



# Contraceptive Services Only

\$0 Cost-share Services, Products and Drugs for Women<sup>1,2,3</sup>

Effective: May 1, 2024

**Connecticut**

**Delaware**

**District of Columbia**

**Illinois**

**Maine**

**Maryland**

**Massachusetts**

**Minnesota**

**New Jersey**

**New York**

**Oregon**

**Washington**



United  
Healthcare

# U.S. Preventive Services Task Force A & B recommendation medications and supplements

The health reform law (Affordable Care Act) requires most health plans to pay for birth control (contraceptives and sterilization) for women at no cost to you. Some organizations can choose not to cover birth control as part of their group health plan due to sincerely held religious beliefs or moral convictions. If you are a member of one of these groups (Eligible Organizations), and the group has elected an optional accommodation, UnitedHealthcare will cover certain birth control products and services at no cost to you.

You can use your Contraceptive Services Only ID card to get those birth control services, products and drugs on this list that your group has designated for the optional accommodation for \$0 cost-share if they are:

- Prescribed by a network health care professional such as your doctor.
- For services performed by a network health care professional.
- For products and drugs filled at a network pharmacy.

## Birth control<sup>4</sup>

### Over-the-counter birth control (contraceptives) for women

#### Birth control contraceptives

The following forms of birth control (contraceptives) are available OTC and will be covered at \$0 cost share when filled at a network pharmacy. Ask your pharmacy to submit a claim<sup>5</sup> to UnitedHealthcare.

Contraceptive films	Contraceptive suppositories
Contraceptive foams	Emergency birth control (contraceptives) (AfterPill, generic for Plan B, generic for Plan B One-Step)
Contraceptive gels	Condoms
Contraceptive sponges	Opill

### Prescription birth control (contraceptives)

KEY

**pill**.....Hormonal Birth Control Pill (oral contraceptive)

**ring**.....Hormonal Birth Control Ring (contraceptive vaginal ring)

**shot**.....Hormonal Birth Control Shot (injectable contraceptive)

**patch**.....Hormonal Birth Control Patch (contraceptive transdermal patch)

**gel**.....Non-Hormonal Birth Control Gel (vaginal contraceptive)

#### Brand birth control (contraceptives)

<b>ring</b>	Annovera	<b>pill</b>	Nextstellis	<b>pill</b>	Yasmin
<b>shot</b>	Depo-Provera 104 mg	<b>gel</b>	Phexxi	<b>pill</b>	Yaz
<b>pill</b>	Lo Loestrin FE	<b>pill</b>	Slynd <sup>6</sup>		
<b>pill</b>	Natazia	<b>patch</b>	Twirla		

#### Generic birth control (contraceptives)

<b>pill</b>	Afirmelle, Aubra, Aubra EQ, Aviane, Delyla, Falmina, Larissia, Lessina, Levonorgestrel/Ethinyl Estradiol 0.1/0.02 mg, Lutera, Orsythia, Sronyx, Vienva (generic Alesse)
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**Generic birth control (contraceptives) continued...**

<b>pill</b>	Altavera, Ayuna, Chateal, Chateal EQ, Kurvelo, Levonorgestrel/Ethinyl Estradiol 0.15/0.03 mg, Levora-28, Lillow, Marissa, Portia-28 (generic Nordette)
<b>pill</b>	Alyacen 1/35, Cyclofem 1/35, Dasetta 1/35, Nortrel 1/35, Nylia 1/35, Pirmella 1/35 (generic Ortho-Novum 1/35)
<b>pill</b>	Alyacen 7/7/7, Dasetta 7/7/7, Nortrel 7/7/7, Nylia 7/7/7, Pirmella 7/7/7 (generic Ortho-Novum 7/7/7)
<b>pill</b>	Amethia, Ashlyna, Camrese, Daysee, Jaimiess, Levonorgestrel/Ethinyl Estradiol 0.15/0.03 mg, Simpesse (generic Seasonique)
<b>pill</b>	Amethyst, Dolishale, Levonorgestrel/Ethinyl Estradiol 0.09/0.02 mg (generic Lybrel)
<b>pill</b>	Apri, Cyred, Cyred EQ, Desogestrel/Ethinyl Estradiol 0.15/0.03 mg, Emoquette, Enskyce, Isibloom, Juleber, Kalliga, Reclipsen, Solia (generic Desogen, Ortho-Cept)
<b>pill</b>	Aranelle, Leena (generic Tri-Norinyl)
<b>pill</b>	Aurovela, Junel, Larin, Microgestin, Norethindrone/Ethinyl Estradiol 1 mg/20 mcg (generic Loestrin 1 mg/20 mcg)
<b>pill</b>	Aurovela, Hailey, Junel, Larin, Microgestin, Norethindrone/Ethinyl Estradiol 1.5 mg/30 mcg (generic Loestrin 1.5 mg/30 mcg)
<b>pill</b>	Aurovela 24 FE, Blisovi 24 FE, Hailey 24 FE, Junel 24 FE, Larin 24 FE, Microgestin 24 FE, Norethindrone/Ethinyl Estradiol 1 mg/20 mcg - FE (24), Tarina 24 FE (generic Loestrin 24 FE)
<b>pill</b>	Aurovela FE, Blisovi FE, Gildess FE, Hailey FE, Junel FE, Larin FE, Microgestin FE, Norethindrone/Ethinyl Estradiol/FE, Tarina FE (generic Loestrin FE)
<b>pill</b>	Azurette, Desogestrel/Ethinyl Estradiol 0.15/0.02 mg, Kariva, Pimtrea, Simliya, Viorele, Volnea (generic Mircette)
<b>pill</b>	Balziva, Briellyn, Norethindrone/Ethinyl Estradiol 0.4 mg/35 mcg, Philith, Vyfemla (generic Ovcon-35)
<b>pill</b>	Camila, Deblitane, Errin, Heather, Incassia, Jencycla, Lyleq, Lyza, Nora-BE, Norethindrone 35 mcg, Norlyda, Norlyroc, Sharobel, Tulana (generic Micronor, Nor-Q-D)
<b>pill</b>	Camrese Lo, Levonorgestrel/Ethinyl Estradiol 0.1/0.02 mg (84), LoJaimiess (generic LoSeasonique)
<b>pill</b>	Caziant, Cesia, Velivet (generic Cyclessa)
<b>pill</b>	Charlotte 24 FE, Finzala, Mibelas 24 FE, Norethindrone/Ethinyl Estradiol FE 1/0.02 mg Chewable (generic Minastrin 24 FE)
<b>pill</b>	Cryselle-28, Elinest, Low-Ogestrel, Turqoz (generic Lo/Ovral)
<b>pill</b>	Drospirenone/Ethinyl Estradiol/Levomefolate 3-0.02-0.451 mg, (generic Beyaz)
<b>pill</b>	Drospirenone/Ethinyl Estradiol/Levomefolate 3-0.03-0.451 mg, Tydemy (generic Safyral)
<b>ring</b>	Eluryng, Enilloring, Etonogestrel/Ethinyl Estradiol 0.12/0.015 mg/24 hr, Haloette (generic NuvaRing)
<b>pill</b>	Enpresse-28, Levonest, Levonorgestrel/Ethinyl Estradiol 6-5-10, Trivora-28 (generic Triphasil)
<b>pill</b>	Estarylla, Femynor, Mili, Mono-Linyah, Mononessa, Norgestimate/Ethinyl Estradiol 0.25/0.035 mg, Nymyo, Previfem, Sprintec-28, Vylibra (generic Ortho-Cyclen)
<b>pill</b>	Ethinodiol Diacetate/Ethinyl Estradiol 1/0.035 mg, Kelnor 1/35, Zovia 1/35, Zovia 1/35E (generic Demulen 1/35)
<b>pill</b>	Ethinodiol Diacetate/Ethinyl Estradiol 1/0.05 mg, Kelnor 1/50 (generic Demulen 1/50)
<b>pill</b>	Fayosim, Levonorgestrel/Ethinyl Estradiol, Rivelsa (generic Quartette)
<b>pill</b>	Gemmily, Merzee, Norethindrone/Ethinyl Estradiol FE, Taysofy (generic Taytulla)
<b>pill</b>	Iclevia, Introvale, Jolessa, Levonorgestrel/Ethinyl Estradiol 0.15/0.03 mg, Setlakin (generic Seasonale)

## Generic birth control (contraceptives) continued...

<b>pill</b>	Kaitlib FE Chew, Layolis FE Chew, Norethindrone/Ethinyl Estradiol FE 0.8/0.025 mg Chew (generic Generess FE)
<b>pill</b>	Levonorgestrel/Ethinyl Estradiol FE 0.1 mg/20 mcg, Joyeaux (generic Balcoltra)
<b>shot</b>	Medroxyprogesterone Acetate 150 mg (generic Depo-Provera 150 mg)
<b>pill</b>	Necon 0.5 mg/35 mcg, Nortrel 0.5 mg/35 mcg, Wera 0.5 mg/35 mcg (generic Brevicon, Modicon)
<b>patch</b>	Norelgestromin/Ethinyl Estradiol 150/35 mcg, Xulane, Zafemy (generic Ortho Evra)
<b>pill</b>	Norethindrone/Ethinyl Estradiol FE 0.4/0.35 mg, Wymzya FE (generic Femcon FE)
<b>pill</b>	Norethindrone/Ethinyl Estradiol FE 1-20/1-30/1-35 mg-mcg, Tilia FE, Tri-Legest FE (generic Estrostep FE)
<b>pill</b>	Norgestimate/Ethinyl Estradiol 0.18-0.215-0.25/0.035 mg, Tri-Estarylla, Tri Femynor, Tri-Linyah, Tri-Mili, Trinessa, Tri-Nymyo, Tri-Sprintec, Tri-Vylibra (generic Ortho Tri-Cyclen)
<b>pill</b>	Norgestimate/Ethinyl Estradiol 0.18-0.215-0.25/0.025 mg, Tri-Lo-Estarylla, Tri-Lo-Marzia, Tri-Lo-Mili, Tri-Lo-Sprintec, Tri-Vylibra Lo (generic Ortho Tri-Cyclen Lo)
<b>pill</b>	Tyblume

## Prescription cervical caps and diaphragms for birth control (contraceptives)

### Brand cervical caps

Femcap

### Brand diaphragms

Caya

Wide-Seal

Omniflex

## Prescription emergency birth control (contraceptives)

### Brand emergency birth control (contraceptives)

AfterPill

Plan B One-Step

ella

### Generic emergency birth control (contraceptives)

Aftera, Curae, EContra EZ, EContra One Step, Her Style, Levonorgestrel 1.5 mg, My Choice, My Way, New Day, Opcicon One-Step, Option 2, React, Take Action (generic Plan B One-Step)

## What if my doctor prescribes a similar preventive medication that is not on this list?

The health reform law allows plans to use reasonable medical management to decide which product/medications are provided at \$0 cost share. If you choose a no-cost product from the list applicable to your plan, your cost at the pharmacy will be \$0. If you choose a covered product/medication that is not on the list, a copay or coinsurance may be required. And this cost will apply to your deductible if you have one.

You can ask your doctor for a prescription for one of the medications on this list that your doctor feels would work for you. For some medical reasons, your doctor may decide you need a medication that is not on this list.<sup>7</sup> If so, you can request the medication you need by calling the number on your health plan ID card, and asking how to obtain coverage at no additional cost. Medical reasons may include side effects, and whether you can use the medication/product as required. Your doctor may visit [uhcprovider.com](http://uhcprovider.com) for details on how to submit and what information to include with

**Patient Protection and Affordable Care Act \$0 Cost-Share Preventive Medications Exemption Requests.**

## Medical birth control

These medical birth control services will be covered at no cost to you when prescribed and performed by a network health care professional. However, birth control products or drugs used as part of these services may be billed at full cost, unless they appear on this list.

### Medical birth control

#### Contraceptive counseling

To start, keep or stop the use of birth control services, products and drugs.

#### Diaphragms and cervical caps

#### IUDs (intrauterine devices)

#### Implantable rods

These flexible rods are implanted under the skin, and can provide birth control for up to 3 years.

#### Injectable contraceptives

#### Getting sterilized and anesthesia

(including cutting or blocking the Fallopian tubes or oviducts, i.e. getting your tubes tied)

#### Surgical sterilization (getting your tubes tied)<sup>8</sup>

## Questions?

Sign in to [myuhc.com](https://myuhc.com) and go to Pharmacy Information or call the number on your health plan ID card.



- 1 Please note this list is subject to change.
- 2 Always refer to your Contraceptive Services Only Booklet to determine your coverage for contraceptives. Where differences are noted, the Contraceptive Services Only Booklet will govern. For example, your Contraceptive Services Only Booklet may only cover medical birth control, and not pharmacy birth control.
- 3 All brand-name medications are trademarks or registered trademarks of their respective owners.
- 4 Additional products not listed on this document are covered at \$0 if your pharmacy benefit plan is administered in Connecticut, Oregon or Washington. Sign in to [myuhc.com](https://myuhc.com) and go to Pharmacy Information or call the number on your member ID card.
- 5 In certain scenarios, your pharmacy may ask you to contact your healthcare provider for a prescription.
- 6 Prior Authorization required unless your pharmacy benefit plan is administered in Maryland, New York, Oregon, or Washington.
- 7 When informed by a member's health care provider, UnitedHealthcare will accommodate a coverage exception request for any member when one of the \$0 cost medications listed on the Preventive Care Medications list may be medically inappropriate as determined by the health care provider for that member and UnitedHealthcare will waive the otherwise applicable cost-sharing for a medication not represented on the Preventive Care Medications list.
- 8 If a member is admitted to an inpatient facility for another reason (for example during maternity/delivery) and has a sterilization procedure performed during that admission, the sterilization or other contraceptive procedure fees are covered under the preventive benefit. However, the facility fees are not covered under the preventive care benefit since the sterilization or other contraceptive procedure is incidental to, and is not the primary reason, for the inpatient admission.

508 Compliant

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