

# Blue Cross and Blue Shield of Minnesota ACA Preventive Drug List

Effective April 1, 2024



## Recommendations by

**United States Preventive Services Task Force (USPSTF),  
Health Resources and Services Administration (HRSA), and  
Advisory Committee on Immunization Practices (ACIP, adopted by the Centers for Disease Control)**

In accordance with requirements put forth through the Affordable Care Act (ACA), your employer has elected to provide evidence-based Preventive Drug coverage at \$0. Below is the list of preventive medications that may be available under your ACA Preventive Drug coverage. This list is subject to the terms of your health plans and may change, based on ACA guidelines updates.

The drugs listed below are grouped into broad categories. Each category includes an alphabetical list of drugs. Generic drugs are available for many of the brands noted on this list. Please verify with your plan if a generic drug must be tried before the brand version of a drug is filled. **Please refer to your benefit materials for coverage details and the plan website for current information as this publication is subject to change.**

*Generic prescription drugs are shown in lower-case boldface type. Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand. Brand prescription drugs are shown in capital letters followed by the generic name. Generic medicines are available for many of the brand-name drugs listed though may not be available in all strengths.*

### ASPIRIN

**aspirin chew tab 81 mg**  
**aspirin tab delayed release 81 mg**

### BOWEL PREPARATION (for eligible members ages 45 and older)

**peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)**  
**peg 3350-kcl-sod bicarb-nacl for soln 420 gm**

### BREAST CANCER PRIMARY PREVENTION (for eligible members ages 35 and older)

**anastrozole tab 1 mg**  
**raloxifene hcl tab 60 mg (Evista)**  
**tamoxifen citrate tab 10 mg, 20 mg**

### FLUORIDE (for children ages 6 months-16 years)

**sodium fluoride cream 1.1% (Prevident 5000 plus)**  
**sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)**  
**sodium fluoride paste 1.1% (Prevident 5000 boost)**  
**stannous fluoride conc 0.63% (Gel-kam oral care rinse)**  
**stannous fluoride gel 0.4%**  
**sodium fluoride chew tab 0.25 mg f (from 0.55 mg NaF)**  
**sodium fluoride chew tab 0.5 mg f (from 1.1 mg NaF)**  
**sodium fluoride chew tab 1 mg f (from 2.2 mg NaF)**  
**sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml NaF)**

### FOLIC ACID SUPPLEMENTS

**folic acid cap 0.8 mg**  
**folic acid tab 400mcg, 800 mcg**

### HUMAN IMMUNODEFICIENCY VIRUS PREEXPOSURE PROPHYLAXIS (HIV PREP)

**DESCOVY – emtricitabine-tenofovir alafenamide tab 200-25 mg**  
**emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg (Truvada)**

### IRON SUPPLEMENTS (for eligible infants up to 12 months)

**carbonyl iron susp 15 mg/1.25ml (elemental iron)**  
**FERROUS SULFATE – ferrous sulfate liquid 220 MG/5mL (44 mg/5mL ELEMENTAL Fe)**  
**ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)**  
**ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)**  
**ferrous sulfate syrup 300 mg/5ml (60 mg/5ml elemental fe)**

### SINGLE-AGENT STATINS (for eligible members ages 40-75)

**lovastatin tab 20 mg, 40 mg**  
**pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg (Pravachol)**  
**simvastatin tab 10 mg, 20 mg, 40 mg (Zocor)**

### TOBACCO CESSATION

**bupropion hcl (smoking deterrent) tab er 12hr 150 mg**  
**nicotine polacrilex gum 2 mg, 4 mg**  
**nicotine polacrilex lozenge 2 mg, 4 mg**  
**nicotine polacrilex td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr**  
**NICOTINE TRANSDERMAL SYSTEM – nicotine td patch 24 hr kit 21-14-7 mg/24hr**  
**NICOTROL INHALER – nicotine inhaler system 10 mg (4 mg delivered)**

Generic Drugs = **bold** Brand Drugs = CAPITAL LETTERS

## TOBACCO CESSATION (CONTINUED)

NICOTROL NS – nicotine nasal spray 10 mg/ml (0.5 mg/spray)  
**varenicline tartrate tablet 0.5 mg, 1 mg (base equiv)**  
VARENCLINE STARTING MONTH - varenicline tartrate tab 0.5 mg x 11 & tab 1 mg x 42 pack

## VACCINES (for eligible members ages 9-45)

GARDASIL 9 – human papillomavirus (hpv) 9-valent recomb vac im susp  
GARDASIL 9 – human papillomavirus (hpv) 9-valent recomb vac susp pref syr

## VACCINES (for eligible adults ages 19 and older)

SHINGRIX – zoster vaccine recombinant adjuvanted for im inj 50 mcg/0.5ml

## VACCINES

ABRYSCO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml  
ACTHIB – haemophilus b polysaccharide conjugate vaccine for inj  
ADACEL – tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml  
AFLURIA QUADRIVALENT – influenza virus vaccine split quadrivalent im inj  
AFLURIA QUADRIVALENT – influenza virus vac split quadrivalent susp pref syr 0.25ml  
AFLURIA QUADRIVALENT – influenza virus vac split quadrivalent susp pref syr 0.5ml  
AREXVY – rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml  
BEXSERO – meningococcal vac b (recomb omv adjuv) inj prefilled syringe  
BOOSTRIX – tet tox-diph-acell pertuss ad inj 5-2.5-18.5 lf-lf-mcg/0.5ml  
COMIRNATY - covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3 ml  
COMIRNATY - covid-19 mrna vac tris-sucrose-pfizer im susp 30 mcg/0.3ml  
DAPTACEL – diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml  
ENGERIX-B – hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml  
ENGERIX-B – hepatitis b vaccine (recombinant) susp pref syr 20 mcg/ml  
ENGERIX-B – hepatitis b vaccine (recombinant) 20 mcg/ml  
FLUAD QUADRIVALENT - influenza vac type a&b surface ant adj quad pref syr 0.5 ml  
FLUARIX QUADRIVALENT – influenza virus vac split quadrivalent susp pref syr 0.5ml  
FLUBLOK QUADRIVALENT – influenza vac recomb ha quad pf soln pref syr 0.5 ml  
FLUCELVAX QUADRIVALENT – influenza vac tissue-cultured subunit quadrivalent im susp  
FLUCELVAX QUADRIVALENT – influenza vac tiss-cult subunit quad susp pref syr 0.5 ml  
FLULAVAL QUADRIVALENT– influenza virus vac split quadrivalent susp pref syr 0.5ml  
FLUMIST QUADRIVALENT- influenza vaccine live quadrivalent intranasal susp  
FLUZONE HIGH-DOSE PF – influenza virus vac split high-dose pf susp pref syr 0.7ml  
Generic Drugs = **bold** Brand Drugs = CAPITAL LETTERS

## VACCINES (CONTINUED)

FLUZONE QUADRIVALENT– influenza virus vaccine split quadrivalent im inj  
FLUZONE QUADRIVALENT – influenza virus vaccine split quadrivalent inj 0.5 ml  
FLUZONE QUADRIVALENT – influenza virus vac split quadrivalent susp pref syr 0.5ml  
HAVRIX – hepatitis a vaccine inj susp 720 el unit/0.5ml  
HAVRIX – hepatitis a vaccine inj susp 1440 el unit/ml  
HEPLISAV-B – hepatitis b vaccine recom adjuvanted pref syr 20 mcg/0.5ml  
HIBERIX – haemophilus b polysaccharide conjugate vac for inj 10 mcg  
INFANRIX – diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml  
IPOL INACTIVATED IPV – poliovirus vaccine, ipv injection  
JYNNEOS – smallpox & monkeypox vac, live 0.5ml  
KINRIX – diph-tetanus-acell pert & polio virus, ipv vac susp pref syr 0.5ml  
M-M-R II – measles-mumps-rubella virus vaccines for inj soln  
MENACTRA – meningococcal (a, c, y, and w-135) conjugate vaccine inj  
MENQUADFI - meningococcal (a, c, y, and w-135) conjugate vaccine inj  
MENVEO – meningococcal (a, c, y, and w-135) oligo conj vac for inj  
MENVEO – meningococcal (a, c, y, and w-135) oligo coj vac im soln  
MODERNA COVID-19 VACCINE / 6MO-11Y - covid-19 mrna vaccine 6mo-11yr-moderna im susp 25 mcg/0.25 ml  
NOVAVAX COVID-19 VACCINE / 2023-24 – covid-19 subunit prot recom adjuv vac-novavax im 5 mcg/0.5 ml  
PEDIARIX – diph-tetanus tox-acell pert-hepatitis b-polio ipv vac susp pref syr  
PEDVAX HIB – haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml  
PENBRAYA – meningococcal acyw – mening B vac for inj  
PENTACEL – diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp  
PFIZER-BIONTECH COVID-19 VACCINE / 5-11Y - covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3 ml  
PFIZER-BIONTECH COVID-19 VACCINE / 6MO-4Y - covid-19 mrna vac tris-s 6mo-4y-pfizer im susp 3 mcg/0.3 ml  
PNEUMOVAX 23 – pneumococcal vaccine polyvalent inj 25 mcg/0.5ml  
PREHEVBRIO – hepatitis b vaccine 3-antigen (recombinant) susp 10 mcg/ml  
PREVNAR 13 – pneumococcal 13-valent conjugate vaccine inj  
PREVNAR 20 – pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml  
PRIORIX – measles-mumps-rubella virus vaccine for subcutaneous susp  
PROQUAD – measles-mumps-rubella-varicella virus vaccines for susp  
QUADRACEL – diph-tetanus tox ad-acell pert & polio virus, ipv vac inj  
RECOMBIVAX HB – hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml  
RECOMBIVAX HB – hepatitis b vaccine (recombinant) susp pref syr 10 mcg/ml

## VACCINES (CONTINUED)

RECOMBIVAX HB – hepatitis b vaccine (recombinant)  
susp pref syr 40 mcg/ml

ROTARIX – rotavirus vaccine, live for oral susp

ROTATEQ – rotavirus vaccine, live oral pentavalent soln

SPIKEVAX COVID-19 VACCINE - covid-19 mrna vaccine-  
moderna im susp pref syr 50 mcg/0.5 ml

SPIKEVAX COVID-19 VACCINE - covid-19 (sars-cov-2) mrna  
vacc-moderna im susp 50 mcg/0.5 ml

TDVAX – tetanus-diphtheria toxoids (td) inj 2-2  
lf/0.5ml

TENIVAC – tetanus-diphtheria toxoids (td) inj 5-2 lfu

TRUMENBA – meningococcal group b vac (recomb) im  
susp prefilled syr

TWINRIX – hepatitis a (inact)-hep b (recomb) vac inj  
720-20 elu-mcg/ml

VAQTA – hepatitis a vaccine inj susp 25 unit/0.5ml

VAQTA – hepatitis a vaccine inj susp 50 unit/ml

VARIVAX – varicella virus vac live for subcutaneous  
inj 1350 pfu/0.5ml

VAXELIS – diph-tet tox-ac pert ad-polio ipv-hib-hep b  
rec susp pre syr

VAXELIS – diph-tet tox-ac pert ad-polio ipv-hib-  
hepatitis b recmb susp

VAXNEUVANCE - pneumococcal 15-valent conjugate  
vaccine sus pref syr 0.5ml

## Recommendations on Contraceptives by Health Resources and Services Administration (HRSA) CONTRACEPTIVES

Eligible benefit plans include coverage under the Affordable Care Act for the following contraceptives to be covered at \$0. To determine cost share for medications not listed below, log onto your account at MyPrime.com. Please refer to your benefit materials for coverage details and the plan website for current information as this publication is subject to change.

*Generic prescription drugs are shown in lower-case boldface type. Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand. Brand prescription drugs are shown in capital letters followed by the generic name. Generic medicines are available for many of the brand-name drugs listed though may not be available in all strengths.*

### Barrier Method Types

#### -Cervical Caps-

FEMCAP – cervical cap 22 mm, 26 mm, 30 mm

#### -Diaphragms-

CAYA – diaphragm arc-spring

OMNIFLEX DIAPHRAGM - diaphragms

WIDE-SEAL SILICONE DIAPHR – diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 8 mm, 90 mm 95 mm

#### -Female Condom-

FC2 FEMALE CONDOM – condoms- female

#### -Male Condom-

ALL MALE CONDOMS

#### -Spermicide-

ENCARE – nonoxynol-9 vaginal suppos 100 mg

GYNOL II VAGINAL – nonoxynol-9 gel 3%

VCF VAGINAL CONTRACEPTIVE – nonoxynol-9 film 28%

VCF VAGINAL CONTRACEPTIVE – nonoxynol-9 foam 12.5%

VCF VAGINAL GEL CONTRACEPTIVE – nonoxynol-9 gel 4%

#### -Sponge-

TODAY SPONGE – nonoxynol-9 vaginal sponge 1000 mg

#### -Vaginal pH Regulator Gel-

PHEXXI - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%

### Emergency Method Types

#### -Emergency Ella-

ELLA – ulipristal acetate tab 30 mg

#### -Emergency Progestin-

**Aftera**

**Afterpill**

**Curae**

**Econtra One Step**

**Her style**

**levonorgestrel tab - 1.5 mg**

**My Choice**

**My Way**

**New Day**

**Opcicon One-Step**

**Option 2**

**React**

**Take Action**

### Hormonal Method Types

#### -Injectable Progestin-

DEPO-SUBQ PROVERA 104 –

medroxyprogesterone acetate susp pref syr 104 mg/0.65mL

**medroxyprogesterone acetate im susp prefilled syr or im susp 150 mg/mL (Depo-provera contraceptive)**

#### -Oral Combined-

**Afirmelle - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg**

**Altavera – levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg**

**Alyacen 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg**

**Alyacen 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg**

**Apri - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg**

**Aranelle - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg**

**Aubra eq - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg**

**Aurovela 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg**

**Aurovela 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg**

**Aurovela 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)**

**Aurovela fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg**

**Aurovela fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg**

**Aviane - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg**

**Ayuna - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg**

**Azurette - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)**

**Balziva - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg**

**Blisovi 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)**

**Blisovi fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg**

**Blisovi fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg**

**Briellyn - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg**

**Charlotte 24 fe - norethindrone acetate/ethinyl estradiol/fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)**

**Chateal eq - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg**

## Hormonal Method Types

### -Oral Combined Continued-

Cryelle-28 - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg  
Cyred - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Cyred eq - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Dasetta 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg  
Dasetta 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg  
Delyla - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg  
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5) (Mircette)  
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)  
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)  
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)  
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral)  
Elinest - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg  
Enpresse-28 - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30 mg-mcg  
Enskyce - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Estarylla - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg  
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg  
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg  
Falmina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg  
Finzala - norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)  
Gemily - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)  
Hailey 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg  
Hailey 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)  
Hailey fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg  
Hailey fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg  
Isibloom - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Jasmiel - drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)  
Juleber - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Junel 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg  
Junel 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg  
Junel fe 24 - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)  
Junel fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg  
Junel fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg  
Kaitlib fe - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)  
Kalliga - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Kariva - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5) (Mircette)

### -Oral Combined Continued-

Kelnor 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg  
Kelnor 1/50 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg  
Kurvelo - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Larin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg  
Larin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg  
Larin 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)  
Larin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg  
Larin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg  
Layolis fe - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)  
Leena - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg  
Lessina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg  
Levonest - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg  
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg  
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg  
Levora 0.15/30-28 - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Lo-zumandimine - drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)  
Loestrin 1/20-21 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg  
Loestrin 1.5/30-21 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg  
Loestrin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg  
Loestrin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg  
LO LOESTRIN FE - norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)  
Loryna - drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)  
Low-ogestrel - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg  
Lutera - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg  
Marlissa - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg  
Merzee - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)  
Mibelas 24 fe - norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)  
Microgestin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg  
Microgestin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg  
Microgestin 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)  
Microgestin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg  
Microgestin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg  
Mili - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg  
Mono-linyah - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg



### *-Oral Combined Continued-*

NATAZIA – estradiol valerate-dienogest tab 3 mg/2-2 mg/2-3 mg/1 mg  
**Necon 0.5/35-28 - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg**  
NEXTSTELLIS – drospirenone-estetrol tab 3-14.2 mg  
**Nikki - drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg**  
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg  
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)  
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg  
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg  
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg  
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg  
norethindrone acetate/ethinyl estradiol/fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)  
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)  
norgestimate & ethinyl estradiol tab 0.25 mg- 35 mcg  
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg  
norgestimate-eth estrad tab 0.18-35/0.215-35/ 0.25-35 mg-mcg  
**Nortrel 0.5/35 (28) - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg**  
**Nortrel 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg**  
**Nortrel 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg**  
**Nylia 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg**  
**Nylia 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg**  
**Nymyo - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg**  
**Ocella - drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)**  
**Philith - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg**  
**Pimtree - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)**  
**Pirmella 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg**  
**Pirmella 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg**  
**Portia-28 - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg**  
**Reclipsen - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg**  
**Simliya - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5) (Mircette)**  
**Sprintec 28 - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg**  
**Sronyx - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg**  
**Syeda - drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)**  
**Tarina 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)**  
**Tarina fe 1/20 eq - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg**  
**Taysofy - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)**

### *-Oral Combined Continued-*

**Tilia fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg**  
**Tri-estarylla - norgestimate-eth estrad tab 0.18-35/0.215-35 /0.25-35 mg-mcg**  
**Tri-legest fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg**  
**Tri-linyah - norgestimate-eth estrad tab 0.18-35/0.215-35/0. 25-35 mg-mcg**  
**Tri-lo-estarylla - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg**  
**Tri-lo-marzia - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg**  
**Tri-lo-mili - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg**  
**Tri-lo-sprintec - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg**  
**Tri-mili - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25 -35 mg-mcg**  
**Tri-nymyo - norgestimate-eth estrad tab 0.18-35/0.215-35/0.2 5-35 mg-mcg**  
**Tri-sprintec - norgestimate-eth estrad tab 0.18-35/0.215-35/ 0.25-35 mg-mcg**  
**Tri-vylibra - norgestimate-eth estrad tab 0.18-35/0.215-35/0 .25-35 mg-mcg**  
**Tri-vylibra lo - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg**  
**Trivora-28 - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg**  
**Turqoz- - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg**  
TYBLUME - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg  
**Tydemy - drospirenone-ethinyl estrad-levomefolate tab 3-0.03 -0.451 mg (Safyral)**  
VELIVET – desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025 mg-mg  
**Vestura - drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)**  
**Vienna - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg**  
**Viorele - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5) (Mircette)**  
**Volnea - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg (21/5) (Mircette)**  
**Vyfemla - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg**  
**Vylibra - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg**  
**Wera - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg**  
**Wymzya fe - norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg**  
**Zovia 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg**  
**Zumandimine - drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)**

### **Hormonal Method Types**

#### *-Oral Extended Continuous-*

**Amethia - levonorg-eth est tab 0.15-0.03 mg(84) & eth est tab 0.01 mg (7) (Seasonique)**  
**Amethyst - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg**  
**Ashlyna - levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7) (Seasonique)**  
**Camrese - levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7) (Seasonique)**  
**Camrese lo - levonorg-eth est tab 0.1-0.02 mg (84) & eth est tab 0.01 mg (7) (Loseasonique)**

*-Oral Extended Continuous Continued-*

Daysee - levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7) (Seasonique)  
Dolishale - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg  
Fayosim - levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette)  
Iclevia - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg  
Introvale - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg  
Jaimiess - levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01mg (7) (Seasonique)  
Jolessa - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg  
levonorg-eth est tab 0.1-0.02 mg(84) & eth est tab 0.01 mg(7) (Loseasonique)  
levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette)  
levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7) (Seasonique)  
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg  
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg  
Lojaimiess - levonorg-eth est tab 0.1-0.02mg (84) & eth est tab 0.01mg (7) (Loseasonique)  
Rivelsa - levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette)  
Setlakin - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg  
Simpesse - levonorg-eth est tab 0.15-0.03 mg (84) & eth est tab 0.01 mg (7) (Seasonique)

*-Oral Progestin-*

Camila - norethindrone tab 0.35 mg  
Deblitane - norethindrone tab 0.35 mg  
Errin - norethindrone tab 0.35 mg  
Heather - norethindrone tab 0.35 mg  
Incassia - norethindrone tab 0.35 mg  
Jencycla - norethindrone tab 0.35 mg  
Lyleq - norethindrone tab 0.35 mg  
Lyza - norethindrone tab 0.35 mg  
Nora-be - norethindrone tab 0.35 mg  
norethindrone tab 0.35 mg  
Norlyroc- norethindrone tab 0.35 mg  
Sharobel - norethindrone tab 0.35 mg  
SLYND - drospirenone tab 4 mg

*-Transdermal Combined -*

norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24Hr  
TWIRLA - levonorgestrel-ethinyl estradiol transdermal ptwk 120-30 mcg/24hr  
Xulane - norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr  
Zafemy - norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr

*-Vaginal Combined -*

ANNOVERA - segesterone acetate-ethinyl estradiol vaginal ring 0.15-0.013 mg/24hr  
NUVARING - etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr

## **NOTICE OF NONDISCRIMINATION PRACTICES**

***Effective July 18, 2016***

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or gender. Blue Cross does not exclude people or treat them differently because of race, color, national origin, age, disability, or gender.

Blue Cross provides resources to access information in alternative formats and languages:

- Auxiliary aids and services, such as qualified interpreters and written information available in other formats, are available free of charge to people with disabilities to assist in communicating with us.
- Language services, such as qualified interpreters and information written in other languages, are available free of charge to people whose primary language is not English.

If you need these services, contact us at 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711.

If you believe that Blue Cross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or gender, you can file a grievance with the Nondiscrimination Civil Rights Coordinator

- by email at: [Civil.Rights.Coord@bluecrossmn.com](mailto:Civil.Rights.Coord@bluecrossmn.com)
- by mail at: Nondiscrimination Civil Rights Coordinator  
Blue Cross and Blue Shield of Minnesota and Blue Plus  
M495  
PO Box 64560  
Eagan, MN 55164-0560
- or by phone at: 1-800-509-5312

Grievance forms are available by contacting us at the contacts listed above, by calling 1-800-382-2000 or by using the telephone number on the back of your member identification card. TTY users call 711. If you need help filing a grievance, assistance is available by contacting us at the numbers listed above.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights

- electronically through the Office for Civil Rights Complaint Portal, available at: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
- by phone at:  
1-800-368-1019 or 1-800-537-7697 (TDD)
- or by mail at:  
U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Room 509F  
HHH Building  
Washington, DC 20201

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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This information is available in other languages. Free language assistance services are available by calling the toll free number below. For TTY, call 711.

Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al 1-855-903-2583. Para TTY, llame al 711.

Yog tias koj hais lus Hmoob, muaj kev pab txhais lus pub dawb rau koj. Hu rau 1-800-793-6931. Rau TTY, hu rau 711.

Haddii aad ku hadasho Soomaali, adigu waxaad heli kartaa caawimo luqad lacag la'aan ah. Wac 1-866-251-6736. Markay tahay dad maqalku ku adag yahay (TTY), wac 711.

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بصنلا فئاھلل 9123-569-866-1 مۆرلاب لصتا. قېناجلا قېوغللا قىدعاسملا تامدخ كل رفوتت ، قېيرعلا ئىحتت تنك اذا  
مقرلاب لصتا 711.

Nếu quý vị nói Tiếng Việt, có sẵn các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Gọi số 1-855-315-4015. Người dùng TTY xin gọi 711.

Afaan Oromoo dubbattu yoo ta'e, tajaajila gargaarsa afaan hiikuu kaffaltii malee. Argachuuf 1-855-315-4016 bilbilaa. TTY dhaaf, 711 bilbilaa.

如果您說中文，我們可以為您提供免費的語言協助服務。請撥打 1-855-315-4017。聽語障專 (TTY)，請撥打 711。

Если Вы говорите по-русски, Вы можете воспользоваться бесплатными услугами переводчика. Звоните 1-855-315-4028. Для использования телефонного аппарата с текстовым выходом звоните 711.

Si vous parlez français, des services d'assistance linguistique sont disponibles gratuitement. Appelez le +1-855-315-4029. Pour les personnes malentendantes, appelez le 711.

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한국어를 사용하시는 경우, 무료 언어 지원 서비스가 제공됩니다. 1-855-904-2583 으로 전화하십시오. TTY 사용자는 711 로 전화하십시오.

ຖາວອນພາສາລາວໄດ, ມາການບວການຊວຍເຫຼອພາສາໃຫຍ່ຈາພຣ. ໃຫໂທຫາ 1-866-356-2423 ສາວບ. TTY, ໃຫໂທຫາ 711.

Kung nagsasalita kayo ng Tagalog, mayroon kayong magagamit na libreng tulong na mga serbisyo sa wika. Tumawag sa 1-866-537-7720. Para sa TTY, tumawag sa 711.

Wenn Sie Deutsch sprechen, steht Ihnen fremdsprachliche Unterstützung zur Verfügung. Wählen Sie 1-866-289-7402. Für TTY wählen Sie 711.

បសនេបអកនយាយភាសាខ្មែរមន អកអាចរកបានសេវាជនយភាសាភីតគីតៃថ្ម ទសពមកេលខ 1-855-906-2583 ៤ សម្រាប់ TTY សមទសពមកេលខ 711 ៤

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