MID-MARKET (FIRSTRX)

Affordable Care Act (ACA) Preventive Drug List

Accord™ Formulary

Purpose

The Patient Protection and Affordable Care Act (PPACA) requires non-grandfathered group health plans and issuers offering non-grandfathered group or individual health insurance to provide coverage of specified preventive services without member cost sharing[1].

As your pharmacy benefits manager, we will support coverage of specific products at $0 copay for applicable plans to remain in compliance with ACA regulations. Prime Therapeutics Management will also routinely update FDA-approved product lists to comply with the Preventive Health mandates, such as provided by the United States Preventive Services Task Force (UPSPSTF), Bright Futures, Advisory Committee on Immunization Practices (ACIP), and Women's Preventive Services Initiative (WPSI).

[1] https://www.federalregister.gov/d/2015-17076/p-9

When a Preventive Guideline is changed or modified

- **Existing ACA plan coverage**[2] must continue through the last day of the plan year, even if the recommendation changes or is eliminated during the year, with the exception of limited circumstances which allow for a mid-year coverage change[3].
- **New recommendations/guidelines**[4] should be implemented beginning on or after the date that is one year after the date the relevant recommendation or guideline is issued, unless otherwise stated.

[2] https://www.federalregister.gov/d/2015-17076/p-62
[3] https://www.federalregister.gov/d/2015-17076/p-63
[4] https://www.federalregister.gov/d/2015-17076/p-61

Categories

Aspirin (September 2021, USPSTF)

Recommendation: Low-dose aspirin (81 mg/day) is recommended as preventive medication after 12 weeks gestation in persons who are at high risk for preeclampsia.

Bowel Preps (May 2021, USPSTF)

Recommendation: Screen all adults aged 45 to 75 years for colorectal cancer.

Limitation: These products will be covered at $0 for members ages 45 to 75 years old.

Breast Cancer (September 2019, USPSTF)

Recommendation: Clinicians offer to prescribe risk-reducing medications, such as tamoxifen, raloxifene, or aromatase inhibitors, to women who are at increased risk for breast cancer and at low risk for adverse medication effects.

Limitation: Limited to female members 35 years and older.

Fluoride Supplements (June 2024, Bright Futures)

Recommendation: Systemic fluoride intake through optimal fluoridation of drinking water or professionally prescribed supplements is recommended to at least age 16 years or the eruption of the second permanent molars, whichever comes first.

Folic Acid (August 2023, USPSTF)

Recommendation: All persons planning to or who could become pregnant take a daily supplement containing 0.4 to 0.8 mg (400 to 800 mcg) of folic acid.

High Cholesterol (August 2022, USPSTF)

Recommendation: Statin therapy for the primary prevention of cardiovascular disease (CVD) for adults aged 40 to 75 years who have 1 or more CVD risk factors, and an estimated 10-year risk of cardiovascular event of 10% or greater.

Limitation: These products will be covered at $0 for members ages 40 to 75 years old.

HIV PrEP (August 2023, USPSTF)

Recommendation: Clinicians offer preexposure prophylaxis (PrEP) with effective antiretroviral therapy to persons who are at high risk of HIV acquisition.

Limitation: Pharmacies will verify if the medication is being used for PrEP at the point of sale. Only those using the medication for PrEP will receive a $0 copay.

Iron Supplements (June 2024, Bright Futures)

Recommendation: For the prevention of Iron Deficiency and Iron-Deficiency Anemia in Infants.

Tobacco Cessation (January 2021, USPSTF)

Recommendation: Clinicians ask all adult patients about tobacco use, advise them to stop using tobacco, and provide behavioral interventions. Provide FDA-approved pharmacotherapy for cessation to nonpregnant adults who use tobacco.

Limitation: Limited to a cumulative day supply limit of 180 within the last 365 days.

Vaccines (1996 and ongoing, ACIP & CDC)

Recommendation: Vaccine for children and adults currently contained in the Recommendations of the ACIP and adopted by the CDC as routine.

Limitation: Gardasil (human papillomavirus vaccine) limited to members younger than 45. Shingrix (shingles vaccines) limited to members aged 50 and above.

Contraceptives (December 2022, HRSA/WPSI)

Recommendation: WPSI recommends that adolescent and adult women have access to the full range of contraceptives and contraceptive care without cost sharing. As part of contraceptive care, WPSI recommends effective family planning practices, sterilization procedures, and the full range of contraceptives currently listed in the FDA's Birth Control Guide and any additional contraceptives approved, granted, or cleared by the FDA.

Limitation: Prescription contraceptives have a quantity limit of 1.6/day.

This list is subject to change and does not define coverage.
Refer to plan documents to determine coverage. Visit web.PrimeTherapeutics.com for current list.

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Category	Drug	Comments
Aspirin	ASPIRIN 81 MG TAB CHEW ASPIRIN 81 MG TABLET ASPIRIN 81 MG TABLET DR	
Bowel Prep	GAVILYTE-G SOLUTION GAVILYTE-N SOLUTION PEG 3350-ELECTROLYTE SOLUTION PEG-3350 AND ELECTROLYTES SOLN	Age Edits Apply: 45-75 years
Breast Cancer	ANASTROZOLE 1 MG TABLET ARIMIDEX 1 MG TABLET EVISTA 60 MG TABLET RALOXIFENE HCL 60 MG TABLET SOLTAMOX 20 MG/10 ML SOLN TAMOXIFEN 10 MG TABLET TAMOXIFEN 20 MG TABLET	Age Edits Apply: 35+ years
Fluoride Supplements	CLINPRO 5000 1.1% TOOTHPASTE DENTA 5000 PLUS CREAM DENTA 5000 PLUS SENSITIV PASTE DENTAGEL 1.1% GEL FLORIVA 0.25 MG/ML DROPS FLUORIDE 0.25 MG TABLET CHEW FLUORIDE 0.5 MG TABLET CHEW FLUORIDE 1 MG TABLET CHEWABLE FLUORIDEX DAILY DEFENSE 1.1% FLUORIDEX SENSITIV RLF PASTE FLUORIMAX 5000 1.1% TOOTHPASTE FRAICHE 5000 1.1 % DENTAL GEL FRAICHE 5000 1.1 %-4.5 % GEL FRAICHE 5000 KIDS 1.1-4.5% GEL FRAICHE 5000 PREVI 1.1%-3% GEL GEL-KAM 0.4% DENTAL GEL JUST RIGHT 5000 1.1% TOOTHPSTE PERIOMED 0.63% DENTAL RINSE PREVIDENT 0.2% RINSE PREVIDENT 1.1% GEL PREVIDENT 5000 1.1% DRY MOUTH PREVIDENT 5000 BOOSTER PLUS PREVIDENT 5000 ENAMEL PROTECT PREVIDENT 5000 ORTHO DEFENSE PREVIDENT 5000 PLUS CREAM PREVIDENT 5000 SENSITIVE PASTE PREVIDENT DENTAL RINSE PREVIDENT KIDS 5000 PPM PASTE SF 1.1% GEL SF 5000 PLUS CREAM SOD FLUORIDE ENAM PROT 5000PPM SODIUM FLUORIDE 0.2% RINSE SODIUM FLUORIDE 0.25 (0.55) MG SODIUM FLUORIDE 0.5 MG(1.1 MG) SODIUM FLUORIDE 0.5 MG/ML DROP SODIUM FLUORIDE 1 MG (2.2 MG) SODIUM FLUORIDE 1.1% CREAM SODIUM FLUORIDE 1.1% GEL SODIUM FLUORIDE 5000 DRY MOUTH SODIUM FLUORIDE 5000 PLUS CRM SODIUM FLUORIDE 5000 PPM CREAM SODIUM FLUORIDE 5000 PPM PASTE	Age Edits Apply: Up to 16 years

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Category	Drug	Comments
Fluoride Supplements, *continued*	SODIUM FLUORIDE SENSTV 5000PPM SODIUM FLUORIDE-POTASSIUM NITR	Age Edits Apply: Up to 16 years
Folic Acid	FOLIC ACID 0.4 MG TABLET FOLIC ACID 0.8 MG CAPSULE FOLIC ACID 0.8 MG TABLET	
High Cholesterol	ATORVASTATIN CALCIUM 10 MG TABLET ATORVASTATIN CALCIUM 20 MG TABLET LOVASTATIN 10 MG TABLET LOVASTATIN 20 MG TABLET LOVASTATIN 40 MG TABLET PRAVASTATIN SODIUM 10 MG TABLET PRAVASTATIN SODIUM 20 MG TABLET PRAVASTATIN SODIUM 40 MG TABLET PRAVASTATIN SODIUM 80 MG TABLET ROSUVASTATIN CALCIUM 10 MG TABLET ROSUVASTATIN CALCIUM 20 MG TABLET ROSUVASTATIN CALCIUM 40 MG TABLET ROSUVASTATIN CALCIUM 5 MG TABLET SIMVASTATIN 10 MG TABLET SIMVASTATIN 20 MG TABLET SIMVASTATIN 40 MG TABLET SIMVASTATIN 5 MG TABLET	Age Edits Apply: 40-75 years
HIV PrEP	APRETUDE ER 600 MG/3 ML VIAL	
	DESCOVY 200-25 MG TABLET EMTRICITABINE-TENOFV 200-300MG	Preventive use only
	YEZTUGO 300 MG TABLET YEZTUGO 463.5 MG/1.5 ML VIAL	
Iron Supplements	FER-IN-SOL 15 MG/ML FERROUS SULFATE 15 MG/ML FERROUS SULFATE 220 (44)/5 FERROUS SULFATE 300 MG/5ML ICAR 15MG/1.25 INFANT-TODDLER IRON 15 MG/ML IRONUP 15MG/0.5ML NOVAFERRUM YUMMY PEDIATRIC 15 MG/ML PEDIA IRON 15 MG/ML PEDIATRIC FE-VITE 15 MG/ML PEDIATRIC IRON 15 MG/ML WEE CARE 15MG/1.25	
Tobacco Cessation	BUPROPION HCL SR 150 MG CHANTIX 0.5 (11)-1 CHANTIX 0.5 MG CHANTIX 1 MG NICODERM CQ 14MG/24HR NICODERM CQ 21 MG/24HR NICODERM CQ 7MG/24HR NICORETTE 2 MG NICORETTE 4 MG NICOTINE GUM 2 MG NICOTINE GUM 4 MG NICOTINE LOZENGE 2 MG NICOTINE LOZENGE 4 MG NICOTINE PATCH 14MG/24HR NICOTINE PATCH 21 MG/24HR NICOTINE PATCH 21-14-7MG NICOTINE PATCH 7MG/24HR	Quantity Limits May Apply

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Tobacco Cessation, *continued*	NICOTROL NS 10 MG/ML	
	QUIT 2 2 MG	
	QUIT 4 4 MG	
	STOP SMOKING AID 2 MG	Quantity Limits May Apply
	STOP SMOKING AID 4 MG	
	VARENICLINE TARTRATE 0.5 (11)-1	
	VARENICLINE TARTRATE 0.5 MG	
	VARENICLINE TARTRATE 1 MG	
Vaccines	ABRYSVO	
	ACTHIB	
	ADACEL TDAP	
	AFLURIA	
	AREXVY	
	BEXSERO	
	BOOSTRIX TDAP	
	CAPVAXIVE	
	COMIRNATY	
	DAPTACEL DTAP	
	ENGERIX-B	
	FLUAD	
	FLUARIX	
	FLUBLOK	
	FLUCELVAX	
	FLULAVAL	
	FLUMIST	
	FLUZONE	
	GARDASIL 9	Age Edits Apply: Up to 45 years
	HAVRIX	
	HEPLISAV-B	
	HIBERIX	
	INFANRIX DTAP	
	IPOL	
	JYNNEOS	
	KINRIX	
	M-M-R II VACCINE	
	MENQUADFI	
	MENVEO A-C-Y-W-135-DIP	
	MNEXSPIKE(12Y UP)	
	MODERNA COVID(6M-11Y)EUA	
	MRESVIA	
	NOVAVAX COVID(EUA)	
	NUVAXOVID	
	PEDIARIX	
	PEDVAXHIB	
	PENBRAYA	
	PENMENVY MEN A-B-C-W-Y	
	PENTACEL	
	PFIZER COVID(5-11Y)EUA	
	PFIZER COVID(6M-4Y)EUA	
	PNEUMOVAX 23	
	PREHEVBRIO	
	PREVNAR 20	
	PRIORIX	
	PROQUAD	
	QUADRACEL DTAP-IPV	
	RECOMBIVAX HB	

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Vaccines, *continued*	ROTARIX	
	ROTATEQ	
	SHINGRIX	Age Edits Apply: 50+ years
	SPIKEVAX	
	TDVAX	
	TENIVAC	
	TRUMENBA	
	TWINRIX	
	VAQTA	
	VARIVAX VACCINE	
	VAXELIS	
	VAXNEUVANCE	
Contraceptives: Diaphragms	CAYA CONTOURED DIAPHRAGM	Quantity Limits May Apply
	FEMCAP 22 MM CERVICAL CAP	
	FEMCAP 26 MM CERVICAL CAP	
	FEMCAP 30 MM CERVICAL CAP	
	OMNIFLEX DIAPHRAGM 65MM	
	WIDE SEAL DIAPHRAGM 60MM	
	WIDE SEAL DIAPHRAGM 65MM	
	WIDE SEAL DIAPHRAGM 70MM	
	WIDE SEAL DIAPHRAGM 75MM	
	WIDE SEAL DIAPHRAGM 80MM	
	WIDE SEAL DIAPHRAGM 85MM	
	WIDE SEAL DIAPHRAGM 90MM	
	WIDE SEAL DIAPHRAGM 95MM	
Contraceptives: Extended Cycle	AMETHIA 0.15-0.03-0.01 MG TAB	Quantity Limits May Apply
	ASHLYNA 0.15-0.03-0.01 MG TAB	
	CAMRESE 0.15-0.03-0.01 MG TAB	
	CAMRESE LO TABLET	
	DAYSEE 0.15-0.03-0.01 MG TAB	
	ICLEVIA 0.15 MG-0.03 MG TABLET	
	INTROVALE 0.15-0.03 MG TABLET	
	JAIMIESS 0.15-0.03-0.01 MG TAB	
	JOLESSA 0.15 MG-0.03 MG TABLET	
	LEVONO-E ESTRAD 0.15-0.03-0.01	
	LEVONOR-E ESTRAD 0.1-0.02-0.01	
	LEVONOR-ETH ESTRAD 0.15-0.03	
	LEVONORG 0.15MG-EE 20-25-30MCG	
	LOJAIMIESS 0.1-0.02-0.01 TAB	
	RIVELSA TABLET	
	ROSYRAH TABLET	
	SETLAKIN 0.15 MG-0.03 MG TAB	
	SIMPESSE 0.15-0.03-0.01 MG TAB	
Contraceptives: Injectable	DEPO-PROVERA 150 MG/ML SYRINGE	Quantity Limits May Apply
	DEPO-PROVERA 150 MG/ML VIAL	
	DEPO-SUBQ PROVERA 104 SYRINGE	
	MEDROXYPROGESTERONE 150 MG/ML	
Contraceptives: Non-hormonal	PHEXX 1.8-1-0.4% VAGINAL GEL	
	PHEXXI 1.8-1-0.4% VAGINAL GEL	
	VCF CONTRACEPTIVE FILM	
	VCF CONTRACEPTIVE GEL	
Contraceptives: Patch	NORELGESTROM-EE 150-35 MCG/DAY	Quantity Limits May Apply
	TWIRLA 120-30 MCG/DAY PATCH	
	XULANE 150-35 MCG/DAY PATCH	
	ZAFEMY 150-35 MCG/DAY PATCH	

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Contraceptives: Vaginal	ANNOVERA VAGINAL RING NUVARING VAGINAL RING	Quantity Limits May Apply
OTC Contraceptives: Condoms	AIMSCO LATEX CONDOM DUREX AVANTI REAL FEEL CONDOM DUREX EXTRA SENSITIVE CONDOM DUREX TROPICAL CONDOM FANTASY CONDOM FC2 FEMALE CONDOM KIMONO MAXX CONDOM KIMONO MICROTHIN AQUA LUBE KIMONO MICROTHIN CONDOM KIMONO MICROTHIN LARGE CONDOM KIMONO TEXTURED CONDOM KIMONO THIN LUBRICATED CONDOMS TROJAN BARESKIN PACK CONDOM TROJAN ENZ CONDOM TROJAN ENZ SPERMICIDE CONDOM TROJAN MAGNUM CONDOM TROJAN ULTRA RIBBED CONDOM TROJAN ULTRA THIN CONDOM TROJAN ULTRA THIN-SPERMICIDAL TRUE COVER CONDOM TRUSTEX CONDOM TRUSTEX LATEX CONDOM TRUSTEX-RIA CONDOM	
OTC Emergency Contraception	AFTERA 1.5 MG TABLET CURAE 1.5 MG TABLET ECONTRA EZ 1.5 MG TABLET ECONTRA ONE-STEP 1.5 MG TABLET HER STYLE 1.5 MG TABLET LEVONORGESTREL 1.5 MG TABLET MY CHOICE 1.5 MG TABLET MY WAY 1.5 MG TABLET NEW DAY 1.5 MG TABLET OPCICON ONE-STEP 1.5 MG TABLET OPTION 2 1.5 MG TABLET PLAN B ONE-STEP 1.5 MG TABLET SHEWISE 1.5 MG TABLET TAKE ACTION 1.5 MG TABLET	Quantity Limits May Apply

See next page for Contraceptives: Oral

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DESOG-E.ESTRADIOL/E.ESTRADIOL 21-5 (28) TABLET	AZURETTE 28 DAY TABLET, DESOGESTR-ETH ESTRAD ETH ESTRA, KARIVA 28 DAY TABLET, PIMTREA 28 DAY TABLET, SIMLIYA 28 DAY TABLET, VIORELE 28 DAY TABLET, VOLNEA 0.15-0.02-0.01 MG TAB
DESOGESTREL-ETHINYL ESTRADIOL 0.15-0.03 TABLET	APRI 28 DAY TABLET, CYRED 28 DAY TABLET, CYRED EQ 28 DAY TABLET, ENSKYCE 28 TABLET, ISIBLOOM 28 DAY TABLET, JULEBER 28 DAY TABLET, KALLIGA 28 DAY TABLET, RECLIPSEN 28 DAY TABLET
DESOGESTREL-ETHINYL ESTRADIOL 7 DAYS X 3 TABLET	CAZIANT 28 DAY TABLET, VELIVET 28 DAY TABLET
DESOGESTREL/E.ESTRADIOL/IRON 0.15-0.03 TABLET	AVERI 0.15-0.03 MG 28 DAY TAB
DROSPIR/ETH ESTRA/LEVOMEFOL CA 3-0.02(24) TABLET	BEYAZ 28 TABLET, DROSP-EE-LEVOMEF 3-0.02-0.451
DROSPIR/ETH ESTRA/LEVOMEFOL CA 3-0.03(21) TABLET	DROSP-EE-LEVOMEF 3-0.03-0.451, SAFYRAL TABLET, TYDEMY 3-0.03-0.451 MG TABLET
DROSPIRENONE 4 MG (28) TABLET	SLYND 4 MG TABLET
DROSPIRENONE/ESTETROL 3-14.2(28) TABLET	NEXTSTELLIS 3-14.2 MG TABLET
ESTRADIOL VALERATE/DIENOGEST 3-2-1(28) TABLET	NATAZIA 28 TABLET
ETHINYL ESTRADIOL/DROSPIRENONE 0.02-3(28) TABLET	DROSPIRENONE-EE 3-0.02 MG TAB, JASMIEL 3 MG-0.02 MG TABLET, LO-ZUMANDIMINE 3 MG-0.02 MG TB, LORYNA 3 MG-0.02 MG TABLET, NIKKI 3 MG-0.02 MG TABLET, VESTURA 3 MG-0.02 MG TABLET, YAZ 28 TABLET
ETHINYL ESTRADIOL/DROSPIRENONE 0.03MG-3MG TABLET	DROSPIRENONE-EE 3-0.03 MG TAB, OCELLA 3 MG-0.03 MG TABLET, SYEDA 28 TABLET, YASMIN 28 TABLET, ZARAH TABLET, ZUMANDIMINE 3 MG-0.03 MG TAB
ETHYNODIOL D-ETHINYL ESTRADIOL 1 MG-35MCG TABLET	ETHYNODIOL-ETH ESTRA 1MG-35MCG, KELNOR 1-35 28 TABLET, VALTYA 1 MG-35 MCG TABLET, ZOVIA 1-35 TABLET
ETHYNODIOL D-ETHINYL ESTRADIOL 1 MG-50MCG TABLET	ETHYNODIOL-ETH ESTRA 1MG-50MCG, KELNOR 1-50 TABLET, VALTYA 1 MG-50 MCG TABLET
LEVONORGEST/ETH.ESTRADIOL/IRON 0.1-0.02MG TABLET	BALCOLTRA TABLET, JOYEAUX-28 TABLET, LEVONORG-EE-FE BIS 0.1-0.02-36, MINZOYA-28 TABLET
LEVONORGESTREL/ETHIN.ESTRADIOL 0.1-0.02MG TAB CHEW	TYBLUME 0.1-0.02 MG CHEW TAB
LEVONORGESTREL/ETHIN.ESTRADIOL 0.1-0.02MG TABLET	AFIRMELLE-28 TABLET, AUBRA EQ-28 TABLET, AUBRA-28 TABLET, AVIANE-28 TABLET, FALMINA-28 TABLET, LESSINA-28 TABLET, LEVONOR-ETH ESTRAD 0.1-0.02 MG, LUTERA-28 TABLET, SRONYX 0.10-0.02 MG TABLET, VIENVA-28 TABLET
LEVONORGESTREL/ETHIN.ESTRADIOL 0.15-0.03 TABLET	ALTAVERA-28 TABLET, AYUNA-28 TABLET, CHATEAL EQ-28 TABLET, KURVELO-28 TABLET, LEVONOR-ETH ESTRAD 0.15-0.03, LEVORA-28 TABLET, MARLISSA-28 TABLET, PORTIA-28 TABLET
LEVONORGESTREL/ETHIN.ESTRADIOL 6-5-10 TABLET	ENPRESSE-28 TABLET, LEVONEST-28 TABLET, LEVONOR-ETH ESTRAD TRIPHASIC, TRIVORA-28 TABLET
LEVONORGESTREL/ETHIN.ESTRADIOL 90-20 MCG TABLET	AMETHYST 90-20 MCG TABLET, DOLISHALE 90-20 MCG TABLET, LEVONOR-ETH ESTRA 0.09-0.02 MG
NORETH-ETHINYL ESTRADIOL/IRON 0.4-35(21) TAB CHEW	NORET-ESTR-FE 0.4-0.035(21)-75, WYMZYA FE 0.4-0.035 MG CHEW TB, XELRIA FE 0.4-0.035 MG CHEW TB
NORETH-ETHINYL ESTRADIOL/IRON 0.8-25(24) TAB CHEW	GALBRIELA 0.8-0.025 MG CHEW TB, KAITLIB FE 0.8-0.025MG CHEW TB, LAYOLIS FE CHEWABLE TABLET, NORETHIN-ESTRA-FE 0.8-0.025 MG
NORETHINDRONE 0.35 MG TABLET	CAMILA 0.35 MG TABLET, DEBLITANE 0.35 MG TABLET, EMZAHH 0.35 MG TABLET, ERRIN 0.35 MG TABLET, HEATHER 0.35 MG TABLET, INCASSIA 0.35 MG TABLET, JENCYCLA 0.35 MG TABLET, LYLEQ 0.35 MG TABLET, LYZA 0.35 MG TABLET, MELEYA 0.35 MG TABLET, NORA-BE TABLET, NORETHINDRONE 0.35 MG TABLET, ORQUIDEA 0.35 MG TABLET, SHAROBEL 0.35 MG TABLET, TULANA 0.35 MG TABLET
NORETHINDRONE AC-ETH ESTRADIOL 1MG-20MCG TABLET	AUROVELA 1 MG-20 MCG TABLET, JUNEL 1 MG-20 MCG TABLET, LARIN 21 1-20 TABLET, NORETHIND-ETH ESTRAD 1-0.02 MG

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NORETHINDRONE AC-ETH ESTRADIOL 1.5-0.03MG TABLET	AUROVELA 21 1.5-30 TABLET, HAILEY 21 1.5 MG-30 MCG TAB, JUNEL 1.5 MG-30 MCG TABLET, LARIN 1.5 MG-30 MCG TABLET, NORETHIN-EE 1.5-0.03 MG(21) TB
NORETHINDRONE AC/ETH ESTRADIOL 1MG-20MCG TAB RAPDIS	FEMLYV 1 MG-0.02 MG ODT
NORETHINDRONE AC/ETH ESTRADIOL 1MG-20MCG TABLET	LOESTRIN 21 1-20 TABLET, LUIZZA 1 MG-20 MCG TABLET, MICROGESTIN 21 1-20 TABLET
NORETHINDRONE AC/ETH ESTRADIOL 1.5-0.03MG TABLET	LOESTRIN 21 1.5-30 TABLET, LUIZZA 1.5 MG-30 MCG TABLET, MICROGESTIN 21 1.5-30 TAB
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-10(24) TABLET	LO LOESTRIN FE 1-10 TABLET
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-20(21) TABLET	AUROVELA FE 1-20 TABLET, BLISOVI FE 1-20 TABLET, FEIRZA 1 MG-20 MCG TABLET, HAILEY FE 1-20 TABLET, JUNEL FE 1 MG-20 MCG TABLET, LARIN FE 1-20 TABLET, LOESTRIN FE 1-20 TABLET, MICROGESTIN FE 1-20 TABLET, NORETH-EE-FE 1-0.02(21)-75 TAB, TARINA FE 1-20 EQ TABLET, TARINA FE 1-20 TABLET
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-20(24) CAPSULE	GEMMILY 1 MG-20 MCG CAPSULE, MERZEE 1 MG-20 MCG CAPSULE, NORETH-EE-FE 1-0.02(24)-75 CAP, TAYTULLA 1 MG-20 MCG CAPSULE
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-20(24) TAB CHEW	CHARLOTTE 24 FE CHEWABLE TAB, FINZALA 1-0.02(24)-75 CHEW TAB, MIBELAS 24 FE CHEWABLE TABLET, NORETH-EE-FE 1-0.02(24)-75 CHW
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-20(24) TABLET	AUROVELA 24 FE 1 MG-20 MCG TAB, BLISOVI 24 FE TABLET, HAILEY 24 FE 1 MG-20 MCG TAB, JUNEL FE 24 TABLET, LARIN 24 FE 1 MG-20 MCG TABLET, TARINA 24 FE 1 MG-20 MCG TAB
NORETHINDRONE-E.ESTRADIOL-IRON 1.5-30(21) TABLET	AUROVELA FE 1.5 MG-30 MCG TAB, BLISOVI FE 1.5-30 TABLET, FEIRZA 1.5 MG-30 MCG TABLET, HAILEY FE 1.5-30 TABLET, JUNEL FE 1.5 MG-30 MCG TABLET, LARIN FE 1.5-30 TABLET, LOESTRIN FE 1.5-30 TABLET, MICROGESTIN FE 1.5-30 TAB, NORETH-EE-FE 1.5-0.03MG(21)-75
NORETHINDRONE-E.ESTRADIOL-IRON 5-7-9-7 TABLET	NORETH-EE-FE 1 MG/20-30-35 MCG, TILIA FE 28 TABLET, TRI-LEGEST FE-28 DAY TABLET, XARAH FE 1 MG/20-30-35 MCG TAB
NORETHINDRONE-ETHIN. ESTRADIOL 0.4-0.035 TABLET	BALZIVA 28 TABLET, BRIELLYN TABLET, PHILITH 0.4-0.035 MG TABLET, VYFEMLA 0.4 MG-0.035 MG TABLET
NORETHINDRONE-ETHIN. ESTRADIOL 0.5-0.035 TABLET	NECON 0.5-35-28 TABLET, NORTREL 0.5-35-28 TABLET, WERA 0.5/0.035 MG 28 TABLET
NORETHINDRONE-ETHIN. ESTRADIOL 1 MG-35MCG TABLET	ALYACEN 1-35 28 TABLET, DASETTA 1-35-28 TABLET, NORTREL 1-35 21 TABLET, NORTREL 1-35 28 TABLET, NYLIA 1-35 28 TABLET
NORETHINDRONE-ETHIN. ESTRADIOL 7-9-5 TABLET	ARANELLE 28 TABLET, LEENA 28 TABLET
NORETHINDRONE-ETHIN. ESTRADIOL 7 DAYS X 3 TABLET	ALYACEN 7-7-7-28 TABLET, DASETTA 7/7/7-28 TABLET, NORTREL 7-7-7-28 TABLET, NYLIA 7-7-7-28 TABLET, ORTHO-NOVUM 7-7-7-28 TABLET
NORGESTIMATE-ETHINYL ESTRADIOL 0.25-0.035 TABLET	ESTARYLLA 0.25-0.035 MG TABLET, MILI 0.25-0.035 MG TABLET, MONO-LINYAH 28 TABLET, NORG-ETHIN ESTRA 0.25-0.035 MG, NORGESTIMATE-EE 0.25-0.035 MG, SPRINTEC 28 DAY TABLET, VYLIBRA 28 TABLET
NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 28 TABLET	NORG-EE 0.18-0.215-0.25/0.035, TRI-ESTARYLLA TABLET, TRI-LINYAH TABLET, TRI-MILI 28 TABLET, TRI-SPRINTEC TABLET, TRI-VYLIBRA 28 TABLET
NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 LO TABLET	NORG-EE 0.18-0.215-0.25/0.025, TRI-LO-ESTARYLLA TABLET, TRI-LO-MARZIA TABLET, TRI-LO-MILI TABLET, TRI-LO-SPRINTEC TABLET, TRI-VYLIBRA LO TABLET
NORGESTREL-ETHINYL ESTRADIOL 0.3-0.03MG TABLET	CRYSELLE-28 TABLET, ELINEST-28 TABLET, LOW-OGESTREL-28 TABLET, TURQOZ-28 TABLET
ULIPRISTAL ACETATE 30 MG TABLET	ELLA 30 MG TABLET