

YOUR OTC BENEFITS PROVIDED BY

**MediSun Plus (HMO D-SNP)**YOUR MONTHLY OVER-THE-COUNTER (OTC)
BENEFIT IS:**\$76**

SUS BENEFICIOS DE OTC PROVEIDOS POR

**MediSun Plus (HMO D-SNP)**SU BENEFICIO MENSUAL
PARA MEDICINAS SIN RECETAS ES:**\$76**

QTY.	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
Cantidad	Nombre Genérico	Nombre de Marca	Dosis	Tamaño	Precio
PAIN RELIEVERS • Analgésicos					
P1	ACETAMINOPHEN	Tylenol Extra Strength	500 mg	100	\$9.00
P2	ASPIRIN TABLETS (COATED)	Ecotrin	325 mg	100	\$4.00
P3	BABY ASPIRIN CHEWABLE	Bayer Baby Aspirin Chewable	81 mg	36	\$4.00
P4	ICY HOT MEDICATED PATCH	Icy Hot		5	\$8.00
P5	IBUPROFEN	Advil / Motrin	200 mg	50	\$5.00
P6	HEADACHE PAIN RELIEF	Excedrin Migraine	250-250-65 mg	100	\$9.00
P7	MENTHOL GEL	Mineral Ice		3.5 oz	\$8.00
P8	ACETAMINOPHEN ARTHRITIS	Tylenol Arthritis	650 mg	100	\$11.00
P9	ASPIRIN TABLETS	Bayer Baby Aspirin	81 mg	120	\$4.00
ANTACIDS • Antiácidos					
A1	ACID GONE CHEWABLE	Gaviscon Chewable	160-105 mg	100	\$10.00
A2	ANTACID LIQUID/ANTIGAS	Mylanta / Maalox		12 oz	\$6.00
A3	CALCIUM ANTACID TABLETS	Tums EX Assorted	750 mg	96	\$6.00
A4	CIMETIDINE TABLETS	Tagamet HB 200	200 mg	30	\$12.00
A5	EFFERVESCENT PAIN RELIEF	Alka Seltzer		36	\$7.00
A7	OMEPRAZOLE	Prilosec OTC	20 mg	14	\$12.00
A9	GAS RELIEF REGULAR STRENGTH	Gas-X	80 mg	36	\$8.00

MEMBER'S INFORMATION • Información del Afiliado

Name/Nombre:	Phone/Teléfono:	
Member ID/Nº de Membresía:	PLAN 015 2021-A	
Address/Dirección:	Order Month/Mes de Orden: _____	

There is a quantity limit of five (5) per any single item per monthly order. Exceptions are products containing Dextromethorphan, which are limited to three (3) per monthly order, and blood pressure monitors, which are limited to one (1) per calendar year. Additional limitations and restrictions may apply. You will receive the generic equivalent of all OTC products. The brand you receive may vary. Please consult with your doctor before using any OTC product. If you require assistance with your OTC order, please call 1-855-963-0400.

Hay un límite de cantidad de cinco (5) por cada artículo individual, por pedido mensual. Con la excepción de los productos que contengan Dextrometorfano, que están limitados a tres (3) por pedido mensual y monitores de presión arterial, que están limitados a uno (1) por año calendario. Se pueden aplicar limitaciones y restricciones adicionales. Usted recibirá el equivalente genérico de todos los productos. La marca que recibirá puede variar. Favor de consultar con su doctor antes de usar cualquier producto de OTC. Si necesita ayuda con su orden de OTC, por favor llámenos al 1-855-963-0400.

QTY.	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
Cantidad	Nombre Genérico	Nombre de Marca	Dosis	Tamaño	Precio
ANTI-DIARRHEALS • Antidiarréicos					
D1	LOPERAMIDE TABLETS	Imodium AD Tablets	2 mg	12	\$7.00
D2	LOPERAMIDE SOLUTION	Imodium Solution	1 mg / 7.5 ml	4 oz	\$6.00
D3	BISMATROL	Pepto-Bismol		8 oz	\$5.00
D4	PROBIOTIC WITH PREBIOTIC VEGGIE CAPSULES	Probiotic w Prebiotic Veggie Caps		40	\$14.00
D5	DIGESTIVE ENZYMES	Enzymax Tablets		30	\$12.00
COUGH / COLD / ALLERGY • Tos / Resfriado / Alergia					
C1	GUAIFENESIN TABLETS	Mucinex	400 mg	60	\$12.00
C2	DIPHENHYDRAMINE CAPSULES	Benadryl Capsules	25 mg	24	\$5.00
C3	GUAIFENESIN	Robitussin	200 mg	4 oz	\$6.00
C4	GUAIFENESIN DM **	Robitussin DM **	200 / 20 mg	4 oz	\$6.00
C6	LORATADINE	Claritin / Alavert	10 mg	30	\$12.00
C7	MEDICATED CHEST RUB	Vicks Vaporub		3.5 oz	\$7.00
C8	NASAL SPRAY	Afrin		1 oz	\$7.00
C9	MULTI-SYMPTOM COLD **	Tylenol Cold **		24	\$8.00
C10	SODIUM CHLORIDE NASAL MIST	Ocean Saline Nasal Spray		1.5 oz	\$5.00
C11	SORE THROAT SPRAY	Chloraseptic		6 oz	\$7.00
C12	ORAL THERMOMETER	Oral Thermometer		1	\$7.00
C13	FEXOFENADINE HCL	Allegra	60 mg	12	\$12.00
C14	LORATADINE SYRUP	Claritin Syrup	5 mg	4 oz	\$10.00
C15	FLUTICASONE PROPIONATE	Flonase 120 MD	50 mcg	0.54 oz	\$28.00
C16	CETIRIZINE HCL	Zyrtec	10 mg	30	\$14.00
C17	COUGH DROPS	Halls Honey Lemon		9	\$1.00
C18	FEXOFENADINE HCL	Allegra	180 mg	15	\$13.00
EYE / EAR CARE • Cuidado de la Vista / Oído					
E2	EAR WAX DROPS	Debrox		0.5 oz	\$9.00
E4	EYE DROPS	Visine Redness Relief		0.5 oz	\$6.00
E5	LUTEIN PLUS ZEAXANTHIN TABLETS	Lutein Plus Zeaxanthin Tablets		60	\$14.00
E6	GENTEAL TEARS TWIN PACK	Gentel Tears	2 x 15 ml	0.5 oz	\$16.00
E7	REFRESH TEARS	Refresh Tears	15 ml	0.5 oz	\$13.00
E8	SYSTANE ULTRA	Systane Ultra	10 ml	0.3 oz	\$15.00
INCONTINENCE • Incontinencia					
U1	INCONTINENCE UNDERWEAR UNISEX - SMALL	Incontinence Underwear Unisex - Small		Small	\$19.00
U2	INCONTINENCE UNDERWEAR UNISEX - MEDIUM	Incontinence Underwear Unisex - Medium		Medium	\$19.00
U3	INCONTINENCE UNDERWEAR UNISEX - LARGE	Incontinence Underwear Unisex - Large		Large	\$20.00
U4	INCONTINENCE UNDERWEAR UNISEX - X LARGE	Incontinence Underwear Unisex - X Large		X - Large	\$20.00
U5	DISPOSABLE UNDERPADS 23" X 36"	Disposable Underpads 23" x 36"			\$10.00
FIRST AID • Primeros Auxilios					
F1	ANTI ITCH CREAM	Benadryl Cream		1 oz	\$6.00
F2	BANDAGE STRIPS	Band-Aids		60	\$4.00
F3	CALAMINE LOTION	Caladryl		6 oz	\$6.00
F4	CAPSAICIN CREAM	Zostrix	0.025%	2 oz	\$15.00
F5	ELASTIC BANDAGE	Ace Bandage		1	\$7.00
F6	HOT & COLD THERAPY COMPRESS	Hot & Cold Therapy Compress		1	\$15.00
F7	HYDROCORTISONE CREAM 1%	Cortaid Cream	1%	1 oz	\$6.00
F8	HYDROCORTISONE OINTMENT 1%	Cortaid Ointment	1%	1 oz	\$6.00
F9	MEDICATED CALLUS REMOVER	Dr. Scholl's Callus Remover		4	\$7.00
F10	MUSCLE RUB	Ben-Gay		3 oz	\$9.00
F11	TRIPLE ANTIBIOTIC OINTMENT	Neosporin		1 oz	\$7.00
F12	COTTON BALLS	Cotton Balls		100	\$2.00
F13	IODINE	Iodine	2%	1 oz	\$5.00
F14	HYDROGEN PEROXIDE	Hydrogen Peroxide	3%	16 oz	\$2.00

** Denotes Dextromethorphan containing product. Limit of 3. Indica producto que contiene Dextrometorfano. Límite de 3.

QTY.	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
Cantidad	Nombre Genérico	Nombre de Marca	Dosis	Tamaño	Precio
FEMININE HYGIENE • Higiene Femenina					
W1	CLOTRIMAZOLE VAGINAL	Gyne-Lotrimin	1%	1.5 oz	\$13.00
W2	MICONAZOLE VAGINAL SUPPOSITORIES	Monistat Vaginal Suppositories	200 mg	3 u	\$13.00
W3	MICONAZOLE VAGINAL	Monistat Vaginal Cream	100 mg	1.5 oz	\$13.00
W4	TIOCONAZOLE 1	Tioconazole	300 mg	0.16 oz	\$19.00
LAXATIVES • Laxantes					
L1	BISACODYL TABLETS	Dulcolax	5 mg	25	\$6.00
L2	DOCUSATE SODIUM	Colace	250 mg	100	\$12.00
L3	GLYCERIN SUPPOSITORIES	Fleet Suppositories		25	\$4.00
L4	NATURAL FIBER POWDER	Metamucil		13 oz	\$14.00
L5	SENNA TABS (NATURAL LAXATIVE)	Senokot	8.6 mg	100	\$12.00
L6	POLYETHYLENE GLYCOL 3350	MiraLax		4.1 oz	\$8.00
L7	MINERAL OIL	Mineral oil		16 oz	\$7.00
VITAMINS/MINERALS/HERBS • Vitaminas/Minerales/Hierbas					
V1	CALCIUM CARBONATE	Caltrate	600 mg	100	\$7.00
V2	CALCIUM CARBONATE WITH VITAMIN D3	Caltrate + D3	600 mg	60	\$7.00
V3	CALCIUM CITRATE + VITAMIN D3	Citracal + D3	315 mg	60	\$7.00
V4	CO-ENZYME Q-10	CoQ10	200 mg	30	\$21.00
V6	DAILY MULTI VITAMINS	One A Day Essentials		100	\$6.00
V9	FISH OIL	Fish Oil	1,000 / 300 mg	120	\$9.00
V10	GLUCOSAMINE CHONDROITIN	Glucosamine Chondroitin	1,500/1,200 mg	100	\$15.00
V11	IRON	Feosol	65 mg	100	\$5.00
V12	PROSTATE THERAPY COMPLEX	Urinozinc		60	\$13.00
V13	SAW PALMETTO	Saw Palmetto	500 mg	60	\$8.00
V14	VITRUM MULTI VITAMIN	Centrum Silver		100	\$8.00
V15	VITAMIN A	Vitamin A	10,000 IU	100	\$6.00
V16	VITAMIN B COMPLEX	Mega B Complex		100	\$7.00
V17	VITAMIN C	Vitamin C	500 mg	100	\$4.00
V18	VITAMIN E	Vitamin E	400 IU	100	\$6.00
V19	MELATONIN AND B6	Melatonin and B6	5 mg	60	\$6.00
V20	VITAMIN D3 - 400 IU	Vitamin D3 400 IU	400 IU	100	\$5.00
V21	VITAMIN D3 - 1,000 IU	Vitamin D3 1,000 IU	1,000 IU	60	\$7.00
V22	FOLIC ACID	Folic Acid	800 mcg	100	\$4.00
V23	VITAMIN B12 SUBLINGUAL	B12 Sublingual	1,000 mcg	100	\$8.00
V24	ACIDOPHILUS WITH PECTIN CAPS	Acidophilus with Pectin Caps		100	\$7.00
V25	ALMEBEX PLUS B12	Almebex plus B12		8 oz	\$15.00
V26	VENIPHLEX	Veniphlex (Leg Vein Health)		60	\$19.00
V27	GINKGO BILOBA	Ginkgo Biloba	500 mg	60	\$5.00
V28	EPAMAX	Epamax (Vegetarian EPA & DHA Omega)		60	\$17.00
V29	ZINC SULFATE	Zinc Sulfate	50 mg	100	\$6.00
V30	REUMATOL 3 (SET OF 3 - LIQUID, SPRAY, CREAM)	Reumatol 3 (Arthritis Pain Relief)		1	\$22.00
V31	SERENITAS	Serenitas (Sleep Aid)	3 mg	30	\$16.00
V32	LECITHIN	Lecithin (Cardiovascular Health)	1,200 mg	100	\$7.00
V33	EMERGEN-C	Emergen-C	3.3 oz	10	\$8.00
V34	MERITENE POWDER	Meritene Powder (Protein Supplement)		16 oz	\$16.00
V35	RESTAZE PM	Restaze PM (Sleep Aid)		60	\$17.00
V36	ALMEBEX SUGAR FREE	Almebex Sugar Free		8 oz	\$17.00
V37	IMMUNE UP	Immune Up		8 oz	\$8.00

QTY.	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
Cantidad	Nombre Genérico	Nombre de Marca	Dosis	Tamaño	Precio
V38	AIRBORNE CHEWABLE TABS	Airborne Chewable Tabs		32	\$12.00
V39	ARTHRITIS CREAM	Arthritis Cream (Glucosamine & Chondroitin)		4 oz	\$6.00
V40	COLLAGEN W/VITAMIN C 1,000 mg CAPSULES	Collagen w/Vitamin C 1,000 mg	1,000 mg / 90 mg	60	\$7.00
V41	GLYCOL CAPSULES	GlyCol (Glucose & Cardiovascular Support)		60	\$9.00
V42	NEURO MUSCULAR PLUS WITH FOLIC ACID CAPSULES	Neuro Muscular Plus with Folic Acid		30	\$7.00
V43	NIACIN CAPSULES	Niacin	500 mg	100	\$9.00
V44	TURMERIC PLUS COLEUS FORSKOHLII AND BIOPERINE CAPSULES	Turmeric Plus Coleus Forskohlii and Bioperine		30	\$7.00
MISCELLANEOUS • Misceláneos					
M1	COTTON SWABS	Q-Tips		180	\$3.00
M2	DIMENHYDRINATE	Dramamine	50 mg	12	\$5.00
M3	MOISTURIZER LOTION	Skin Moisturizer		10 oz	\$8.00
M4	PETROLEUM JELLY LIP BALM	Vaseline Lip Balm		0.35 oz	\$2.00
M5	TOOTHBRUSH	Colgate Toothbrush		1	\$3.00
M6	FIXODENT ADHESIVE CREAM	Fixodent Adhesive Cream		2.4 oz	\$6.00
M7	URINARY PAIN RELIEF	Azo Standard	95 mg	30	\$10.00
M8	SALICYLIC ACID	Compound W liquid	17%	0.31 oz	\$11.00
M9	CAVITY PROTECTION TOOTHPASTE PLAIN	Colgate Cavity Protection Toothpaste		6.0 oz	\$4.00
M10	TOTAL WHITENING TOOTHPASTE	Colgate Total Whitening		4.8 oz	\$5.00
M11	DENTURE CLEANSER	Efferdent		40	\$6.00
M12	AUTOMATIC BLOOD PRESSURE MONITOR	Automatic Blood Pressure Monitor		1	\$36.00
M13	SUNSCREEN LOTION SPF 30	Sunscreen Lotion SPF 30		8 oz	\$9.00
M14	VITAMIN E OIL	Vitamin E Oil		2.5 oz	\$11.00
M15	HOME SHARPS CONTAINER	Home Sharps Container		1	\$6.00
M16	DISPOSABLE FACE MASK	Disposable Face Mask		5	\$4.00
M17	HAND SANITIZER*	Hand Sanitizer*		16 oz	\$8.00
M18	BIOTENE DRY MOUTH ORAL RINSE	Biotene Dry Mouth Oral Rinse		16 oz	\$7.00
M19	DIAPER RASH OINTMENT	Desitin Ointment		2 oz	\$5.00
M20	FLUSHABLE WIPES	Flushable Wipes		60 ct	\$6.00
M21	PILL BOX	Pill box		1 ct	\$3.00
M22	UNSCENTED WIPES	Unscented Wipes (Not flushable)		40 ct	\$5.00
ANTI-FUNGAL CREAMS • Cremas para Hongos					
O1	CLOTRIMAZOLE CREAM	Lotrimin Cream	1%	1 oz	\$11.00
O2	TOLNAFTATE	Tinactin	1%	0.5 oz	\$8.00
ANTI-HEMORRHOIDS • Antihemorroidal					
H1	HEMORRHOIDAL OINTMENT	Preparation H Ointment		2 oz	\$10.00
H2	HEMORRHOIDAL SUPPOSITORIES	Preparation H Suppositories		12	\$8.00

*Size may vary depending on availability. El tamaño que recibirá puede variar dependiente de la disponibilidad.

QTY.	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
Cantidad	Nombre Genérico	Nombre de Marca	Dosis	Tamaño	Precio
DIABETIC SECTION • Sección de Diabéticos					
SF1	ALCOHOL SWABS/PADS	Alcohol Swabs/Pads		100	\$3.00
SF3	CHROMIUM PICOLINATE	Chromium Picolinate (Blood Sugar Aid)		100	\$7.00
SF4	DIABETES TRIO	Diabetes Trio		60	\$11.00
SF5	GUAIFENESIN SF	Diabetic Tussin SF	100 mg/5 ml	4 oz	\$7.00
SF7	ISOPROPYL ALCOHOL	Isopropyl Alcohol		16 oz	\$4.00
SF8	SF NATURAL FIBER POWDER	Metamucil SF Powder		10 oz	\$11.00
SF10	GUAIFENESIN DM SF**	Robitussin DM Sugar Free**		4 oz	\$6.00
SF11	SUGAR FREE CALCIUM ANTACID EXTRA STRENGTH	Tums Extra Strength Sugar Free		80	\$6.00
SF12	IROFOL	Iron Supplement	100 mg	4 oz	\$16.00
SF13	GLUCOSE TABLETS	Glucose Tablets	4 g	10	\$4.00
SMOKING CESSATION PRODUCTS • Productos para dejar de fumar					
SC1	STEP 1: NICOTINE 21 MG/24 HR PATCH #7	Step 1: Nicotine 21 MG/24 HR Patch #7	21 mg/24hr	7	\$35.00
SC2	STEP 2: NICOTINE 14 MG/24 HR PATCH #7	Step 2: Nicotine 14 MG/24 HR Patch #7	14 mg/24hr	7	\$35.00
SC3	STEP 3: NICOTINE 7 MG/24 HR PATCH #7	Step 3: Nicotine 7 MG/24 HR Patch #7	7 mg/24hr	7	\$35.00
SC4	STEP 1: NICOTINE 4 MG MINT CHEWING GUM #110	Step 1: Nicotine 4 MG Mint Gum #110	4 mg	110	\$35.00
SC5	STEP 2: NICOTINE 2 MG MINT CHEWING GUM #110	Step 2: Nicotine 2 MG Mint Gum #110	2 mg	110	\$35.00
SC6	STEP 1: NICOTINE 4 MG LOZENGE #72	Step 1: Nicotine 4 MG Lozenge #72	4 mg	72	\$35.00
SC7	STEP 2: NICOTINE 2 MG LOZENGE #72	Step 2: Nicotine 2 MG Lozenge #72	2 mg	72	\$35.00



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MediSun Plus (HMO D-SNP)

YOUR MONTHLY OVER-THE-COUNTER (OTC)

BENEFIT IS:

\$76

SUS BENEFICIOS DE OTC PROVEIDOS POR



MediSun Plus (HMO D-SNP)

SU BENEFICIO MENSUAL

PARA MEDICINAS SIN RECETAS ES:

\$76

Your OTC order cannot exceed the benefit amount listed for your plan. If your OTC order exceeds the benefit amount, then some items in your order may be canceled to meet the plan's benefit amount. If you require assistance with your OTC order, please call 1-855-963-0400 (TTY:711).

Su pedido de OTC no puede exceder el monto del beneficio indicado para su plan. Si su pedido de OTC excede el monto del beneficio, es posible que algunos artículos de su pedido se cancelen para cumplir con el monto del beneficio del plan. Si necesita ayuda con su pedido OTC, llame al 1-855-963-0400 (TTY:711).

HealthSun Health Plans is an HMO plan with a Medicare contract and a Medicaid contract with the State of Florida Agency for Health Care Administration. Enrollment in HealthSun Health Plans depends on contract renewal. HealthSun complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. HealthSun Health Plans es un plan HMO con un contrato de Medicare y un contrato de Medicaid con la Agencia Administradora de la Atención de la Salud del estado de la Florida (AHCA, por sus siglas en inglés) del estado de Florida. La inscripción en HealthSun Health Plans depende de la renovación del contrato.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-336-2069. (TTY: 1-877-206-0500). ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-877-336-2069. (TTY: 1-877-206-0500)."