

Contraceptive Drug List



BlueCross BlueShield
of Montana

Effective Jan. 1, 2015

Eligible benefit plans include coverage under the Affordable Care Act for the following contraceptives to be covered at \$0 member cost share. This list will be reviewed periodically and is subject to change. To determine cost share for medications not listed below, log onto your account at MyPrime.com.

Contraceptive Benefit Coverage*

ORAL CONTRACEPTIVES	DRUG STRENGTH	ORAL CONTRACEPTIVES	DRUG STRENGTH
Altavera	0.15 MG-30 MCG	Falmina	0.1 MG-20 MCG
Alyacen 1/35	1 MG-35 MCG	Gianvi	3-0.02 MG
Alyacen 7/7/7	0.5-35 MG-MCG, 0.75-35 MG-MCG, 1-35 MG-MCG	Gildagia	0.4 MG-35 MCG
Amethia	0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Gildess 1.5/30	1.5 MG-30 MCG
Amethia Lo	0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	Gildess 1/20	1 MG-20 MCG
Apri	0.15 MG-30 MCG	Gildess Fe 1.5/30	1.5 MG-30 MCG
Aranelle	0.5-35 MG-MCG, 1-35 MG-MCG, 0.5-35 MG-MCG	Gildess Fe 1/20	1 MG-20 MCG
Aubra	0.1 MG-20 MCG	Heather	0.35 MG
Aviane	0.1 MG-20 MCG	Introvale	0.15-0.03 MG
Azurette	0.15-0.02 MG, 0.01 MG(21/5)	Jencycla	0.35 MG
Balziva	0.4 MG-35 MCG	Jolessa	0.15-0.03 MG
Briellyn	0.4 MG-35 MCG	Jolivette	0.35 MG
Camila	0.35 MG	Junel 1.5/30	1.5 MG-30 MCG
Camrese	0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Junel 1/20	1 MG-20 MCG
Camrese Lo	0.1-0.02MG(84) & ETH EST TAB 0.01MG(7)	Junel Fe 1.5/30	1.5 MG-30 MCG
Caziant	0.1-0.025 MG-MG, 0.125-0.025 MG-MG, 0.15-0.025 MG-MG	Junel Fe 1/20	1 MG-20 MCG
Cesia	0.1-0.025 MG-MG, 0.125-0.025 MG-MG, 0.15-0.025 MG-MG	Kariva	0.15-0.02/0.01 MG(21/5)
Chateal	0.15 MG-30 MCG	Kelnor 1/35	1 MG-35 MCG
Cryselle	0.3 MG-30 MCG	Kurvelo	0.15 MG-30 MCG
Cyclafem 1/35	1 MG-35 MCG	Larin 1.5/30	1.5 MG-30 MCG
Cyclafem 7/7/7	0.5-35 MG-MCG, 0.75-35 MG-MCG, 1-35 MG-MCG	Larin 1/20	1 MG-20 MCG
Dasetta 1/35	1 MG-35 MCG	Larin Fe 1.5/30	1.5 MG-30 MCG
Dasetta 7/7/7	0.5-35 MG-MCG, 0.75-35 MG-MCG, 1-35 MG-MCG	Larin Fe 1/20	1 MG-20 MCG
Daysee	0.15-0.03MG(84) & ETH EST TAB 0.01MG(7)	Leena	0.5-35/1-35/0.5-35 MG-MCG
Deblitane	0.35 MG	Lessina	0.1 MG-20 MCG
Delyla	0.1 MG-20 MCG	Levonest	0.05-30/0.075-40/0.125-30MG-MCG
desogestrel/ ethinyl estradiol	0.15-0.02 MG, 0.01 MG(21/5), 0.15 MG-30 MCG	levonorgestrel/ ethinyl estradiol	0.1 MG-20 MCG, 0.15 MG-30 MCG, 0.1-0.02 MG(84) & ETH EST TAB 0.01 MG(7), 0.15-0.03 MG
drospirenone/ ethinyl estradiol	3-0.03 MG	Levora 0.15/30	0.15 MG-30 MCG
Elinest	0.3 MG-30 MCG	Loryna	3-0.02 MG
Emoquette	0.15 MG-30 MCG	Low-Ogestrel	0.3 MG-30 MCG
Enpresse	0.05-30 MG-MCG, 0.075-40 MG-MCG, 0.125-30MG-MCG	Lutera	0.1 MG-20 MCG
Enskyce	0.15 MG-30 MCG	Lyza	0.35 MG
Errin	0.35 MG	Marlissa	0.15 MG-30 MCG
Estarylla	0.25 MG-35 MCG	Microgestin 1.5/30	1.5 MG-30 MCG
		Microgestin 1/20	1 MG-20 MCG

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

Contraceptive Benefit Coverage*

ORAL CONTRACEPTIVES	DRUG STRENGTH
Microgestin Fe 1.5/30	1.5 MG-30 MCG
Microgestin Fe 1/20	1 MG-20 MCG
Mono-Linyah	0.25 MG-35 MCG
Mononessa	0.25 MG-35 MCG
Myzilra	0.05-30 MG-MCG, 0.075-40 MG-MCG, 0.125-30MG-MCG
Necon 0.5/35	0.5 MG-35 MCG
Necon 1/35	1 MG-35 MCG
Necon 7/7/7	0.5-35 MG-MCG, 0.75-35 MG-MCG, 1-35 MG-MCG
Nikki	3-0.02 MG
Nora-BE	0.35 MG
norethindrone	0.35 MG
norethindrone/ ethinyl estradiol	1 MG-20 MCG, 0.3 MG-30 MCG
norethindrone/ ethinyl estradiol/ ferrous fumarate	1 MG-20 MCG, 1 MG-20 MCG(24)
norgestimate/ ethinyl estradiol	0.18-35 MG-MCG, 0.215-35 MG-MCG, 0.25-35 MG-MCG
norgestrel/ ethinyl estradiol	0.3 MG-30 MCG
Norlyroc	0.35 MG
Nortrel 0.5/35	0.5 MG-35 MCG
Nortrel 1/35	1 MG-35 MCG
Nortrel 7/7/7	0.5-35 MG-MCG, 0.75-35 MG-MCG, 1-35 MG-MCG
Ocella	3-0.03 MG
Orsythia	0.1 MG-20 MCG
Philith	0.4 MG-35 MCG
Pimtrea	0.15-0.02 MG, 0.01 MG(21/5)
Pirmella 1/35	1 MG-35 MCG
Pirmella 7/7/7	0.5-35 MG-MCG, 0.75-35 MG-MCG, 1-35 MG-MCG
Portia	0.15 MG-30 MCG
Previfem	0.25 MG-35 MCG
Quasense	0.15-0.03 MG
Reclipsen	0.15 MG-30 MCG
Sharobel	0.35 MG
Solia	0.15 MG-30 MCG
Sprintec	0.25 MG-35 MCG
Sronyx	0.1 MG-20 MCG
Syeda	3-0.03 MG
Tarina Fe 1/20	1 MG-20 MCG
Tilia Fe	1-20 MG-MCG, 1-30 MG-MCG, 1-35 MG-MCG
Tri-Estarylla	0.18-35 MG-MCG, 0.215-35 MG-MCG, 0.25-35 MG-MCG
Tri-Legest Fe	1-20 MG-MCG, 1-30 MG-MCG, 1-35 MG-MCG
Tri-Linyah	0.18-35 MG-MCG, 0.215-35 MG-MCG, 0.25-35 MG-MCG
Trinessa	0.18-35 MG-MCG, 0.215-35 MG-MCG, 0.25-35 MG-MCG

ORAL CONTRACEPTIVES	DRUG STRENGTH
Tri-Previfem	0.18-35 MG-MCG, 0.215-35 MG-MCG, 0.25-35 MG-MCG
Tri-Sprintec	0.18-35 MG-MCG, 0.215-35 MG-MCG, 0.25-35 MG-MCG
Trivora	0.05-30 MG-MCG, 0.075-40 MG-MCG, 0.125-30MG-MCG
Velivet	0.1-0.025 MG-MG, 0.125-0.025 MG-MG, 0.15-0.025 MG-MG
Vestura	3-0.02 MG
Viorele	0.15-0.02 MG, 0.01 MG(21/5)
Vyfemla	0.4 MG-35 MCG
Wera	0.5 MG-35 MCG
Wymzya Fe	0.4 MG-35 MCG
Zarah	3-0.03 MG
Zenchant	0.4 MG-35 MCG
Zenchant Fe	0.4 MG-35 MCG
Zeosa	0.4 MG-35 MCG
Zovia 1/35E	1 MG-35 MCG

EMERGENCY CONTRACEPTIVES**	DRUG STRENGTH
Fallback Solo	1.5 MG
levonorgestrel	0.75 MG, 1.5 MG
Take Action	1.5 MG

CERVICAL CAPS	IMPLANTABLE
FEMCAP	IMPLANON
PRENTIF CAVITY-RIM CERVICAL CAP	NEXPLANON
PRENTIF FITTING SET	
DIAPHRAGMS	INTRAUTERINE
OMNIFLEX DIAPHRAGM	MIRENA
ORTHO ALL-FLEX	PARAGARD
ORTHO COIL SPRING KIT	SKYLA
ORTHO FLAT SPRING KIT	
WIDE-SEAL SILICONE	PATCH
INJECTIONS	ORTHO EVRA
DEPO-PROVERA CONTRACEPTIVE (GENERIC AVAILABLE)	Xulane
DEPO-SUBQ PROVERA 104	RING
medroxyprogesterone acetate	NUVARING

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

Some of these products may be covered under your medical benefit.

*Prescription coverage for contraception may vary according to the terms and conditions of the plan

**A prescription is required for emergency contraceptives to be covered without cost-sharing under the pharmacy benefit for non-grandfathered plans

This information is for informational purposes only, does not constitute legal or other advice, and should not be relied upon to determine coverage. Affordable Care Act regulations provide for an exemption from the requirement to cover contraceptive services for certain group health plans established or maintained by organizations that qualify as religious employers. Also, federal regulatory agencies have established an accommodation for religious affiliated eligible organizations, in which case separate payment may be available for certain contraceptive services. For more information about the religious employer exemption or eligible organization accommodation, please contact us at the phone number on your member ID card.