	Mass General Health Plan	Brigham
	Health Plan	_

Over-the-Counter Drug Benefit



Pay nothing, or only your plan's cost sharing, for many routine Over-the-Counter (OTC) drugs with a prescription.

Using your OTC benefit is easy

Here's how you do it: Get a prescription for any of the products below (for a supply of up to 90 days for select drugs) from your provider. Bring your prescription to any in-network pharmacy. Your pharmacist will make sure you get the right product and price. Please note that quantity limits and age limits apply and generic products will be prescribed when available.

Therapy	Drug Class	Drug Name
Courth Cold and Allouny	Antitussive	guaifenesin DM (Robitussin DM) syrup, liquid
Cough, Cold, and Allergy	Expectorant	guaifenesin (Robitussin) syrup, liquid
	Nasal Decongestant	pseudoephedrine (Sudafed) syrup ¹ , tablets
	Antihistamines	diphenhydramine (Benadryl) liquid, capsules, syrup
		chlorpheniramine (Chlor-Trimeton) tablets, syrup
DME Products	Humidifiers/Vaporizers	Humidifiers and vaporizers ³
	Asthma	Peak flow meters
		Spacers
	Diabetes	Select diabetic testing supplies ⁴

OTC drugs you can get at no cost with a prescription:

OTC drugs you can get at tier one cost sharing with a prescription:

Therapy	Drug Class	Drug Name
Cough, Cold, and Allergy	Antihistamines	loratadine (Claritin) tablets, syrup², ODT
		loratadine-pseudoephedrine (Claritin-D) tablets
		cetirizine (Zyrtec) tablets, syrup ² , chewables
		cetirizine-pseudoephedrine (Zyrtec-D) tablets
	Nasal Sprays	triamcinolone (Nasacort Allergy 24hr) nasal spray
		cromolyn (Nasalcrom) nasal spray
		saline (Ocean Nasal) spray 0.65%
		budesonide (Rhinocort) nasal allergy spray
		fluticasone (Flonase) nasal spray

The brand name listed in parenthesis is for reference only, brand name medications are not covered when there is a generic available.

Therapy	Drug Class	Drug Name
Dermatologicals	Antifungals	clotrimazole cream, vaginal cream/inserts
		miconazole cream, vaginal cream/inserts
		tolnaftate cream, gel, solution, aerosol
	Dry Skin Preparations	AmLactin 12% lotion
	Poison Ivy	hydrocortisone cream, lotion, ointment, solutions
Nutrients	Vitamins (generic only)	Prenatal vitamin tablets 27/1 mg, 27/0.8 mg, 28/0.8 mg
		Multi-vitamins liquid, chewables, drops
		Multi-vitamins with iron tablets, liquid, chewables, drop
		niacin (Nictonic Acid)
		vitamin B6 (Pyridoxine) tablets
		magnesium oxide
		calcium carbonate and citrate tablets and chewables
		calcium carbonate and citrate + vitamin D tablets
	Minerals	oyster shell calcium tablets
		oyster shell calcium + vitamin D tablets
		potassium-sodium phosphate (Neutra-phos-K) powder
	Trace Elements	ferrous sulfate tablets, elixer ¹ , drops ²
		ferrous gluconate tablets
	Electrolytes	Electrolyte solutions ²
Gastrointestinal	Antiparasites	pinworm (Reese's Pinworm) tablet, suspension
	H2-blockers	famotidine (Pepcid) tablets
		cimetidine (Tagamet) tablets
	Laxatives	polyethylene glycol 3350 (Miralax OTC) oral powder
		magnesium citrate
		psyllium (Metamucil) powder 28.3%, 30.9%, 58.6%
		bisacodyl (Ducolax) tablets, suppositories
		saline (Fleet) enema
		senna (Senokot) tablets 8.6 mg
Pain	Anti-inflammatory	ibuprofen suspension 100 mg/5 mL
Respiratory	Diluents	sodium chloride
Opthamalic	Dry Eye	artificial tears eye drops
Preparations	Allergy	ketotifen (Zaditor OTC) 0.025% drops

The brand name listed in parenthesis is for reference only, brand name medications are not covered when there is a generic available.

Check your plan documents on member.massgeneralbrighamhealthplan.org for your specific cost-sharing amounts

¹ Age limit applies: covered for children under 12 years old. ² Age limit applies: covered for children under 6 years old. ³ For a list of specific covered products, please contact Customer Service.⁴ For a list of covered diabetic testing supplies, please contact Customer Service.

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