

OVER-THE-COUNTER (OTC) CATALOG



Easy



Fast



Convenient

We have in place

5

easy ways to order your monthly Over-the-Counter (OTC) products.

1

Phone

Call 1-855-963-0400
TTY 1-877-206-0500

Monday through Friday
from 7 am to 5 pm

2

Online

Sign into your Health Sun
Member Portal:
www.HealthSun.com

3

Fax

786-477-4685

4

Email:

OTCClerks@healthsun.com

5

Mail:

7235 NW 19th Street
Bay E
Miami, FL 33126

Or fill out the enclosed form
and choose from:

2024 OTC Benefit Amounts by Plan

001	HealthSun HealthAdvantage Plan (HMO) MIAMI-DADE COUNTY	Up to \$75 a month for OTC Items
012	HealthSun HealthAdvantage Plan (HMO) BROWARD COUNTY	Up to \$80 a month for OTC Items
013	HealthSun HealthAdvantage Plan (HMO) PALM BEACH COUNTY	Up to \$75 a month for OTC Items
017	HealthSun HealthAdvantage Plus (HMO) MIAMI-DADE COUNTY	Up to \$50 a month for OTC Items
018	HealthSun HealthAdvantage Plus (HMO) BROWARD COUNTY	Up to \$50 a month for OTC Items
020	HealthSun HealthAdvantage Plus (HMO) PALM BEACH COUNTY	Up to \$50 a month for OTC Items
006	HealthSun MediMax (HMO) MIAMI-DADE COUNTY & BROWARD COUNTY	Up to \$100 a month for OTC Items
019	HealthSun MediSun Extra (HMO D-SNP) MIAMI-DADE COUNTY & BROWARD COUNTY	Up to \$125 a month for OTC Items
016	HealthSun MediSun Plus (HMO D-SNP) PALM BEACH COUNTY	Up to \$125 a month for OTC Items
021	HealthSun VitalCare (HMO C-SNP) MIAMI-DADE COUNTY & BROWARD COUNTY	Up to \$50 a month for OTC Items
022	HealthSun VitalCare (HMO C-SNP) PALM BEACH COUNTY	Up to \$50 a month for OTC Items

The OTC benefit does not roll over to the next month. Your monthly amount will depend on the Plan you have.

If you are not sure which is your Plan, you can check your Member ID card or call our customer service at 1-877-336-2069 (TTY: 1-877-206-0500) from 8am to 8pm. During October 1st through March 31st, we are available seven days a week (we are closed on Thanksgiving and Christmas Day). From April 1st until September 30th, our office is open Monday through Friday (we are closed on federal holidays).

There is a quantity limit of five (5) per any single item per monthly order. There are some select items that have special limits and these are marked by a “†”, “‡”, “***”, “◆”, “●●”, “●●●” or “\$” in this catalog. 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.

HealthSun Health Plans OTC Product Order Form

Step 1: Member Information

HealthSun Member ID

DOB

First Name

Last Name

Address

Apt/Suite #

City

State

Zip

Home Phone

Cell Phone

Step 2: Product Selection

ITEM CODE	PRODUCT NAME	ORDER QUANTITY	PRICE
1			\$
2			\$
3			\$
4			\$
5			\$
6			\$
7			\$
9			\$
9			\$
10			\$
11			\$
12			\$

HealthSun Health Plans OTC Product Order Form

ITEM CODE	PRODUCT NAME	ORDER QUANTITY	PRICE
13			\$
14			\$
15			\$
16			\$
17			\$
18			\$

If you are a patient of La Colonia Medical Center or Clinica Las Mercedes, your OTC benefit is administered by your medical center. If you need assistance placing a new order or with an existing order, please call your medical center.

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. The Ensure® Shakes (items V68 and V69) are not available to order if you are enrolled in HealthSun HealthAdvantage Plus (HMO) and HealthSun VitalCare (HMO C-SNP).

There is a quantity limit of five (5) per any single item per monthly order. 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. Additional limitations and restrictions may apply. If you require assistance with your OTC order, please call 1-855-963-0400 (TTY: 711).

HealthSun Health Plans is a Medicare Advantage HMO plan with a Medicare contract and a Medicaid contract with the State of Florida Agency for Health Care Administration. Enrollment in the Plan depends on contract renewal. This document is available in other formats such as Braille, large print or audio. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-336-2069 (TTY: 711).

For more information, please call us at 1-877-336-2069 (TTY: 1-877-206-0500), or visit us at www.HealthSun.com. Our office hours are from 8am to 8pm, From October 1st to March 31st, we are open seven days a week (closed on Christmas Day and Thanksgiving Day). From April 1st to September 30th, we are available Monday through Friday (closed on federal holidays).

OTC Product Order Form

Please check ☒ to order you medications.

You may receive a generic comparable to the name-brand product.

PAIN RELIEVERS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
P1	☐ ACETAMINOPHEN	Tylenol Extra Strength	500 mg	100	\$9.00
P2	☐ ASPIRIN TABLETS (COATED)	Ecotrin	325 mg	100	\$5.00
P3	☐ BABY ASPIRIN CHEWABLE	Bayer Baby Aspirin Chewable	81 mg	36	\$3.00
P4	☐ ICY HOT MEDICATED PATCH	Icy Hot		5	\$9.00
P5	☐ IBUPROFEN	Advil / Motrin	200 mg	50	\$5.00
P6	☐ HEADACHE PAIN RELIEF	Excedrin Migraine	250 – 250 – 65 mg	100	\$10.00
P7	☐ MENTHOL GEL	Mineral Ice		3.5 oz	\$8.00
P8	☐ ACETAMINOPHEN ARTHRITIS	Tylenol Arthritis	650 mg	100	\$12.00
P9	☐ LOW DOSE ASPIRIN TABLETS (ENTERIC COATED)	Bayer Baby Aspirin	81 mg	120	\$6.00
P10	☐ DICLOFENAC SODIUM TOPICAL GEL ARTHRITIS PAIN	Voltaren Topical Arthritis Pain Relief Gel	1%	100 gm	\$17.00
P11	☐ NAPROXEN	Aleve	220 mg	50	\$8.00
P12	☐ LIDOCAINE PATCH	Lidocaine Patch		5	\$11.00
P13	☐ LIDOCAINE ROLL-ON PAIN RELIEF	Lidocaine Roll-On Pain Relief		2.5 oz	\$9.00
P14	☐ ICE BAG	Ice bag		9"	\$10.00
P15	☐ ORAL PAIN RELIEF- BENZOCAINE	Orajel™ Extra Strength	20%	0.42 oz	\$7.00

ANTACIDS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
A1	☐ ACID GONE CHEWABLE	Gaviscon Chewable	160-105 mg	100	\$11.00
A2	☐ ANTACID LIQUID/ANTIGAS	Mylanta / Maalox		12 oz	\$8.00
A3	☐ CALCIUM ANTACID TABLETS	Tums EX Assorted	750 mg	96	\$7.00
A4	☐ CIMETIDINE TABLETS	Tagamet HB 200	200 mg	30	\$14.00
A5	☐ EFFERVESCENT PAIN RELIEF	Alka Seltzer		36	\$9.00
A7	☐ OMEPRAZOLE	Prilosec OTC	20 mg	14	\$11.00
A9	☐ GAS RELIEF REGULAR STRENGTH	Gas-X	80 mg	36	\$7.00

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ANTI-DIARRHEALS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
D1	☐ LOPERAMIDE TABLETS	Imodium AD Tablets	2 mg	12	\$6.00
D2	☐ LOPERAMIDE SOLUTION	Imodium Solution	1 mg / 7.5 ml	4 oz	\$7.00
D3	☐ BISMATROL	Pepto-Bismol		8 oz	\$6.00
D4	☐ PROBIOTIC WITH PREBIOTIC VEGGIE CAPSULES	Probiotic w Prebiotic Veggie Caps		40	\$16.00
D5	☐ DIGESTIVE ENZYMES	Enzymax Tablets		30	\$13.00
D6	☐ DAIRY DIGESTIVE SUPPLEMENT-LACTASE ENZYME	Lactaid Tablets		60	\$22.00

COUGH / COLD / ALLERGY

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
C1	☐ GUAIFENESIN TABLETS	Mucinex	400 mg	60	\$12.00
C2	☐ DIPHENHYDRAMINE CAPSULES/TABLETS	Benadryl Capsules/Tablets	25 mg	24	\$5.00
C3	☐ GUAIFENESIN	Robitussin	200 mg	4 oz	\$7.00
C4	☐ GUAIFENESIN DM**	Robitussin DM**	200 / 20 mg	4 oz	\$7.00
C6	☐ LORATADINE	Claritin / Alavert	10 mg	30	\$14.00
C7	☐ MEDICATED CHEST RUB	Vicks Vaporub		3.5 oz	\$8.00
C8	☐ NASAL SPRAY	Afrin		1 oz	\$6.00
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	\$8.00
C12	☐ ORAL THERMOMETER	Oral Thermometer		1	\$7.00
C13	☐ FEXOFENADINE HCL	Allegra	60 mg	12	\$13.00
C14	☐ LORATADINE SYRUP	Claritin Syrup	5 mg	4 oz	\$12.00
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 Cough Drops		9	\$3.00
C18	☐ FEXOFENADINE HCL	Allegra	180 mg	15	\$14.00
C19	☐ COUGH DROPS SUGAR-FREE	Halls Cough Drops Sugar-Free		25	\$4.00
C20	☐ TRIAMCINOLONE	Nasacort Allergy 24 Hr Nasal Spray	55 mcg	10.8 ml	\$17.00
C21	☐ CHLORPHENIRAMINE MALEATE	Chlor-Trimeton	4 mg	24	\$4.00
C22	☐ STEAM INHALER †	Vicks Steam Inhaler †		1	\$29.00

** Denotes Dextromethorphan containing product. Limit of 3 / † These items are limited to 1 per benefit year.

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EYE / EAR CARE

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
E2	☐ EAR WAX DROPS	Debrox		0.5 oz	\$8.00
E4	☐ EYE DROPS	Visine Redness Relief		0.5 oz	\$6.00
E5	☐ LUTEIN PLUS ZEAXANTHIN TABLETS	Lutein Plus Zeaxanthin Tablets		60	\$15.00
E6	☐ GENTEAL TEARS TWIN PACK	Genteal Tears	2 x 15 ml	0.5 oz	\$18.00
E7	☐ REFRESH TEARS	Refresh Tears	15 ml	0.5 oz	\$15.00
E8	☐ SYSTANE ULTRA	Systane Ultra	10 ml	0.3 oz	\$16.00
E9	☐ EYE WASH	Eye wash		4 oz	\$7.00
E10	☐ OLOPATADINE	Pataday Once Daily Relief	0.2%	2.5 ml	\$22.00
E11	☐ OLOPATADINE	Pataday Twice Daily Relief	0.1%	5 ml	\$20.00
E12	☐ EYE ITCH RELIEF EYE DROPS	Zaditor	0.025%	5 ml	\$15.00
E13	☐ NAPHCN-A	Naphcon-A		15 ml	\$13.00

INCONTINENCE

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
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"			\$12.00
U6	☐ PRESTO BLADDER CONTROL GUARDS FOR MEN	Presto Bladder Control Guards For Men		1 bag	\$12.00
U7	☐ PRESTO BLADDER CONTROL GUARDS FOR WOMEN	Presto Bladder Control Guards For Women		1 bag	\$12.00
U8	☐ PANTY LINER- LONG	Panty Liner- Long		1 bag	\$7.00
U9	☐ PADS FOR WOMEN- LONG	Women's Protective Pads Long		1 bag	\$11.00
U10	☐ PADS FOR WOMEN – REGULAR/ MODERATE	Women's Protective Pads Regular/Moderate		1 bag	\$12.00

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FIRST AID

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
F1	☐ ANTI ITCH CREAM	Benadryl Cream		1 oz	\$6.00
F2	☐ BANDAGE STRIPS	Band-Aids		60	\$5.00
F3	☐ CALAMINE LOTION	Caladryl		6 oz	\$6.00
F4	☐ CAPSAICIN CREAM	Zostrix	0.025%	2 oz	\$15.00
F5	☐ ELASTIC BANDAGE	Ace Bandage		1	\$8.00
F6	☐ HOT & COLD THERAPY COMPRESS	Hot & Cold Therapy Compress		1	\$16.00
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	Bengay		3 oz	\$8.00
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
F15	☐ BACITRACIN ZINC OINTMENT	Bacitracin Zinc Ointment		1 oz	\$6.00
F16	☐ WITCH HAZEL PAD	A.E.R Witch Hazel Pads		40	\$7.00
F17	☐ BUTTERFLY CLOSURES	Butterfly Closures		12	\$4.00
F18	☐ CALLUS CUSHION	Callus Cushion		6	\$3.00
F19	☐ GAUZE PAD	Gauze Pad	4x4	25	\$8.00

FEMENINE HYGIENE

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
W1	☐ CLOTRIMAZOLE VAGINAL	Gyne-Lotrimin	1%	1.5 oz	\$12.00
W2	☐ MICONAZOLE VAGINAL SUPPOSITORIES	Monistat Vaginal Suppositories	200 mg	3 u	\$15.00
W3	☐ MICONAZOLE VAGINAL	Monistat Vaginal Cream	100 mg	1.5 oz	\$13.00
W4	☐ TIOCONAZOLE 1	Tioconazole	300 mg	0.16 oz	\$21.00

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LAXATIVES

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
L1	☐ BISACODYL TABLETS	Dulcolax	5 mg	25	\$6.00
L2	☐ DOCUSATE SODIUM	Colace	250 mg	100	\$12.00
L3	☐ GLYCERIN SUPPOSITORIES	Fleet Suppositories		24	\$5.00
L4	☐ NATURAL FIBER POWDER	Metamucil		13 oz	\$13.00
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
L8	☐ BISACODYL SUPPOSITORY	Bisacodyl Suppository	10 mg	12	\$7.00
L9	☐ FIBER CAPS	Fiber Caps		160	\$13.00
L10	☐ MILK OF MAGNESIA	Milk of Magnesia		12 oz	\$6.00

VITAMINS / MINERALS / HERBS §

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
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	\$8.00
V4	☐ CO-ENZYME Q-10	CoQ10	200 mg	30	\$22.00
V6	☐ DAILY MULTI VITAMINS	One A Day Essentials		100	\$8.00
V9	☐ FISH OIL	Fish Oil	1,000 / 300 mg	120	\$10.00
V10	☐ GLUCOSAMINE CHONDROITIN	Glucosamine Chondroitin	1,500 / 1,200 mg	100	\$17.00
V11	☐ IRON	Feosol	65 mg	100	\$5.00
V12	☐ PROSTATE THERAPY COMPLEX	Urinozinc		60	\$14.00
V13	☐ SAW PALMETTO	Saw Palmetto	500 mg	60	\$9.00
V14	☐ VITRUM MULTI VITAMIN	Centrum Silver		100	\$9.00
V15	☐ VITAMIN A	Vitamin A	10,000 IU	100	\$7.00
V16	☐ VITAMIN B COMPLEX	Mega B Complex		100	\$8.00
V17	☐ VITAMIN C	Vitamin C	500 mg	100	\$5.00
V18	☐ VITAMIN E	Vitamin E	400 IU	100	\$7.00
V19	☐ MELATONIN AND B6	Melatonin and B6	5 mg	60	\$8.00
V20	☐ VITAMIN D3 – 400 IU	Vitamin D3 400 IU	400 IU	100	\$5.00

§ Dual-purpose items: These items may be ordered upon appropriate discussion and recommendations from your physician.

OTC Product Order Form

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VITAMINS / MINERALS / HERBS §

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
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 CAPSULES	Acidophilus with Pectin Caps		100	\$8.00
V25	☐ ALMEBEX PLUS B12	Almebex plus B12		8 oz	\$18.00
V26	☐ VENIPHLEX	Veniphlex (Leg Vein Health)		60	\$19.00
V27	☐ GINKGO BILOBA	Ginkgo Biloba	500 mg	60	\$6.00
V28	☐ EPAMAX	Epamax (Vegetarian EPA & DHA Omega)		60	\$18.00
V29	☐ ZINC SULFATE	Zinc Sulfate	50 mg	100	\$7.00
V30	☐ REUMATOL 3 (SET OF 3 – LIQUID, SPRAY, CREAM)	Reumatol 3 (Arthritis Pain Relief)		1	\$24.00
V31	☐ SERENITAS	Serenitas (Sleep Aid)	3 mg	30	\$16.00
V32	☐ LECITHIN	Lecithin (Cardiovascular Health)	1,200 mg	100	\$8.00
V33	☐ EMERGEN-C	Emergen-C	3.3 oz	10	\$8.00
V34	☐ MERITENE POWDER	Meritene Powder (Protein Supplement)		16 oz	\$17.00
V35	☐ RESTAZE PM	Restaze PM (Sleep Aid)		60	\$17.00
V36	☐ ALMEBEX SUGAR FREE	Almebex Sugar Free		8 oz	\$18.00
V37	☐ IMMUNE ON	Immune On		8 oz	\$8.00
V38	☐ AIRBORNE CHEWABLE TABS	Airborne Chewable Tabs		32	\$12.00
V39	☐ ARTHRITIS CREAM	Arthritis Cream (Glucosamine & Chondroitin)		4 oz	\$7.00
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	\$10.00
V44	☐ TURMERIC PLUS COLEUS FORSKOHLII AND BIOPERINE CAPSULES	Turmeric Plus Coleus Forskohlii and Bioperine		30	\$7.00
V45	☐ VITAMIN D3 – 5,000 IU	Vitamin D3 – 5,000 IU	5,000 IU	60	\$10.00

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VITAMINS / MINERALS / HERBS §

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
V46	☐ BIOSEN (BIOTIN W/VITAMIN C & COLLAGEN)	Biosen (Biotin W/Vitamin C & Collagen)	5,000 mcg/ 100 mg	60	\$12.00
V47	☐ NUTRIMAX B12 & C	Nutrimax B12 & C		16 oz	\$20.00
V48	☐ SUGAR FREE NUTRIMAX B12 & C	Sugar Free Nutrimax B12 & C		16 oz	\$20.00
V49	☐ URINAMAX (PROSTATE)	Urinamax (Prostate)		60	\$13.00
V50	☐ IMMUNE ON PLUS (CAPSULES)	Immune On Plus (Capsules)		60	\$8.00
V51	☐ ECHINACEA	Echinacea		60	\$6.00
V52	☐ MAGNESIUM BISGLYCINATE	Magnesium Bisglycinate	350 mg	60	\$7.00
V53	☐ THYROID AID	Thyroid Aid		60	\$8.00
V54	☐ POTASSIUM GLUCONATE	Potassium Gluconate	595 mg	100	\$6.00
V55	☐ VITAMIN C GUMMY	Vitamin C Gummy	250 mg	60	\$11.00
V56	☐ ANTIOXIDANT TABLETS	Antioxidant Tablets		50	\$8.00
V57	☐ CRANBERRY CAPSULES	Cranberry Capsules	900 mg	60	\$10.00
V58	☐ BLACK ELDERBERRY CAPSULES	Black Elderberry Capsules	2,000 mg	60	\$10.00
V59	☐ FLAXSEED OIL SOFTGELS	Flaxseed Oil Softgels	1,000 mg	100	\$11.00
V60	☐ MELATONIN GUMMIES	Melatonin Gummies	5 mg	60	\$10.00
V61	☐ MULTI-VITAMIN GUMMY	Multi-Vitamin Gummy		60	\$9.00
V62	☐ SELENIUM	Selenium	200 mcg	60	\$7.00
V63	☐ PAPAYA ENZYME	Papaya Enzyme		100	\$10.00
V64	☐ MENOPAUSE SUPPORT CAPLETS	Estroven		28	\$20.00
V65	☐ TURMERIC WITH GINGER GUMMY	Turmeric with Ginger Gummy		30	\$9.00
V66	☐ LYCOPENE (ANTIOXIDANT UV SUPPORT)	Lycopene (Antioxidant UV Skincare Support)		30	\$12.00
V67	☐ CITICOLINE (COGNITIVE HEALTH)	Citicoline (Cognition, Memory, Focus Support)	250 mg	30	\$11.00
V68	☐ ENSURE® NUTRITION SHAKE, CHOCOLATE, 8 OZ...	Ensure® Chocolate...	8 oz	24	\$55.00
V69	☐ ENSURE® NUTRITION SHAKE, VANILLA, 8 OZ...	Ensure® Vanilla...	8 oz	24	\$55.00

§ Dual-purpose items: These items may be ordered upon appropriate discussion and recommendations from your physician.

...This item is not available in Plan Benefit Package 017, 018, 020, 021, and 022.

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MISCELLANEOUS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
M1	☐ COTTON SWABS	Q-Tips		170	\$4.00
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	\$3.00
M5	☐ TOOTHBRUSH	Colgate Toothbrush		1	\$3.00
M6	☐ FIXODENT ADHESIVE CREAM	Fixodent Adhesive Cream		2.4 oz	\$7.00
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	\$6.00
M11	☐ DENTURE CLEANSER	Efferdent		40	\$6.00
M12	☐ AUTOMATIC BLOOD PRESSURE MONITOR †	Automatic Blood Pressure Monitor †		1	\$35.00
M13	☐ SUNSCREEN LOTION SPF 30	Sunscreen Lotion SPF 30		8 oz	\$10.00
M14	☐ VITAMIN E OIL	Vitamin E Oil		2.5 oz	\$12.00
M15	☐ HOME SHARPS CONTAINER	Home Sharps Container		1	\$7.00
M16	☐ DISPOSABLE FACE MASK	Disposable Face Mask		10	\$5.00
M17	☐ HAND SANITIZER ♦	Hand Sanitizer ♦		16 oz	\$8.00
M18	☐ BIOTENE DRY MOUTH ORAL RINSE	Biotene Dry Mouth Oral Rinse		16 oz	\$9.00
M19	☐ DIAPER RASH OINTMENT	Desitin Ointment		2 oz	\$5.00
M20	☐ FLUSHABLE WIPES ♦	Flushable Wipes ♦		48 ct	\$7.00
M21	☐ PILL BOX	Pill Box		1 ct	\$4.00
M22	☐ UNSCENTED WIPES	Unscented Wipes (Not flushable)		40 ct	\$5.00
M23	☐ PETROLEUM JELLY	Vaseline		3.75 oz	\$4.00
M24	☐ EPSOM SALT	Epsom Salt		16 oz	\$4.00
M25	☐ ALOE VERA GEL WITH LIDOCAINE	Aloe Vera Gel with Lidocaine		8 oz	\$8.00
M26	☐ DENTAL FLOSS	Dental Floss		100 yd	\$6.00
M27	☐ DENTAL FLOSS MINT	Dental Floss Mint		100 yd	\$6.00

†These items are limited to 1 per benefit year.

♦Size may vary depending on availability.

OTC Product Order Form

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You may receive a generic comparable to the name-brand product.

MISCELLANEOUS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
M28	☐ ALCOHOL WIPES ♦	Alcohol Wipes ♦		56	\$6.00
M29	☐ COMPRESSION SOCKS, OVER THE CALF, 8-15 MMHG BLACK- M	Compression Socks 8-15 mmHg, Unisex, BLACK- M (Shoe Size 6-9)		1 Pair	\$14.00
M30	☐ COMPRESSION SOCKS, OVER THE CALF, 8-15 MMHG BLACK- L	Compression Socks 8-15 mmHg, Unisex, BLACK- L (Shoe Size 10-13)		1 Pair	\$14.00
M31	☐ COMPRESSION SOCKS, OVER THE CALF, 8-15 MMHG WHITE- M	Compression Socks 8-15 mmHg, Unisex, WHITE- M (Shoe Size 6-9)		1 Pair	\$14.00
M32	☐ COMPRESSION SOCKS, OVER THE CALF, 8-15 MMHG WHITE- L	Compression Socks 8-15 mmHg, Unisex, WHITE- L (Shoe Size 10-13)		1 Pair	\$14.00
M33	☐ HEATING PAD †	Heating Pad Dry/Moist (Standard Size 12"x15" with 9' Power Cord) †		1	\$22.00
M34	☐ PILL SPLITTER	Pill Splitter		1	\$6.00
M35	☐ MAGNIFYING GLASS ‡	Magnifying Glass ‡		1	\$10.00
M36	☐ PULSE OXIMETER †	Pulse Oximeter †		1	\$42.00
M37	☐ ANKLE SUPPORT – SMALL	Ankle Support – Small		1	\$13.00
M38	☐ ANKLE SUPPORT – MEDIUM	Ankle Support – Medium		1	\$13.00
M39	☐ ANKLE SUPPORT – LARGE	Ankle Support – Large		1	\$13.00
M40	☐ KNEE SUPPORT – SMALL	Knee Support – Small		1	\$13.00
M41	☐ KNEE SUPPORT – MEDIUM	Knee Support – Medium		1	\$13.00
M42	☐ KNEE SUPPORT – LARGE	Knee Support – Large		1	\$13.00
M43	☐ ELBOW SUPPORT – SMALL	Elbow Support – Small		1	\$13.00
M44	☐ ELBOW SUPPORT – MEDIUM	Elbow Support – Medium		1	\$13.00
M45	☐ ELBOW SUPPORT – LARGE	Elbow Support – Large		1	\$13.00
M46	☐ DIABETIC SOCKS, BLACK – M	Diabetic Socks, Unisex, BLACK – M (Shoe Size 6-10)		2 Pair	\$10.00
M47	☐ DIABETIC SOCKS, BLACK – L	Diabetic Socks, Unisex, BLACK – L (Shoe Size 10-13)		2 Pair	\$10.00
M48	☐ DIABETIC SOCKS, WHITE – M	Diabetic Socks, Unisex, WHITE – M (Shoe Size 6-10)		2 Pair	\$10.00
M49	☐ DIABETIC SOCKS, WHITE – L	Diabetic Socks, Unisex, WHITE – L (Shoe Size 10-13)		2 Pair	\$10.00
M50	☐ FRESHMINT ANTI-CAVITY FLUORIDE TOOTHPASTE FOR SENSITIVE TEETH	Sensodyne Fresh Mint		4.3 oz	\$4.00

♦ Size may vary depending on availability. / †These items are limited to 1 per benefit year.

‡ These items are limited to 3 items per monthly order.

OTC Product Order Form

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MISCELLANEOUS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
M51	☐ SUNSCREEN LOTION SPF 50	Sunscreen Lotion SPF 50		8 oz	\$10.00
M52	☐ COVID-19 ANTIGEN HOME TEST KIT	Covid-19 Antigen Home Test Kit		2	\$25.00
M53	☐ DIABETIC SKIN RELIEF LOTION	Swan Diabetics' Skin Soothing Lotion		5.5 oz	\$9.00
M54	☐ DIABETIC SKIN RELIEF FOOT CREAM	Dzul Diabetic Skin Relief Foot Cream		4 oz	\$10.00
M55	☐ ADVANCED HEALING OINTMENT	Swan Advanced Healing Ointment (Skin Protectant)		1.75 oz	\$8.00
M56	☐ SOOTHING OATMEAL BATH TREATMENT	Soothing Oatmeal Bath Treatment		8	\$10.00
M57	☐ ECZEMA MOISTURIZING CREAM	Swan Eczema Soothing Moisturizing Cream		7.3 oz	\$9.00
M58	☐ VITAMIN A & D CREAM	Natureplex A & D Cream		1.5 oz	\$7.00
M59	☐ ANTI-DANDRUFF SHAMPOO	Dzul Anti-Dandruff Shampoo		8 oz	\$8.00
M60	☐ ANTI-ITCH SKIN RELIEF WASH	Dzul Itchy Skin Relief Body Wash		8 oz	\$8.00
M61	☐ ANTI-DANDRUFF CONDITIONER	Dzul Anti-Dandruff Conditioner		8 oz	\$8.00
M62	☐ ANTIBACTERIAL SOAP	Dalan Antibacterial Bar Soap		3 ct	\$5.00
M63	☐ TESTOSTERONE CREAM	Dzul Testosterone Cream		4 oz	\$8.00
M64	☐ LEG CRAMPS CREAM	Dzul Leg Cramp Cream		4 oz	\$8.00
M65	☐ LEG CRAMPS CAPSULES (PM)	Dzul Leg Cramp Capsules (PM)		60	\$9.00
M66	☐ BROKEN CAPILLARY CREAM	Dzul Broken Capillary Cream (Legs)		4 oz	\$8.00

ANTI-FUNGAL CREAMS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
O1	☐ CLOTRIMAZOLE CREAM	Lotrimin Cream	1%	1 oz	\$11.00
O2	☐ TOLNAFTATE	Tinactin	1%	0.5 oz	\$8.00

ANTI-HEMORRHOIDS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
H1	☐ HEMORRHOIDAL OINTMENT	Preparation H Ointment		2 oz	\$10.00
H2	☐ HEMORRHOIDAL SUPPOSITORIES	Preparation H Suppositories		12	\$8.00

OTC Product Order Form

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You may receive a generic comparable to the name-brand product.

DIABETIC SECTION

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
SF1	☐ ALCOHOL SWABS/PADS	Alcohol Swabs / Pads		100	\$4.00
SF3	☐ CHROMIUM PICOLINATE	Chromium Picolinate (Blood Sugar Aid)		100	\$8.00
SF4	☐ DIABETES TRIO	Diabetes Trio		60	\$11.00
SF5	☐ GUAIFENESIN SF	Diabetic Tussin SF	100 mg / 5 ml	4 oz	\$8.00
SF7	☐ ISOPROPYL ALCOHOL	Isopropyl Alcohol		16 oz	\$4.00
SF8	☐ SF NATURAL FIBER POWDER	Metamucil SF Powder		10 oz	\$12.00
SF10	☐ GUAIFENESIN DM SF **	Robitussin DM Sugar Free **		4 oz	\$7.00
SF11	☐ SUGAR FREE CALCIUM ANTACID EXTRA STRENGTH	Tums Extra Strength Sugar Free		80	\$6.00
SF12	☐ IROFOL	Iron Supplement	100 mg	4 oz	\$18.00
SF13	☐ GLUCOSE TABLETS	Glucose Tablets	4 g	10	\$4.00

SMOKING CESSATION PRODUCTS

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
SC1	☐ STEP 1: NICOTINE 21 MG/24 HR PATCH #7	Step 1: Nicotine 21 mg/24 HR Patch #7	21 mg / 24 hr	7	\$34.00
SC2	☐ STEP 2: NICOTINE 14 MG/24 HR PATCH #7	Step 2: Nicotine 14 mg/24 HR Patch #7	14 mg / 24 hr	7	\$34.00
SC3	☐ STEP 3: NICOTINE 7 MG/24 HR PATCH #7	Step 3: Nicotine 7 mg/24 HR Patch #7	7 mg / 24 hr	7	\$34.00
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

** Denotes Dextromethorphan containing product. Limit of 3

OTC Product Order Form

Please check ☒ to order you medications.

You may receive a generic comparable to the name-brand product.

HOME HEALTH CARE

CODE	GENERIC NAME	BRAND NAME	STRENGTH	SIZE	COST
HH1	☐ DIGITAL BATHROOM SCALE †	Digital Bathroom Scale †		1	\$24.00
HH2	☐ INFLATABLE RUBBER CUSHION SEAT ‡	Inflatable Rubber Cushion Seat ‡		1	\$18.00
HH3	☐ RAISED TOILET SEAT †	Raised Toilet Seat – 250 lbs capacity, Universal Fit †		1	\$48.00
HH4	☐ GRAB BAR †	Suction Grab Bar, 12" †		1	\$18.00
HH5	☐ RUBBER BATH MAT●●	Rubber Bath Mat, Non-Slip, Anti-Fungal●●		1	\$12.00

†These items are limited to 1 per benefit year. / ‡These items are limited to 3 items per monthly order.

●●These Items are limited to 2 per benefit year.

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