Covered Over-the-Counter Drugs

(Revised 1/26/2015) Effective 12/1/2014

Acre Agents, Topical Benzoyl Peroxide 2:5%, 5%, and 10% Analgesics, Topical Capsaicin Topical 0.025%, 0.075%, and 0.1% cream Capsaicin Topical 0.15% liquid Analgesics, Oral and Rectal Acetaminophen Aspirin Ibuprofen Naproxen Sodium ³ Analgesics, Rapid Tabs (Age 0-12) Acetaminophen Acetaminophen Logentics, Rapid Tabs (Age 0-12) Acetaminophen Ibuprofen Acetaminophen Ibuprofen Analgesics, Chewable Tabs (Age 0-12) Acetaminophen Ibuprofen Analgenics, Apid Tabs (Age 0-12) Acetaminophen Ibuprofen Analgenics, Apid Tabs (Age 0-12) Acetaminophen Ibuprofen Analgenics, Apid Tabs (Age 0-12) Acetaminophen Ibuprofen Asterninophen Buprost, Aluminum Hydrox/Aluminum Hydrox Magnesium Hydrox/Aluminum Hydrox Magnesium Hydrox/Aluminum Hydrox/Simethicone Sodium Bicarbonate Antifungals, Topical Creams and Ointments <t< th=""><th></th><th>(Revised 1/20/2013)</th><th></th></t<>		(Revised 1/20/2013)	
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Cetirizine Cetirizine/Pseudoephedrine Diphenhydramine Loratadine			
Cetirizine/Pseudoephedrine Diphenhydramine Loratadine	Antihistamines, Oral (Excluding Rapid Tabs)		
Diphenhydramine Loratadine	Cetirizine		
Loratadine	Cetirizine/Pseudoephedrine		
	Diphenhydramine		
Loratadine/Pseudoephedrine	Loratadine		
	Loratadine/Pseudoephedrine		

(Revised 1/26/2015) Effective 12/1/2014
Covered Over-the-Counter Drugs (Continued)
Cough and Cold Products ¹
Dextromethorphan liquid
Dextromethorphan/Guaifenesin liquid ³
Guaifenesin liquid ³
Pseudoephedrine 30 mg tablet, 60 mg tablet, syrup, and liquid
Iron Supplements for Pregnant Women (Diagnosis and Age Restricted [Age 21-60]) ³
Ferrous Gluconate tablet
Ferrous Sulfate tablet
Insulin ^{2,3}
Miscellaneous
Dimenhydrinate
Ketotifen ophthalmic ³
Levonorgestrel 1.5 mg tablet
Meclizine <mark>³</mark>
Permethrin
Ophthalmic Lubricants ³
Carboxymethycellulose 0.5% and 1% drops and droperette
Hydromellose 0.3% and 0.4% drops and 0.3% gel
Mineral Oil 15% /Petrolatum 85% ointment
Mineral Oil 42.5% /Petrolatum 56.8% ointment
Petrolatum/Mineral oil/Sodium chloride ointment
Polyvinyl Alcohol 1.4% drops
Polyvinyl Alcohol 0.5%/Povidone 0.6% drops
Polyvinyl Alcohol 1.4%/Povidone 0.6% droperette
Propylene glycol 0.3%/Peg400 0.4% drops
Steroids, Topical Low
Hydrocortisone 0.5%, 1% cream
Hydrocortisone 0.5%, 1% ointment
Hydrocortisone 1% lotion
Hydrocortisone 1% solution
Tobacco Cessation ³
Nicotine Gum
Nicotine Patches
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¹ Coverage of over-the-counter (OTC) cough preparations are limited to coverage of cough liquids that treat only coughs. Covered products include those containing a single component, a single cough suppressant, or a combination of an expectorant and cough suppressant.

² Insulin is the only covered OTC product for SeniorCare members.

³ Products are not included in the nursing home daily rate and are separately reimbursable. All other OTCs on this list are covered in the nursing home daily rate and are not separately reimbursable.