



October 2016

Dear Rhode Island State Employee Health Plan Member:

If you elect the Choice Plus Plan with Health Savings Account (HSA) for coverage during the 2017 plan year, you will be required to pay the full negotiated cost for your care until you reach your deductible for most health care expenses, including most prescription medications. After you meet the deductible, you pay only the copay\* and your plan pays the rest.

The State of Rhode Island understands that some medications can help prevent disease or help manage existing conditions to try and avoid future complications. For this reason, The State of Rhode Island offers a preventive medication therapy list, which reduces your cost for select prescriptions that help prevent chronic health conditions, when taken regularly. **If you take medications on the preventive medication therapy list, you will pay only the copay for these medications even if you have not yet met your annual plan deductible.**

Examples of preventive medications:

- The treatment of high cholesterol with medications such as statins to prevent heart disease
- Using medication such as an ACE inhibitor to prevent heart attack or stroke in members who have already suffered a heart attack or stroke

**Questions?** Call us toll-free at **1-800-307-5432**. We appreciate the opportunity to help you better manage your health.

Sincerely,

Your Customer Care Team  
CVS Caremark

\*Copayment, copay means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.

# High Deductible Health Plan (HDHP) - Health Savings Account (HSA)

## Preventive Therapy Drug List

(10/01/16)

### ANTICOAGULANTS/ ANTIPLATELETS

#### ANTICOAGULANTS

*enoxaparin*  
*fondaparinux*  
*warfarin*  
*Jantoven*  
ARIXTRA  
COUMADIN  
COUMADIN INJECTION  
ELIQUIS  
FRAGMIN  
IPRIVASK  
LOVENOX  
PRADAXA  
SAVAYSA  
XARELTO

#### PLATELET AGGREGATION INHIBITORS

*clopidogrel*  
*dipyridamole*  
*dipyridamole ext-rel/aspirin*  
AGGRENOX  
BRILINTA  
DURLAZA  
EFFIENT  
PERSANTINE  
PLAVIX  
ZONTIVITY

### ANTICONVULSANTS

*carbamazepine*  
*carbamazepine ext-rel*  
*clonazepam*  
*divalproex sodium delayed-rel*  
*divalproex sodium ext-rel*  
*ethosuximide*  
*felbamate*  
*lamotrigine*  
*lamotrigine ext-rel*  
*levetiracetam*  
*levetiracetam ext-rel*  
*oxcarbazepine*  
*phenobarbital*  
*phenytoin*  
*phenytoin sodium extended*  
*primidone*  
*tiagabine*  
*topiramate*  
*topiramate ext-rel*  
*valproic acid*  
*zonisamide*  
*Epitol*  
APTIOM  
BANZEL

BRIVIACT  
CARBATROL  
CELONTIN  
DEPAKENE  
DEPAKOTE  
DEPAKOTE ER  
DILANTIN  
FELBATOL  
FYCOMPA  
GABITRIL  
KEPPRA  
KEPPRA XR  
KLONOPIN  
LAMICTAL  
LAMICTAL XR  
LAMICTAL XR KIT  
MYSOLINE  
ONFI  
OXTELLAR XR  
PEGANONE  
PHENYTEK  
POTIGA  
QUDEXY XR  
SABRIL  
SPRITAM  
TEGRETOL  
TEGRETOL-XR  
TOPAMAX  
TOPIRAMATE ER  
TRILEPTAL  
TROKENDI XR  
VIMPAT  
ZARONTIN  
ZONEGRAN

### BOWEL PREPARATIONS

*peg 3350/electrolytes*  
*Gavilyte*  
COLYTE  
GOLYTELY  
MOVIPREP  
NULYTELY  
OSMOPREP  
PREPOPIK  
SUPREP

### CARDIOVASCULAR CONDITIONS -

#### OTHER

#### ANTIARRHYTHMIC AGENTS

*amiodarone*  
*disopyramide*  
*dofetilide*  
*flecainide*  
*propafenone*  
*propafenone ext-rel*

*sotalol*  
*sotalol AF*  
*Pacerone*  
BETAPACE  
BETAPACE AF  
CORDARONE  
NORPACE  
NORPACE CR  
RYTHMOL  
RYTHMOL SR  
SOTYLIZE  
TIKOSYN

#### NEPRILYSIN/ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS

ENTRESTO

#### ORAL ANTIANGINAL AGENTS

*isosorbide dinitrate*  
*isosorbide mononitrate*  
*isosorbide mononitrate ext-rel*  
*nitroglycerin*  
*nitroglycerin lingual spray*  
*nitroglycerin sublingual aerosol*  
DILATRATE-SR  
ISORDIL  
NITROLINGUAL  
NITROMIST

*SL and chewable formulations are not included  
on this list.*

#### TRANSDERMAL/TOPICAL ANTIANGINAL AGENTS

*nitroglycerin transdermal*  
*Minitran*  
NITRO-BID  
NITRO-DUR

### CORONARY ARTERY DISEASE

#### ANTIHYPERTENSIVES

*atorvastatin*  
*cholestyramine*  
*colestipol*  
*fenofibrate*  
*fenofibric acid*  
*fenofibric acid delayed-rel*  
*fluvastatin*  
*fluvastatin ext-rel*  
*gemfibrozil*  
*lovastatin*  
*niacin ext-rel*  
*omega-3 acid ethyl esters*  
*pravastatin*  
*rosuvastatin*  
*simvastatin*

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Niacor  
Prevalite  
ALTOPREV  
ANTARA  
COLESTID  
CRESTOR  
FENOGLIDE  
FIBRICOR  
JUXTAPID  
LESCOL XL  
LIPITOR  
LIPOFEN  
LIVALO  
LOCHOLEST/LOCHOLEST LIGHT  
LOFIBRA  
LOPID  
LOVAZA  
MEVACOR  
NIASPAN  
PRAVACHOL  
QUESTRAN/QUESTRAN LIGHT  
TRICOR  
TRIGLIDE  
TRILIPIX  
VASCEPA  
WELCHOL  
ZETIA  
ZOCOR

#### COMBINATION ANTIHYPERLIPIDEMICS

*amlodipine/atorvastatin*  
CADUET  
LIPTRUZET  
VYTORIN

#### DIABETES

##### DIAGNOSTIC AGENTS AND SUPPLIES

BLOOD GLUCOSE MONITORS - ALL  
BLOOD GLUCOSE STRIPS - ALL  
CONTROL SOLUTIONS  
INSULIN SYRINGES, INFUSION SETS,  
AND NEEDLES - ALL  
KETONE BLOOD TEST STRIPS - ALL  
LANCETS, LANCET DEVICES  
OMNIPOD  
URINE TESTING STRIPS - ALL  
V-GO

##### INHALED DIABETES AGENTS

AFREZZA

##### INJECTABLE DIABETES AGENTS

APIDRA  
BYDUREON  
BYETTA  
HUMALOG  
HUMULIN  
LANTUS  
LEVEMIR  
NOVOLIN  
NOVOLOG  
SYMLINPEN

TANZEUM  
TOUJEO  
TRESIBA  
TRULICITY  
VICTOZA

*Over-the-Counter (OTC) products require a prescription.  
Coverage may vary by plan.*

#### ORAL DIABETES AGENTS

*acarbose*  
*alogliptin*  
*alogliptin/metformin*  
*alogliptin/pioglitazone*  
*chlorpropamide*  
*glimepiride*  
*glipizide*  
*glipizide ext-rel*  
*glipizide/metformin*  
*glyburide*  
*glyburide, micronized*  
*glyburide/metformin*  
*metformin*  
*metformin ext-rel*  
*miglitol*  
*nateglinide*  
*pioglitazone*  
*pioglitazone/glimepiride*  
*pioglitazone/metformin*  
*repaglinide*  
*repaglinide/metformin*  
*tolbutamide*  
ACTOPLUS MET  
ACTOPLUS MET XR  
ACTOS  
AMARYL  
DUETACT  
FARXIGA  
FORTAMET  
GLUCOPHAGE  
GLUCOPHAGE XR  
GLUCOTROL  
GLUCOTROL XL  
GLUCOVANCE  
GLUMETZA  
GLYNASE  
GLYSET  
GLYXAMBI  
INVOKAMET  
INVOKANA  
JANUMET  
JANUMET XR  
JANUVIA  
JARDIANCE  
JENTADUETO  
JENTADUETO XR  
KAZANO  
KOMBIGLYZE XR  
METAGLIP  
NESINA  
ONGLYZA  
OSEN

PRANDIN  
PRECOSE  
RIOMET  
STARLIX  
SYNJARDY  
TRADJENTA  
XIGDUO XR

#### HEMATOLOGIC AGENTS

ADVATE  
ADYNOVATE  
AFSTYLA  
ALPHANATE  
ALPHANINE SD  
ALPROLIX  
BEBULIN  
BENEFIX  
CORIFACT  
ELOCTATE  
HELIXATE FS  
HEMOFIL M  
HUMATE-P  
IDELVION  
IXINITY  
KOATE-DVI  
KOGENATE  
KOGENATE FS  
KOVALTRY  
MONOCLATE-P  
MONONINE  
NOVOEIGHT  
NUWIQ  
PROFILNINE SD  
RECOMBINATE  
RIXUBIS  
TRETEN  
XYNTHA

#### HYPERTENSION

##### ACE INHIBITORS/ANGIOTENSIN II RECEPTOR ANTAGONISTS AND COMBINATION AGENTS

*amlodipine/benazepril*  
*benazepril*  
*benazepril/hydrochlorothiazide*  
*candesartan*  
*candesartan/hydrochlorothiazide*  
*captopril*  
*captopril/hydrochlorothiazide*  
*enalapril*  
*enalapril/hydrochlorothiazide*  
*eprosartan*  
*fosinopril*  
*fosinopril/hydrochlorothiazide*  
*irbesartan*  
*irbesartan/hydrochlorothiazide*  
*lisinopril*  
*lisinopril/hydrochlorothiazide*  
*losartan*  
*losartan/hydrochlorothiazide*  
*moexipril*  
*moexipril/hydrochlorothiazide*

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*perindopril*  
*quinapril*  
*quinapril/hydrochlorothiazide*  
*ramipril*  
*telmisartan*  
*telmisartan/hydrochlorothiazide*  
*trandolapril*  
*trandolapril/verapamil ext-rel*  
*valsartan*  
*valsartan/hydrochlorothiazide*  
ACCUPRIL  
ACCURETIC  
ACEON  
ALTACE  
ATACAND  
ATACAND HCT  
AVALIDE  
AVAPRO  
BENICAR  
BENICAR HCT  
COZAAR  
DIOVAN  
DIOVAN HCT  
EDARBI  
EDARBYCLOR  
EPANED  
HYZAAR  
LOTENSIN  
LOTENSIN HCT  
LOTREL  
MAVIK  
MICARDIS  
MICARDIS HCT  
PRESTALIA  
PRINIVIL  
QBRELIS  
TARKA  
VASERETIC  
VASOTEC  
ZESTORETIC  
ZESTRIL

#### **BETA-BLOCKERS AND COMBINATION AGENTS**

*acebutolol*  
*atenolol*  
*atenolol/chlorthalidone*  
*betaxolol*  
*bisoprolol*  
*bisoprolol/hydrochlorothiazide*  
*carvedilol*  
*labetalol*  
*metoprolol*  
*metoprolol succinate ext-rel*  
*metoprolol/hydrochlorothiazide*  
*nadolol*  
*nadolol/bendroflumethiazide*  
*pindolol*  
*propranolol*  
*propranolol ext-rel*  
*propranolol/hydrochlorothiazide*  
*timolol maleate*

BYSTOLIC  
BYVALSON  
COREG  
COREG CR  
CORGARD  
CORZIDE  
DUTOPROL  
INDERAL LA  
KERLONE  
LEVATOL  
LOPRESSOR  
LOPRESSOR HCT  
SECTRAL  
TENORETIC  
TENORMIN  
TOPROL-XL  
TRANDATE  
ZEBETA  
ZIAC

#### **CALCIUM CHANNEL BLOCKERS AND COMBINATION AGENTS**

*amlodipine*  
*diltiazem*  
*diltiazem ext-rel*  
*diltiazem XR*  
*felodipine ext-rel*  
*isradipine*  
*nicardipine*  
*nifedipine*  
*nifedipine ext-rel*  
*nisoldipine ext-rel*  
*verapamil*  
*verapamil ext-rel*  
*Afedtab CR*  
*Cartia XT*  
*Dilt-XR*  
*Matzim LA*  
*Nifediac CC*  
*Nifedical XL*  
*Taztia XT*  
ADALAT CC  
CALAN  
CALAN SR  
CARDIZEM  
CARDIZEM CD  
CARDIZEM LA  
ISOPTIN SR  
NORVASC  
PROCARDIA  
PROCARDIA XL  
SULAR  
TIAZAC  
VERELAN  
VERELAN PM

#### **DIURETICS**

*amiloride/hydrochlorothiazide*  
*chlorothiazide*  
*chlorthalidone*  
*hydrochlorothiazide*  
*indapamide*

*methylothiazide*  
*spironolactone/hydrochlorothiazide*  
*triamterene/hydrochlorothiazide*  
ALDACTAZIDE  
DIURIL  
DYAZIDE  
MAXZIDE  
MICROZIDE

#### **OTHER ANTIHYPERTENSIVE AGENTS**

*amlodipine/telmisartan*  
*amlodipine/valsartan/*  
*hydrochlorothiazide*  
*clonidine*  
*clonidine transdermal*  
*guanabenz*  
*guanfacine*  
*hydralazine*  
*methyl dopa*  
*methyl dopa/hydrochlorothiazide*  
*minoxidil*  
Clorpres  
AZOR  
CATAPRES  
CATAPRES-TTS  
EXFORGE  
EXFORGE HCT  
TEKTURNA  
TEKTURNA HCT  
TENEX  
TRIBENZOR  
TWINSTA

#### **IMMUNIZING AGENTS**

ALLERGENIC EXTRACTS  
CERVARIX  
CHOLERA VACCINE  
COMBINATION VACCINES  
CYTOMEGALOVIRUS IMMUNE  
GLOBULIN  
DPT VACCINE  
DT VACCINE  
DTaP VACCINE  
GARDASIL  
GARDASIL 9  
GRASTEK  
HEPATITIS A VACCINE  
HEPATITIS B IMMUNE GLOBULIN  
HEPATITIS B VACCINE  
HIB VACCINE  
INFLUENZA VACCINE  
JAPANESE ENCEPHALITIS VACCINE  
MEASLES VACCINE  
MENINGOCOCCAL VACCINE  
MUMPS VACCINE  
ORALAIR  
PNEUMOCOCCAL VACCINE  
POLIO VACCINE  
PREVNAR 13  
RABIES IMMUNE GLOBULIN  
RABIES VACCINE  
RAGWITEK

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RHO (D) IMMUNE GLOBULIN  
ROTARIX  
ROTATEQ  
RSV VACCINE  
RUBELLA VACCINE  
TETANUS IMMUNE GLOBULIN  
TYPHOID VACCINE  
VARICELLA VACCINE  
VARICELLA-ZOSTER IMMUNE  
GLOBULIN  
YELLOW FEVER VACCINE  
ZOSTAVAX

## MENTAL HEALTH

### ANTIDEPRESSANTS

*amitriptyline*  
*amoxapine*  
*bupropion*  
*bupropion ext-rel*  
*citalopram*  
*clomipramine*  
*desipramine*  
*desvenlafaxine ext-rel*  
*doxepin*  
*duloxetine delayed-rel*  
*escitalopram*  
*fluoxetine*  
*fluoxetine delayed-rel*  
*fluvoxamine*  
*imipramine HCl*  
*imipramine pamoate*  
*maprotiline*  
*mirtazapine*  
*nortriptyline*  
*paroxetine HCl*  
*paroxetine HCl ext-rel*  
*phenelzine*  
*protriptyline*  
*sertraline*  
*tranylcypromine*  
*trazodone*  
*trimipramine*  
*venlafaxine*  
*venlafaxine ext-rel*  
*Irenka*  
ANAFRANIL  
APLENZIN  
BRINTELLIX  
CELEXA  
CYMBALTA  
EFFEXOR XR  
ELAVIL  
EMSAM  
FETZIMA  
FORFIVO XL  
KHEDEZLA  
LEXAPRO  
MARPLAN  
NARDIL  
NORPRAMIN  
OLEPTRO  
PAMELOR

PARNATE  
PAXIL  
PAXIL CR  
PEXEVA  
PRISTIQ  
PROZAC  
PROZAC WEEKLY  
REMERON  
SURMONTIL  
TOFRANIL  
VIIBRYD  
WELLBUTRIN SR  
WELLBUTRIN XL  
ZOLOFT

### ANTIPSYCHOTICS

*aripiprazole*  
*chlorpromazine*  
*clozapine*  
*fluphenazine*  
*fluphenazine decanoate*  
*haloperidol*  
*loxapine*  
*olanzapine*  
*olanzapine orally disintegrating tabs*  
*paliperidone*  
*perphenazine*  
*quetiapine*  
*risperidone*  
*thioridazine*  
*thiothixene*  
*trifluoperazine*  
*ziprasidone*  
ABILIFY  
ABILIFY MAINTENA  
ARISTADA  
CLOZARIL  
EQUETRO  
FANAPT  
FAZACLO  
GEODON  
HALDOL  
HALDOL DECANOATE  
INVEGA  
INVEGA SUSTENNA  
INVEGA TRINZA  
LATUDA  
REXULTI  
RISPERDAL  
RISPERDAL CONSTA  
SAPHRIS  
SEROQUEL  
SEROQUEL XR  
VERSACLOZ  
VRAYLAR  
ZYPREXA  
ZYPREXA ZYDIS

### OBSESSIVE COMPULSIVE DISORDER

*fluvoxamine ext-rel*

## OSTEOPOROSIS

*alendronate*  
*calcitonin*  
*calcitonin/salmon*  
*ibandronate*  
*raloxifene*  
*risedronate*  
*zoledronic acid 5 mg/100 mL*  
ACTONEL  
ATELVIA  
BINOSTO  
BONIVA  
BONIVA INJECTION  
EVISTA  
FORTICAL  
FOSAMAX  
FOSAMAX PLUS D  
MIACALCIN NASAL SPRAY  
PROLIA  
RECLAST

## PREVENTIVE CARE SERVICES

### AGENTS FOR CHEMICAL DEPENDENCY

*acamprosate calcium*  
*buprenorphine sublingual*  
*buprenorphine/naloxone sublingual*  
*disulfiram*  
*naltrexone*  
*Depade*  
ANTABUSE  
BUNAVAIL  
SUBOXONE FILM  
ZUBSOLV

### ANTI-OBESITY AGENTS

*benzphetamine*  
*diethylpropion*  
*diethylpropion ext-rel*  
*phendimetrazine*  
*phendimetrazine ext-rel*  
*phentermine*  
ADIPEX-P  
BELVIQ  
CONTRAVE  
QSYMIA  
REGIMEX  
SAXENDA  
SUPRENZA  
XENICAL

### SMOKING DETERRENTS

*bupropion ext-rel*  
*nicotine polacrilex*  
*nicotine transdermal*  
CHANTIX  
NICODERM CQ  
NICORETTE GUM  
NICORETTE LOZENGE  
NICOTROL INHALER

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NICOTROL NS  
ZYBAN

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## RESPIRATORY DISORDERS

### RESPIRATORY AGENTS

*budesonide suspension*  
*cromolyn sodium*  
*montelukast*  
*zafirlukast*  
ACCOLATE  
ADVAIR  
ADVAIR HFA  
AEROSPAN  
ALVESCO  
ARNUITY ELLIPTA  
ASMANEX  
BREO ELLIPTA  
DULERA  
FLOVENT DISKUS  
FLOVENT HFA  
NUCALA  
PULMICORT  
QVAR  
SINGULAIR  
SPIRIVA RESPIMAT 1.25 mcg  
SYMBICORT  
SYNAGIS  
XOLAIR  
ZYFLO  
ZYFLO CR

### SUPPLIES

SPACER DEVICES  
SPACER SUPPLIES

## VARIOUS CONDITIONS

### ANTI-MALARIAL AGENTS

*atovaquone/proguanil*  
*chloroquine*  
*mefloquine*  
ARALEN  
MALARONE  
PRIMAQUINE

### DENTAL CARIES PREVENTION

*sodium fluoride*  
PEDIATRIC MULTIVITAMINS WITH  
FLUORIDE - ALL MARKETED  
PRODUCTS

### HEREDITARY ANGIOEDEMA AGENTS

CINRYZE

### IMMUNOSUPPRESSIVE AGENTS

*cyclosporine caps*  
*mycophenolate mofetil*  
*mycophenolate sodium delayed-rel*  
*sirolimus*  
*tacrolimus*

*Gengraf*  
ASTAGRAF XL  
CELLCEPT  
ENVARBUS XR  
MYFORTIC  
NEORAL  
NULOJIX  
PROGRAF  
RAPAMUNE  
SANDIMMUNE  
ZORTRESS

### MULTIPLE SCLEROSIS AGENTS

*glatiramer*  
AUBAGIO  
AVONEX  
BETASERON  
COPAXONE  
EXTAVIA  
GILENYA  
LEMTRADA  
PLEGRIDY  
REBIF  
TECFIDERA  
TYSABRI  
ZINBRYTA

## WOMEN'S HEALTH

### ANTIESTROGENS

*tamoxifen*  
SOLTAMOX

### AROMATASE INHIBITORS

*anastrozole*  
*exemestane*  
*letrozole*  
ARIMIDEX  
AROMASIN  
FEMARA

### CONTRACEPTIVES

EE = ethinyl estradiol  
ME = mestranol

### LOW-DOSE MONOPHASIC PILLS

*desogestrel/EE 0.15/30*  
*drospirenone/EE 3/20*  
*ethynodiol diacetate/EE 1/35*  
*levonorgestrel/EE 0.1/20 and EE 10*  
*levonorgestrel/EE 0.15/30*  
*norethindrone acetate/EE 1/20*  
*norethindrone acetate/EE 1/20 and iron*  
*norethindrone acetate/EE 1.5/30*  
*norethindrone acetate/EE 1.5/30*  
*and iron*  
*norethindrone/EE 0.4/35*  
*norethindrone/EE 0.5/35*  
*norethindrone/EE 0.8/25 chewable*  
*norethindrone/EE 1/35*  
*norethindrone/EE 1/50*  
*norethindrone/ME 1/50*  
*norgestimate/EE 0.25/35*

*norgestrel/EE 0.3/30*  
BEYAZ  
LO LOESTRIN FE  
MINASTRIN 24 FE  
SAFYRAL

### HIGH-DOSE MONOPHASIC PILLS

*ethynodiol diacetate/EE 1/50*  
*norgestrel/EE 0.5/50*

### BIPHASIC PILLS

*desogestrel/EE 0.15/20*  
NECON 10/11

### TRIPHASIC PILLS

*desogestrel/EE 0.1-0.025/  
0.125-0.025/0.15-0.025 mg-mg*  
*levonorgestrel/EE 0.05-30/  
0.075-40/0.125-30 mg-mcg*  
*norethindrone/EE 0.5-35/0.75-35/  
1-35 mg-mcg*  
*norethindrone/EE 0.5-35/1-35/  
0.5-35 mg-mcg*  
*norethindrone/EE 1-20/1-30/  
1-35 mg-mcg*  
*norgestimate/EE 0.18-25/0.215-25/  
0.25-25 mg-mcg*  
*norgestimate/EE 0.18-35/0.215-35/  
0.25-35 mg-mcg*

### FOUR-PHASIC

NATAZIA

### EXTENDED-CYCLE PILLS

*levonorgestrel/EE 0.1/20 and EE 10*  
*levonorgestrel/EE 0.15/30*  
*levonorgestrel/EE 0.15/30 and EE 10*  
QUARTETTE

### CONTINUOUS-CYCLE PILLS

*levonorgestrel/EE 0.09/20*

### PROGESTIN-ONLY PILLS

*norethindrone 0.35 mg*

### EMERGENCY CONTRACEPTION

*levonorgestrel*  
*levonorgestrel - Next Choice One Dose*  
ELLA  
PLAN B ONE-STEP

### TRANSDERMAL PATCH

*norelgestromin/EE 150-35 mcg/24 hr*

### MISCELLANEOUS CONTRACEPTIVES

*medroxyprogesterone acetate  
150 mg/mL*  
DEPO-SUBQ PROVERA 104  
DIAPHRAGM  
FEMCAP  
LILETTA  
MIRENA  
NEXPLANON

*Please note:* This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.

Some strengths or dosage forms may not be included in the Preventive Therapy Drug List and certain products or categories may not be covered, regardless of their appearance in this document. Please check with your plan provider should you have any questions about coverage. Additional medications may be included in this list from time to time in compliance with Affordable Care Act requirements and/or U.S. Internal Revenue System (IRS) guidance. This list includes medications considered preventive by the IRS; it may not include all preventive medications.

This Preventive Therapy Drug List has been adopted by the referenced health plan. CVS Caremark® makes no representations regarding its compliance with applicable legal requirements. The Preventive Therapy Drug List should be modified as necessary or desired by the plan sponsor based on the advice of the plan sponsor's counsel.  
106-1038894B 100116

NUVARING  
PARAGARD T380A  
PRENTIF  
SKYLA

**PRENATAL VITAMINS**  
PRENATAL VITAMINS - ALL  
PRESCRIPTION

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