to Deductible	OTC and Legend medications per FDA guidelines, Limit two treatment cycles per calendar year
Vitamin D2, D3 Products, and calcium Vitamin D < 1,000 IU	\$0; N/A to Deductible	Age 65 and older; OTC Generics and Legend Generics
Bowel Preps (Bisacodyl, Mag Citrate, Milk of Magnesia, PEG 3350-Electrolyte)	\$0; N/A to Deductible	Age 50 through 75; OTC Generics and Legend Generics; Limit 2 prescriptions per year
Breast Cancer Prevention (for preventive use)	\$0; N/A to Deductible	Ages 35 or older for Females; OTC Generics and Legend Generics

Women's Contraceptives	
Method	Copay
Hormonal (Oral drugs, patches, rings, injectables)	\$0 copay*; N/A to Deductible
Barrier (Diaphragms, female condoms, spermicides, cervical caps, sponges)	\$0 copay*; N/A to Deductible; Allow OTC
Emergency "Morning After" Pill	\$0 copay*; N/A to Deductible; Allow OTC
Implants IUDs	\$0 copay*; N/A to Deductible

*Note: Brand Drugs with a generic equivalent will be covered at a \$0 copay to the Plan's members when the prescriber has indicated "Dispense as Written" (DAW1) on the prescription. On the other hand, members requesting the Brand Drug over the Generic equivalent (DAW2) will be subject to the standard copay by the member.

This is practical information regarding your Prescription Benefit Plan. For a more detailed description of your Health Plan, please refer to your Summary Plan Description (SPD) provided by your plan sponsor and/or your Medical Benefits Provider.