

- (M) Fertility agents when Medically Necessary (up to the \$3,000 maximum pharmacy benefit) as determined by HMP.

PREVENTIVE MEDICATIONS

The Plan covers qualified preventive prescription and over-the-counter (OTC) products as listed in the table below. These medications will be covered at 100% when the member meets the preventive care guidelines. All medications require a prescription from a provider and must meet the definition of qualified preventive care as defined under preventive medications.

ELIGIBLE PREVENTIVE MEDICATIONS

| Preventive Service/Item | Requirements |
|---|--|
| Aspirin to prevent cardiovascular events | Men age 45 to 79 and Women age 55 to 79 where the benefit outweighs potential risk. |
| Breast cancer medications to reduce risk | Medications such as tamoxifen or raloxifene for women at increased risk for breast cancer. |
| Fluoride supplements | Children age 6 months to 5 years with a fluoride deficient water supply. |
| Folic acid supplements | Women through age 50 years. |
| Iron Supplements | Children age 6 to 12 months who are at risk for iron deficiency. |
| Smoking Cessation | Members may utilize the South Dakota QuitLine resources for product coverage. Select Rx products covered by the Plan. |
| Vitamin D Supplement | Men and women 65 years of age or older at risk for falls. |
| Bowel Preparations for Preventive Colonoscopy | Men and women between 50 and 75 years of age. Limit 2 preparations per year under preventive benefit. |
| Women's Services/Contraception | Contraceptive methods approved by the Food and Drug Administration (FDA) covered for women through age 50 years. Generic and select brand name medications included. |

Prescription medications listed above will be processed through the pharmacy benefit. Over the counter medications may be submitted for preventive service coverage using the medical claim form found at <http://benefits.sd.gov/Forms.aspx> and choosing Preventive Medications under claim form.

The claim form along with the provider prescription and a receipt for the product must be submitted in order to be reimbursed.