

SilverScript®

Essential Health Supplemental Benefit Offered by some former employer/union/trust plans

Your former employer/union/trust has purchased additional coverage for certain prescription drugs, covered by your plan. You will have a \$0 copay for these prescription drugs.

This guide lists the drugs covered under this Essential Health Supplemental Benefit by categories.

Some of the prescription drugs included in this document are not covered by Medicare Part D and are not included in your formulary drug list. Keep in mind, coverage for these prescription drugs **does not apply to your Medicare prescription drug out-of-pocket costs.** (This amount does not help you qualify for catastrophic coverage.) You are unable to file a Medicare appeal or grievance for these drugs, and if you get Extra Help from Medicare to pay for your prescription drugs, it will not apply to these drugs.

For more information, call the toll-free telephone number on your member ID card. We're available to help you 24 hours a day, 7 days a week. **TTY users call 711.**

See your Evidence of Coverage for a complete description of plan benefits, exclusions, limitations, and conditions of coverage. Plan features and availability may vary by service area. The formulary may change at any time. You will receive notice when necessary.

Key

Drug Name	Requirements/Limits
UPPERCASE = Brand-name prescription drugs	QL = Quantity Limit. For certain, drugs our plan limits the amount of the drug that we will cover.
Lowercase italics = Generic medications	PA = Prior Authorization. Our plan requires you or our provider to get prior authorization for certain drugs. This means that you will need to get approval from us before you fill your prescriptions. If you don't get approval, we may not cover the drug.
	B/D = Part B vs Part D. This prescription drug has a Part B versus Part D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.
	MO = Mail Order. For certain kinds of drugs, you can use CVS Caremark® Mail Service Pharmacy. Generally, the drugs available through mail order are drugs that you take on a regular basis, for a chronic or long-term medical condition. Drugs available through mail-order are marked as "MO" in our Drug List.
	ND = Non Part D Drug. Certain drugs not covered by Medicare Part D and not found on the formulary. However, your plan has chosen to provide coverage for select Non Part D prescription drugs as indicated in the list below.

Drug Name	Requirements/Limits
ANALGESICS	
<i>ASPIRIN</i>	
<i>adult aspirin regimen</i>	ND
<i>aspirin</i>	ND
<i>aspirin 81</i>	ND
<i>aspirin 81 low dose</i>	ND
<i>aspirin adult low dose</i>	ND
<i>aspirin ec</i>	ND
<i>aspirin low dose</i>	ND
ANTINEOPLASTIC AGENTS	
<i>HORMONAL ANTINEOPLASTIC AGENTS</i>	
<i>anastrozole</i>	MO
<i>exemestane</i>	MO

Drug Name	Requirements/Limits
<i>tamoxifen citrate</i>	MO
CARDIOVASCULAR	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS	
<i>atorvastatin calcium</i>	QL (30 EA per 30 days) MO
<i>fluvastatin</i>	QL (60 EA per 30 days) MO
<i>fluvastatin sodium er</i>	QL (30 EA per 30 days) MO
<i>lovastatin</i>	MO
<i>pravastatin sodium</i>	QL (30 EA per 30 days) MO
<i>rosuvastatin calcium</i>	QL (30 EA per 30 days) MO
<i>simvastatin</i>	QL (30 EA per 30 days) MO
Electrolytes/Minerals/Metals/Vitamins	
Electrolytes/Minerals/Metals/Vitamins	
<i>fa-8</i>	ND
<i>folic acid capsule 800mcg</i>	ND
<i>folic acid tablet 800mcg</i>	ND
Vitamins	
<i>folate</i>	ND
<i>folic acid tablet 400mcg</i>	ND
ENDOCRINE AND METABOLIC	
CONTRACEPTIVES	
<i>afirmelle</i>	
<i>altavera</i>	
<i>alyacen 1/35</i>	MO
<i>alyacen 7/7/7</i>	
<i>amethia</i>	
<i>amethyst</i>	
ANNOVERA	QL (1 EA per 365 days) MO
<i>apri</i>	
<i>aranelle</i>	MO
<i>ashlyna</i>	
<i>aubra eq</i>	
<i>aurovela 1.5/30</i>	
<i>aurovela 1/20</i>	
<i>aurovela 24 fe</i>	
<i>aurovela fe 1.5/30</i>	
<i>aurovela fe 1/20</i>	
<i>aviane</i>	
<i>ayuna</i>	
<i>azurette</i>	
BALCOLTRA	MO
<i>balziva</i>	
BEYAZ	MO
<i>blisovi 24 fe</i>	MO
<i>blisovi fe 1.5/30</i>	MO
<i>blisovi fe 1/20</i>	
<i>briellyn</i>	
<i>camila</i>	MO

Drug Name	Requirements/Limits
CAMRESE	
CAMRESE LO	
CAYA	ND
<i>charlotte 24 fe</i>	
<i>chateal eq</i>	
<i>cryselle-28</i>	MO
<i>cyred</i>	
<i>cyred eq</i>	
<i>dasetta 1/35</i>	
<i>dasetta 7/7/7</i>	
<i>daysee</i>	
<i>deblitane</i>	
<i>delyla</i>	
DEPO-PROVERA CONTRACEPTIVE	MO
DEPO-SUBQ PROVERA 104	MO
<i>desogestrel/ethinyl estradiol</i>	MO
<i>dolishale</i>	
<i>drospirenone/ethinyl estradiol</i>	MO
<i>drospirenone/ethinyl estradiol/levomefolate calcium</i>	MO
<i>elinest</i>	
ELLA	MO
<i>eluryng</i>	
<i>enpresse-28</i>	
<i>enskyce</i>	MO
<i>errin</i>	MO
<i>estarylla</i>	MO
<i>ethynodiol diacetate/ethinyl estradiol</i>	MO
ETONOGESTREL/ETHINYL ESTRADIOL	MO
<i>falmina</i>	
<i>fayosim</i>	
FC2 FEMALE CONDOM	ND
FEMCAP	ND
<i>femynor</i>	
<i>finzala</i>	
<i>gemmily</i>	MO
GENERESS FE	MO
<i>hailey 1.5/30</i>	MO
<i>hailey 24 fe</i>	
<i>hailey fe 1.5/30</i>	
<i>hailey fe 1/20</i>	
<i>haloette</i>	
<i>heather</i>	
<i>iclevia</i>	
<i>incassia</i>	
<i>introvale</i>	
<i>isibloom</i>	
<i>jaiessi</i>	

Drug Name	Requirements/Limits
<i>jasmiel</i>	
<i>jencycla</i>	
JOLESSA	
<i>juleber</i>	
<i>junel 1.5/30</i>	
<i>junel 1/20</i>	
<i>junel fe 1.5/30</i>	MO
<i>junel fe 1/20</i>	MO
<i>junel fe 24</i>	
<i>kaitlib fe</i>	MO
<i>kalliga</i>	
<i>kariva</i>	
<i>kelnor 1/35</i>	MO
<i>kelnor 1/50</i>	MO
<i>kurvelo</i>	
KYLEENA	
<i>larin 1.5/30</i>	
<i>larin 1/20</i>	
<i>larin 24 fe</i>	
<i>larin fe 1.5/30</i>	
<i>larin fe 1/20</i>	
LAYOLIS FE	
LEENA	
<i>lessina</i>	
<i>levonest</i>	
<i>levonorgestrel and ethinyl estradiol</i>	MO
<i>levonorgestrel/ethinyl estradiol</i>	MO
<i>levora 0.15/30-28</i>	
LILETTA	
LO LOESTRIN FE	MO
<i>lo-zumandimine</i>	MO
<i>loestrin 1.5/30-21</i>	
<i>loestrin 1/20-21</i>	
<i>loestrin fe 1.5/30</i>	
<i>loestrin fe 1/20</i>	
<i>lojaimiess</i>	MO
<i>loryna</i>	
LOSEASONIQUE	MO
<i>low-ogestrel</i>	
<i>lutera</i>	MO
<i>lyleq</i>	
<i>lyza</i>	
<i>marlissa</i>	MO
<i>medroxyprogesterone acetate</i>	MO
<i>merzee</i>	MO
<i>mibelas 24 fe</i>	
MICROGESTIN 1.5/30	

Drug Name	Requirements/Limits
MICROGESTIN 1/20	
<i>microgestin 24 fe</i>	
MICROGESTIN FE 1.5/30	
MICROGESTIN FE 1/20	
<i>mili</i>	
MINASTRIN 24 FE	MO
MIRCETTE	MO
MIRENA	
<i>mono-linyah</i>	
NATAZIA	MO
<i>necon 0.5/35-28</i>	
NEXPLANON	
NEXTSTELLIS	MO
<i>nikki</i>	
NORA-BE	
<i>norethindrone</i>	MO
<i>norethindrone & ethinyl estradiol ferrous fumarate</i>	MO
<i>norethindrone acetate/ethinyl estradiol</i>	MO
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	MO
<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	MO
<i>norgestimate/ethinyl estradiol</i>	MO
<i>norlyda</i>	
<i>norlyroc</i>	
<i>nortrel 0.5/35 (28)</i>	MO
<i>nortrel 1/35 28-day regimen</i>	
<i>nortrel 1/35 21-day regimen</i>	MO
<i>nortrel 7/7/7</i>	
NUVARING	MO
<i>nylia 1/35</i>	
<i>nylia 7/7/7</i>	MO
<i>nymyo</i>	
OCELLA	
OMNIFLEX DIAPHRAGM	ND
OPTIONS CONCEPTROL VAGINAL CONTRACEPTIVE	ND
OPTIONS GYNOL II VAGINAL CONTRACEPTIVE	ND
<i>orsythia</i>	
ORTHO DIAPHRAGM ALL-FLEX/65MM	ND
ORTHO DIAPHRAGM ALL-FLEX/70MM	ND
ORTHO DIAPHRAGM ALL-FLEX/75MM	ND
ORTHO DIAPHRAGM ALL-FLEX/80MM	ND
PARAGARD INTRAUTERINE COPPER CONTRACEPTIVE T380A	ND
PHEXXI	MO
<i>philith</i>	
<i>pimtrea</i>	
<i>pirmella 1/35</i>	MO
<i>pirmella 7/7/7</i>	MO

Drug Name	Requirements/Limits
<i>portia-28</i>	
QUARTETTE	MO
<i>reclipsen</i>	
RIVELSA	
SAFYRAL	MO
SEASONIQUE	MO
<i>setlakin</i>	
<i>sharobel</i>	
SHUR-SEAL	ND
<i>simliya</i>	
<i>simpesse</i>	MO
SKYLA	
SLYND	MO
<i>sprintec 28</i>	
<i>sronyx</i>	MO
<i>syeda</i>	
<i>tarina 24 fe</i>	
<i>tarina fe 1/20 eq</i>	
TAYTULLA	MO
TILIA FE	
TODAY SPONGE	ND
<i>tri femynor</i>	
<i>tri-estarylla</i>	MO
<i>tri-legest fe</i>	MO
<i>tri-linyah</i>	
<i>tri-lo-estarylla</i>	
<i>tri-lo-marzia</i>	
<i>tri-lo-mili</i>	
<i>tri-lo-sprintec</i>	MO
<i>tri-mili</i>	
<i>tri-nymyo</i>	
<i>tri-sprintec</i>	
<i>tri-vylibra</i>	
<i>tri-vylibra lo</i>	
<i>trivora-28</i>	MO
TYBLUME	MO
<i>tydemy</i>	
VCF VAGINAL CONTRACEPTIVE FILM	ND
VCF VAGINAL CONTRACEPTIVE FOAM	ND
VCF VAGINAL CONTRACEPTIVEGEL	ND
<i>velivet</i>	MO
<i>vestura</i>	
<i>vienva</i>	
<i>viorele</i>	MO
<i>volnea</i>	
<i>vyfemla</i>	MO
<i>vylibra</i>	

Drug Name	Requirements/Limits
<i>wera</i>	
WIDE-SEAL SILICONE DIAPHRAGM KIT 60	ND
WIDE-SEAL SILICONE DIAPHRAGM KIT 65	ND
WIDE-SEAL SILICONE DIAPHRAGM KIT 70	ND
WIDE-SEAL SILICONE DIAPHRAGM KIT 75	ND
WIDE-SEAL SILICONE DIAPHRAGM KIT 80	ND
WIDE-SEAL SILICONE DIAPHRAGM KIT 85	ND
WIDE-SEAL SILICONE DIAPHRAGM KIT 90	ND
WIDE-SEAL SILICONE DIAPHRAGM KIT 95	ND
<i>wymzya fe</i>	
<i>xulane</i>	
YASMIN 28	MO
YAZ	MO
<i>zafemy</i>	
<i>zovia 1/35</i>	
<i>zumandimine</i>	
MISCELLANEOUS	
<i>raloxifene hydrochloride</i>	MO
GASTROINTESTINAL	
LAXATIVES	
CLENPIQ	
<i>gavilyte-c</i>	MO
<i>gavilyte-g</i>	MO
GOLYTELY	MO
MOVIPREP	MO
OSMOPREP	MO
<i>peg-3350/electrolytes</i>	MO
<i>peg-3350/electrolytes/ascorbate</i>	
<i>peg-3350/nacl/na bicarbonate/kcl</i>	MO
PLENVU	MO
SODIUM SULFATE/POTASSIUM SULFATE/MAGNESIUM SULFATE	MO
SUFLAVE	
SUPREP BOWEL PREP KIT	MO
SUTAB	MO
IMMUNOLOGIC AGENTS	
VACCINES	
ACTHIB	
ADACEL	
BCG VACCINE	
BEXSERO	
BOOSTRIX	
DAPTACEL	
DENGVAXIA	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC	
ENGERIX-B	B/D

Drug Name	Requirements/Limits
GARDASIL 9	
HAVRIX	
HEPLISAV-B	B/D
HIBERIX	
IMOVAX RABIES (H.D.C.V.)	B/D
INFANRIX	
IPOL INACTIVATED IPV	
IXIARO	
JYNNEOS	B/D
KINRIX	
M-M-R II	
MENACTRA	
MENQUADFI	
MENVEO	
PEDIARIX	
PEDVAX HIB	
PENTACEL	
PREHEVBRIO	B/D
PRIORIX	
PROQUAD	
QUADRACEL	
RABAVERT	B/D
RECOMBIVAX HB	B/D
ROTARIX	
ROTATEQ	
SHINGRIX	QL (2 EA per 999 days)
TDVAX	
TENIVAC	
TICOVAC	
TRUMENBA	
TWINRIX	
TYPHIM VI	
VAQTA	
VARIVAX	
YF-VAX	
NUTRITIONAL/SUPPLEMENTS	
<i>ELECTROLYTES/MINERALS/VITAMINS, ORAL</i>	
<i>fluoride</i>	MO
<i>fluoritab</i>	
<i>sodium fluoride tablet</i>	
<i>sodium fluoride tablet chewable, solution</i>	MO
SMOKING CESSATION	
<i>SMOKING CESSATION</i>	
<i>bupropion hcl sr</i>	
<i>bupropion hydrochloride er (sr)</i>	
CHANTIX STARTING MONTH PAK	PA
COMMIT	ND

Drug Name	Requirements/Limits
NICODERM CQ	ND
NICORETTE MINI	ND
NICORETTE REFILL GUM 2MG	ND
NICORETTE REFILL GUM 4MG	ND
NICORETTE STARTER KIT GUM 2MG	ND
NICORETTE STARTER KIT GUM 4MG	ND
NICORETTE GUM 2MG	ND
NICORETTE GUM 4MG	ND
NICORETTE LOZENGE	ND
<i>nicotine mini lozenge</i>	ND
<i>nicotine polacrilex</i>	ND
<i>nicotine polacrilex refill</i>	ND
<i>nicotine polacrilex starter kit</i>	ND
<i>nicotine transdermal system</i>	ND
<i>nicotine transdermal system step 1</i>	ND
<i>nicotine transdermal system step 2</i>	ND
<i>nicotine transdermal system step 3</i>	ND
NICOTROL INHALER	
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<i>norethindrone acetate/ethinyl estradiol/ferrous</i>		ROTATEQ.....	8
<i>fumarate</i>	5	SAFYRAL.....	6
<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	5	SEASONIQUE	6
<i>norgestimate/ethinyl estradiol</i>	5	<i>setlakin</i>	6
<i>norlyda</i>	5	<i>sharobel</i>	6
<i>norlyroc</i>	5	SHINGRIX	8
<i>nortrel 0.5/35 (28)</i>	5	SHUR-SEAL	6
<i>nortrel 1/35</i>	5	<i>simliya</i>	6
<i>nortrel 7/7/7</i>	5	<i>simpesse</i>	6
NUVARING.....	5	<i>simvastatin</i>	2
<i>nylia 1/35</i>	5	SKYLA	6
<i>nylia 7/7/7</i>	5	SLYND.....	6
<i>nymyo</i>	5	<i>sodium fluoride</i>	8
OCELLA	5	SODIUM SULFATE/POTASSIUM	
OMNIFLEX DIAPHRAGM.....	5	SULFATE/MAGNESIUM SULFATE	7
OPTIONS CONCEPTROL.....	5	<i>sprintec 28</i>	6
OPTIONS GYNOL II	5	<i>sronyx</i>	6
<i>orsythia</i>	5	SUFLAVE	7
ORTHO DIAPHRAGM.....	5	SUPREP	7
OSMOPREP.....	7	SUTAB	7
PARAGARD INTRAUTERINE COPPER		<i>syeda</i>	6
CONTRACEPTIVE.....	5	<i>tamoxifen citrate</i>	2
PEDIARIX	8	<i>tarina 24 fe</i>	6
PEDVAX HIB.....	8	<i>tarina fe 1/20 eq</i>	6
<i>peg-3350/electrolytes</i>	7	TAYTULLA.....	6
<i>peg-3350/electrolytes/ascorbate</i>	7	TDVAX	8
<i>peg-3350/nacl/na bicarbonate/kcl</i>	7	TENIVAC.....	8
PENTACEL	8	TICOVAC	8
PHEXXI	5	TILIA FE.....	6
<i>philith</i>	5	TODAY SPONGE.....	6
<i>pimtrea</i>	5	<i>tri femynor</i>	6
<i>pirmella 1/35</i>	5	<i>tri-estarylla</i>	6
<i>pirmella 7/7/7</i>	5	<i>tri-legest fe</i>	6
PLENVU	7	<i>tri-lynyah</i>	6
<i>portia-28</i>	6	<i>tri-lo-estarylla</i>	6

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<i>tri-lo-marzia</i>	6	VCF VAGINAL	6
<i>tri-lo-mili</i>	6	<i>velivet</i>	6
<i>tri-lo-sprintec</i>	6	<i>vestura</i>	6
<i>tri-mili</i>	6	<i>vienna</i>	6
<i>tri-nymyo</i>	6	<i>viorele</i>	6
<i>tri-sprintec</i>	6	<i>volnea</i>	6
<i>trivora-28</i>	6	<i>vyfemla</i>	6
<i>tri-vylibra</i>	6	<i>vylibra</i>	6
<i>tri-vylibra lo</i>	6	<i>wera</i>	7
TRUMENBA	8	WIDE-SEAL SILICONE DIAPHRAGM.....	7
TWINRIX.....	8	<i>wymzya fe</i>	7
TYBLUME.....	6	<i>xulane</i>	7
<i>tydemy</i>	6	YASMIN 28	7
TYPHIM VI	8	YAZ.....	7
VAQTA.....	8	YF-VAX	8
VARENICLINE	9	<i>zafemy</i>	7
VARENICLINE TARTRATE	9	<i>zovia 1/35</i>	7
VARIVAX	8	<i>zumandimine</i>	7