



BlueCross BlueShield of Oklahoma

Contraceptives covered with no cost-sharing – BCBSOK plans

Cervical Caps

FEMCAP
 PRENTIF CAVITY-RIM CERVICAL CAP
 PRENTIF FITTING SET

Diaphragms

OMNIFLEX DIAPHRAGM
 ORTHO ALL-FLEX
 ORTHO COIL SPRING KIT
 ORTHO FLAT SPRING KIT
 WIDE-SEAL SILICONE

Emergency Contraceptives

levonorgestrel

Next Choice

Injections

DEPO-PROVERA CONTRACEPTIVE**
 DEPO-SUBQ PROVERA 104

medroxyprogesterone acetate

Implantable

IMPLANON
 NEXPLANON

Intrauterine

MIRENA

Patch

ORTHO EVRA

Ring

NUVARING

Oral Contraceptives

Camila

Errin

Heather

Introvale

Jolessa

Jolivette

Nora-BE

norethindrone

norgestimate/ethinyl estradiol

Quasense

Trinessa

Tri-Previfem

Tri-Sprintec

NOTE: Eligible benefit plans include coverage under the Affordable Care Act for contraceptives to be covered at no cost-share for plan/policy years beginning on or after August 1, 2012 for non-grandfathered plans. This list includes the contraceptives covered by BCBSOK under this requirement. This list will be reviewed periodically and is subject to change.
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Generic Drugs = **bold** Brand Drugs = CAPITAL LETTERS ** = generic available
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