



Health Care Reform Contraceptive Drugs

Comprehensive List - Updated October 2021

The Affordable Care Act (ACA) requires most health plans to pay for certain preventive services at no cost to you. Contraceptives are included as a preventive service under the ACA.

The following contraceptive drugs are available with a \$0 copayment. Generic drugs are shown in lowercase type. Brand drugs are shown in uppercase type.

afirmelle tab	ayuna tab
aftera tab	azurette tab
afterpill tab	balziva tab
altavera tab	bekyree tab
alyacen 1/35 tab	blisovi 24 fe tab
alyacen 7/7/7 tab	blisovi fe 1.5/30 tab
amethia lo tab	blisovi fe 1/20 tab
amethia tab	briellyn tab
amethyst tab	camila tab
apri tab	camrese lo tab
aranelle tab	camrese tab
ashlyna tab	caziant tab
aubra eq tab	CERVICAL CAP
aubra tab	cesia tab
aurovela 1.5/30 tab	chateal eq tab
aurovela 1/20 tab	chateal tab
aurovela 24 fe tab	CONTRACEPTIVE FILM
aurovela fe 1.5/30 tab	CONTRACEPTIVE FOAM
aurovela fe 1/20 tab	CONTRACEPTIVE GEL
aviane tab	cryselle-28 tab

- Note: This list is subject to change. Also, not all medications may be covered on your formulary. Please refer to your Navitus formulary for a complete list of covered products.
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cyclafem 1/35 tab	femynor tab
cyclafem 7/7/7 tab	gianvi tab
cyred eq tab	gildagia tab
cyred tab	gildess 1.5/30 tab
dasetta 1/35 tab	gildess 1/20 tab
dasetta 7/7/7 tab	gildess 24 fe tab
daysee tab	gildess fe 1.5/30 tab
deblitane tab	gildess fe 1/20 tab
delyla tab	hailey 1.5/30 tab
DEPO-SUBQ PROVERA 104	hailey 24 fe tab
desogestrel/ethinyl estra tab	hailey fe 1.5/30 tab
dolishale tab	hailey fe 1/20 tab
drospirenone/ethinyl estr tab	heather tab
econtra ez tab	iclevia tab
econtra one-step tab	incassia tab
elinest tab	introvale tab
ELLA TAB	isibloom tab
emoquette tab	jaimiess tab
ENCARE	jasmiel tab
enpresse-28 tab	jencycla tab
enskyce tab	jolessa tab
errin tab	jolivette tab
estarylla tab	juleber tab
ethynodiol diacetate/ethi tab	junel 1.5/30 tab
fallback solo tab	junel 1/20 tab
falmina tab	junel fe 1.5/30 tab
fayosim tab	junel fe 1/20 tab
FEMALE CONDOMS	junel fe 24 tab

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kaitlib fe tab

kalliga tab

kariva tab

kelnor 1/35 tab

kelnor 1/50 tab

kimidess tab

kurvelo tab

KYLEENA IUD

larin 1.5/30 tab

larin 1/20 tab

larin 24 fe tab

larin fe 1.5/30 tab

larin fe 1/20 tab

larissia tab

layolis fe tab

leena tab

lessina tab

levonest tab

levonorgestrel and ethiny tab

LEVONORGESTREL TAB

levonorgestrel tab

levonorgestrel/ethinyl es tab

levora 0.15/30-28 tab

LILETTA IUD

lillow tab

lo-zumandimine tab

loestrin 1.5/30-21 tab

loestrin 1/20-21 tab

loestrin fe 1.5/30 tab

loestrin fe 1/20 tab

lojaimiess tab

lomedica 24 fe tab

loryna tab

low-ogestrel tab

lutra tab

lyleq tab

lyza tab

marlissa tab

medroxyprogesterone aceta

microgestin 1.5/30 tab

microgestin 1/20 tab

microgestin 24 fe tab

microgestin fe 1.5/30 tab

microgestin fe 1/20 tab

microgestin fe tab

mili tab

MIRENA IUD

mono-lynyah tab

mononessa tab

my choice tab

my way tab

myzilra tab

necon 0.5/35-28 tab

necon 1/35 tab

necon 7/7/7 tab

new day tab

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next choice one dose tab

next choice tab

nikki tab

nora-be tab

norethindrone & ethinyl e tab

norethindrone acetate/eth tab

norethindrone tab

norethindrone/ethinyl est tab

norgestimate/ethinyl estr tab

norgestrel/ethinyl estrad tab

norlyda tab

norlyroc tab

nortrel 0.5/35 (28) tab

nortrel 1/35 (28) tab

nortrel 1/35 tab

nortrel 7/7/7 tab

NUVARING

nylia 7/7/7 tab

nymyo tab

ocella tab

opcicon one-step tab

option 2 tab

orsythia tab

ORTHO DIAPHRAGM

ORTHO EVRA

PARAGARD INTRAUTERINE COP IUD

philith tab

pimtrea tab

pirmella 1/35 tab

pirmella 7/7/7 tab

PLAN B ONE-STEP TAB

PLAN B TAB

portia-28 tab

preventeza tab

previfem tab

quasense tab

react tab

reclipsen tab

rivelsa tab

setlakin tab

sharobel tab

simliya tab

simpesse tab

SKYLA IUD

solia tab

sprintec 28 tab

sronyx tab

syeda tab

take action tab

tarina 24 fe tab

tarina fe 1/20 eq tab

tarina fe 1/20 tab

tilia fe tab

TODAY SPONGE

tri-estarylla tab

tri-legest fe tab

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tri-linyah tab

tri-lo-estarylla tab

tri-lo-marzia tab

tri-lo-mili tab

tri-lo-sprintec tab

tri-mili tab

tri-nymyo tab

tri-previfem tab

tri-sprintec tab

tri-vylibra lo tab

tri-vylibra tab

tri femynor tab

trinessa lo tab

trinessa tab

trivora-28 tab

tulana tab

velivet tab

vestura tab

vienva tab

viorele tab

volnea tab

vyfemla tab

vylibra tab

wera tab

wymzya fe tab

XULANE

xulane

zafemy

zarah tab

zenchent fe tab

zenchent tab

zeosa tab

zovia 1/35 tab

zovia 1/35e tab

zovia 1/50e tab

zumandimine tab

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Health Care Reform

Preventive Drug Coverage Guidelines

November 2021

The Affordable Care Act (ACA) requires that eligible people get certain preventive services at no cost. The following four categories and related drugs are clinical recommendations in the ACA. They are included in the ACA as preventive services. The ACA was passed in 2010.

Breast Cancer Prevention

Prescribe for women who are at increased risk of breast cancer (5-year risk of three percent or greater) and at a low risk for adverse drug effects. This applies to women without symptoms age 35 years or older. Also, they should not have a prior diagnosis of breast cancer, ductal carcinoma in situ (DCIS) or lobular carcinoma in situ (LCIS). These drugs should not be used in women who have a history of thromboembolic events (deep venous thrombosis, pulmonary embolus, stroke, or transient ischemic attack).

Medications	Coverage Guideline	Age Guideline
anastrozole	1 mg daily for up to 5 years	Women, age 35 and older
exemestane	25 mg daily for up to 5 years	Women, age 35 and older
tamoxifen	20 mg daily for up to 5 years	Women, age 35 and older
raloxifene	60 mg daily for up to 5 years	Women, age 35 and older

Cardiovascular Disease Primary Prevention

To prevent cardiovascular events and mortality, prescribe low-to-moderate statins for adults without a history of cardiovascular disease when they 1) are 40 to 75 years of age, 2) have greater than or equal to one risk factor, such as dyslipidemia, diabetes, hypertension, or smoking, and 3) when the calculated 10-year risk of a cardiovascular event is greater than or equal to 10 percent.

Medications	Coverage Guideline	Age Guideline
atorvastatin	10-20 mg for moderate-intensity regimen	Adults aged 40-75 years
lovastatin	20 mg for low-intensity regimen 40 mg for moderate-intensity regimen	Adults aged 40-75 years
pravastatin	10-20 mg for low-intensity regimen 40-80 mg for moderate-intensity regimen	Adults aged 40-75 years
rosuvastatin	5-10 mg once daily for moderate-intensity regimen. Quantity Limits apply	Adults aged 40-75 years
simvastatin	10 mg for low-intensity regimen 20-40 mg for moderate-intensity regimen	Adults aged 40-75 years



Colorectal Cancer Screening

Medications	Coverage Guideline	Age Guideline
Bowel Prep: peg 3350/electrolytes solution and trilyte	Limited to 2 fills/calendar year	Covered for screening for colorectal cancer in adults between the ages of 45 and 75

Heart Attack Prevention

Medications	Coverage Guideline	Age Guideline
aspirin	Prescribe when potential benefit (due to reduced heart attacks) outweighs the potential harm (due to an increase in GI hemorrhage) in men ages 45-79 years and women ages 55-79 years	aspirin is covered for women of all ages and men between 45 and 79

HIV preexposure prophylaxis (PrEP)

Medications	Coverage Guideline	Age Guideline
Descovy	If emtricitabine/tenofovir disoproxil is not appropriate therapy as part of the prior authorization	None
emtricitabine/tenofovir disoproxil fumarate	Offer PrEP with effective antiretroviral therapy for HIV-negative people at high risk of acquiring HIV infection, which included men who have sex with men, those at risk through heterosexual contact, and people who inject drugs	None

Smoking Cessation

Medications	Coverage Guideline	Age Guideline
bupropion (Zyban equivalent) Nicotrol Nasal Spray Nicotrol Inhaler Nicotine Kits nicotine patch (Nicoderm equivalent) nicotine gum (Nicorette equivalent) nicotine lozenge (Commit equivalent) Chantix	Provide tobacco cessation intervention to those adults that use tobacco products. Includes FDA-approved tobacco cessation medications (including both prescription and over-the-counter medications)	18 years and older



Vitamins and Minerals

Medications	Coverage Guideline	Age Guideline
fluoride	Prescribe to preschool children older than 6 months of age whose primary water source is deficient in fluoride	0 months to five years
folic acid	Prescribe to women planning or capable of pregnancy as a daily supplement containing 0.4 to 0.8 mg (400 to 800 ug) of folic acid	No age guidelines
iron	Prescribe to children aged 6 to 12 months who are at increased risk of iron deficiency anemia	0 months to 1 year