

Over-the-Counter Health & Wellness Products

2024 Catalog and Order Form

Humana[®]

2024 Over-the-Counter (OTC) Health and Wellness Product Order Form

Plans with an over-the-counter allowance allow you to purchase OTC health and wellness products from CenterWell Pharmacy™. To verify your 2024 Health and Wellness allowance, please contact customer service at the number on the back of your Humana member ID card or check your Summary of Benefits.

Keep this catalog somewhere accessible. You'll need this to look up the health and wellness products you want to order.

How to place your order

For all members: mail and fax



Due to added time to receive your request by mail, we encourage you to allow extra time when placing your order. If you have a monthly allowance, submit your order by the 20th of each month. If you have a quarterly allowance, submit your order by the 20th of the last month of your allowance period. Last month of quarters are March, June, September, and December.

Fill out the Health and Wellness Products Order Form and mail only the order form pages to:

CenterWell Pharmacy

P.O. Box 1197 Cincinnati, OH 45201-1197

or fax the order form pages to

800-379-7617

A few things to note before you order

- Know your plan's allowance. You can find this information in your Summary of Benefits, or by contacting your licensed sales agent. If you have a plan that includes rollover allowance, your unused balance will carry over to your next month or quarter and expire on Dec. 31, 2024. If you have a plan that does not include a rollover allowance, your allowance will need to be used within each month or quarter, depending on your plan.
- If your order exceeds your plan's allowance, please include a check, money order or enter your credit card information to pay the remaining amount due. Your final balance will include applicable sales tax for all of your over the counter items. If your order isn't paid in full, items will be removed to bring your total to or below your benefit allowance.
- If you order multiple products, you may receive them in multiple shipments.
- If you have an OTC allowance or Healthy Options allowance, you will need to activate your prepaid card before making purchases from this catalog. Eligible members can call **855-396-0691**, 24 hours a day, seven days a week.



If you have questions about how to use the OTC allowance at CenterWell Pharmacy, call **855-211-8370** (TTY: **711**). Customer Care specialists are available Monday – Friday, 8 a.m. – 11 p.m., and Saturday, 8 a.m. – 6:30 p.m., Eastern time.

2024 Humana Health and Wellness Product Order Form



941CW



MEMBER INFORMATION

Member ID (found on Humana ID card)

Date of Birth

Gender

 Male
 Female

First Name

Last Name

MI

Street Number

Street Name

Apt/Suite #

Urbanization Code (for Puerto Rico addresses only)

City

State

Zip Code

Daytime Phone

Evening Phone

Please check box if this is a new address:

During which month would you like to receive this order?

If a month is not selected, your order will be processed the month your request is received.

PAYMENT INFORMATION

If your total order is less than your plan's allowance, you DO NOT need to include payment and you will receive the items you ordered.

If your order exceeds your plan's allowance, please include a check, money order or enter your credit card information to pay the remaining amount due. Your final balance will include applicable sales tax for all of your over the counter items. If your order isn't paid in full, items may be removed to bring your total to or below your benefit allowance. Please be sure to provide your payment information each time you order over your allowance amount. Do not send cash.

Credit/Debit Card #

Exp. Date

Cardholder First Name

Cardholder Last Name

Cardholder Signature:

Before submitting your order

- Verify your OTC allowance before submitting your order
- Remember to submit your order by the 20th of the month for monthly allowance and the 20th of the last month of your allowance period for quarterly allowance
- Orders can take 10-14 business days to be delivered from the time your order is received
- Orders may be delivered in multiple packages by FedEx, UPS or USPS
- If you receive a generic, it will be comparable to the name-brand product
- Returns and refunds are not accepted for items that were properly dispensed.
- Notify CenterWell Pharmacy immediately if there are issues when you receive your order

Member ID (found on Humana ID card)

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Date of Birth

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941ACW



First name

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Last name

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PRODUCT SELECTION

*Write in the quantity of the product you would like to receive, not the package size listed in catalog.

Product Code	Product Name	Quantity*	Price
<i>Example:</i> 0 1 6	Aspirin Low Dose 81mg EC	1	\$6
1 OTC □□□	_____	□	_____
2 OTC □□□	_____	□	_____
3 OTC □□□	_____	□	_____
4 OTC □□□	_____	□	_____
5 OTC □□□	_____	□	_____
6 OTC □□□	_____	□	_____
7 OTC □□□	_____	□	_____
8 OTC □□□	_____	□	_____
9 OTC □□□	_____	□	_____
10 OTC □□□	_____	□	_____
11 OTC □□□	_____	□	_____
12 OTC □□□	_____	□	_____
13 OTC □□□	_____	□	_____
14 OTC □□□	_____	□	_____
15 OTC □□□	_____	□	_____

To order by mail, send the completed Humana Health and Wellness Product Order Form page along with payment (if needed) to:
CenterWell Pharmacy
P.O. Box 1197
Cincinnati, OH 45201-1197

Your total order amount \$ _____
OTC allowance \$ _____
Total remaining amount due \$ _____
Sales tax may apply to items based on state tax regulations

Over-the-Counter (OTC) Health and Wellness Product Catalog

Diabetes Management

Product code	Product name	Compare to	Package count	Price
Compression Dress Socks, 8-15 mmHg				
501	Compression dress socks 8 - 15 mmHg, black - Small	Curad®	1 pair	\$16
500	Compression dress socks 8 - 15 mmHg, black - Medium	Curad®	1 pair	\$16
499	Compression dress socks 8 - 15 mmHg, black - Large	Curad®	1 pair	\$16
Compression Stockings, 15-20 mmHg				
265	Compression stockings 15-20mmHg regular beige size A (Ankle: 7" - 7 7/8"; Calf: 10" - 13")	JOBST®	1 pair	\$17
266	Compression stockings 15-20mmHg regular beige size B (Ankle: 8" - 8 7/8"; Calf: 12" - 15")	JOBST®	1 pair	\$17
267	Compression stockings 15-20mmHg regular beige size C (Ankle: 9" - 9 7/8"; Calf: 14" - 17")	JOBST®	1 pair	\$17
268	Compression stockings 15-20mmHg regular beige size D (Ankle: 10" - 10 7/8"; Calf: 16" - 19")	JOBST®	1 pair	\$17
269	Compression stockings 15-20mmHg regular beige size E (Ankle: 11" - 11 7/8"; Calf: 18" - 21")	JOBST®	1 pair	\$17
270	Compression stockings 15-20mmHg regular beige size F (Ankle: 12" - 12 7/8"; Calf: 20" - 23")	JOBST®	1 pair	\$17
271	Compression stockings 15-20mmHg regular beige size G (Ankle: 13" - 13 7/8"; Calf: 22" - 26")	JOBST®	1 pair	\$17
329	Compression stockings 15-20mmHg regular black size A (Ankle: 7" - 7 7/8"; Calf: 10" - 13")	JOBST®	1 pair	\$13
330	Compression stockings 15-20mmHg regular black size B (Ankle: 8" - 8 7/8"; Calf: 12" - 15")	JOBST®	1 pair	\$13
331	Compression stockings 15-20mmHg regular black size C (Ankle: 9" - 9 7/8"; Calf: 14" - 17")	JOBST®	1 pair	\$13
332	Compression stockings 15-20mmHg regular black size D (Ankle: 10" - 10 7/8"; Calf: 16" - 19")	JOBST®	1 pair	\$13
333	Compression stockings 15-20mmHg regular black size E (Ankle: 11" - 11 7/8"; Calf: 18" - 21")	JOBST®	1 pair	\$13

If you receive a generic, it will be comparable to the name-brand product. This list is subject to change.

334	Compression stockings 15-20mmHg regular black size F (Ankle: 12" - 12 7/8"; Calf: 20" - 23")	JOBST®	1 pair	\$13
335	Compression stockings 15-20mmHg regular black size G (Ankle: 13" - 13 7/8"; Calf: 22" - 26")	JOBST®	1 pair	\$13
Crew Socks, 8-15 mmHg				
376	Diabetes circulatory crew socks 8-15mmHg black - Small	Diabetes circulatory crew socks 8-15mmHg black - Small	1 pair	\$11
375	Diabetes circulatory crew socks 8-15mmHg black - Medium	Diabetes circulatory crew socks 8-15mmHg black - Medium	1 pair	\$11
374	Diabetes circulatory crew socks 8-15mmHg black - Large	Diabetes circulatory crew socks 8-15mmHg black - Large	1 pair	\$11
377	Diabetes circulatory crew socks 8-15mmHg black - XL	Diabetes circulatory crew socks 8-15mmHg black - XL	1 pair	\$11
381	Diabetes circulatory crew socks 8-15mmHg white - Small	Diabetes circulatory crew socks 8-15mmHg white - Small	1 pair	\$11
380	Diabetes circulatory crew socks 8-15mmHg white - Medium	Diabetes circulatory crew socks 8-15mmHg white - Medium	1 pair	\$11
379	Diabetes circulatory crew socks 8-15mmHg white - Large	Diabetes circulatory crew socks 8-15mmHg white - Large	1 pair	\$11
382	Diabetes circulatory crew socks 8-15mmHg white - XL	Diabetes circulatory crew socks 8-15mmHg white - XL	1 pair	\$11
Diabetes Management Items				
305	Glucose tablets (6 pack of 10 tablets)	DEX4® Glucose Tablets	60	\$13

Fall Prevention

Product code	Product name	Compare to	Package count	Price
Dressing Aids				
619	Extra-long shoe horn with sock remover	Extra-long shoe horn with sock remover	1	\$13
594	Sock assistance device	Sock assistance device	1	\$14
Fall Safety				
532	Non-skid slipper socks	Non-skid slipper socks	1 pair	\$5
419	Plug-in LED night lights	Plug-In LED Night Lights	2	\$9
625	Transfer belt with handles, wide	Transfer Belt with Handles, Wide	1	\$20
Mobility Assistance				
531	Grabber Reacher Tool	Grabber Reacher Tool	1	\$15

If you receive a generic, it will be comparable to the name-brand product. This list is subject to change.

**Limit one per plan year. Prior to purchase, the enrollee is strongly encouraged to have a conversation with their personal provider about the appropriateness of this OTC item.

Fitness Devices

Product code	Product name	Compare to	Package count	Price
Exercise Equipment				
528	Foam roller	Foam roller	1	\$17
Exercise Trackers				
434	Fitbit® Charge**	Fitbit® Charge	1	\$159
523	Fitbit® Inspire**	Fitbit® Inspire	1	\$99
522	Fitbit® Versa**	Fitbit® Versa	1	\$199
441	Pedometer	Pedometer	1	\$15

Home Medical

Product code	Product name	Compare to	Package count	Price
Cushions & Pillows				
443	CPAP memory foam pillow**	CPAP memory foam pillow	1	\$60
444	CPAP pillow - fiber filled**	CPAP pillow - fiber filled	1	\$45
447	Foam ring cushion	Carex®	1	\$21
450	Hypoallergenic pillow**	Hypoallergenic pillow	1	\$27
451	Lumbar cushion	Carex®	1	\$25
Hearing Aids				
639	Energizer® Hearing aid batteries, size 10	Energizer® Hearing aid batteries	8	\$14
640	Energizer® Hearing aid batteries, size 312	Energizer® Hearing aid batteries	8	\$14
641	Energizer® Hearing aid batteries, size 13	Energizer® Hearing aid batteries	8	\$14
631	MDHearing® Neo Rechargeable In-the-Ear Hearing Aids	MDHearing® Neo Rechargeable In-the-Ear Hearing Aids	1	\$299
630	MDHearing® Volt Rechargeable Over-the-Ear Hearing Aids	MDHearing® Volt Rechargeable Over-the-Ear Hearing Aids	1	\$399
Medical Bracelets				
452	Medical bracelet - diabetes	Medical bracelet	1	\$21
453	Medical bracelet - heart patient	Medical bracelet	1	\$21
Medication Aids & Disposal				
456	Pill bottle opener with magnifying glass	Pill bottle opener with magnifying glass	1	\$9
Personal Protective Aids				
486	Cloth face masks	Cloth face masks	3 masks	\$12
485	Disposable face masks	Disposable face masks	10 masks	\$10

If you receive a generic, it will be comparable to the name-brand product. This list is subject to change.

**Limit one per plan year. Prior to purchase, the enrollee is strongly encouraged to have a conversation with their personal provider about the appropriateness of this OTC item.

Sensory Aids				
445	Digital hearing amplifier**	Clearon hearing amplifier	1	\$50
446	Magnifying glass	Magnifying glass	1	\$10

Incontinence

If you experience incontinence, we're here to help you find the right products for you. Below is a chart to help you choose the product(s) you need.

Absorbency level ↓	Usage	Tab-style or Briefs	Underwear or Pull on	Pads
	Day	Unisex: <ul style="list-style-type: none"> Extra absorbency tab-style disposable briefs <ul style="list-style-type: none"> Small, Medium, Large, XL, XXL Ultra Absorbency tab-style disposable briefs <ul style="list-style-type: none"> Small, Medium, Large, XL, XXL 	For women: <ul style="list-style-type: none"> Incontinence Underwear <ul style="list-style-type: none"> Small/Medium, Large/XL For men: <ul style="list-style-type: none"> Incontinence Underwear <ul style="list-style-type: none"> Small/Medium, Large/XL Unisex: <ul style="list-style-type: none"> Incontinence Underwear, heavy absorbency - XXL 	For women: <ul style="list-style-type: none"> Panty liner Bladder control pad <ul style="list-style-type: none"> Light Moderate Maximum For men: <ul style="list-style-type: none"> Bladder control guards
Extended or overnight	Unisex: <ul style="list-style-type: none"> Extended wear high capacity tab-style briefs <ul style="list-style-type: none"> Small, Medium, Large, XL 		For women: <ul style="list-style-type: none"> Bladder control pad, Ultimate 	

Product code	Product name	Compare to	Package count	Price
Clean & Protect				
369	Flushable cleansing cloths	Cottonelle®	40	\$5
Pads & Guards				
366	Bladder control guards for men	FitRight® Active Bladder Guards for Men	52	\$14
595	Bladder control pad for women - Light	FitRight®	20	\$9
596	Bladder control pad for women - Moderate	FitRight®	16	\$8
597	Bladder control pad for women - Maximum	FitRight®	10	\$9
598	Bladder control pad for women - Ultimate	FitRight®	10	\$10
599	Panty liner - long	Panty liner - long	40	\$8
Tab-Style Briefs				
396	Adult incontinence tab-style disposable briefs, Extra absorbency - Small, for waist size 20"-32"	FitRight® Disposable Briefs, Extra Absorbency - Small	20	\$18
395	Adult incontinence tab-style disposable briefs, Extra absorbency - Medium, for waist Size 32"-44"	FitRight® Disposable Briefs, Extra Absorbency - Medium	20	\$18

If you receive a generic, it will be comparable to the name-brand product. This list is subject to change.

**Limit one per plan year. Prior to purchase, the enrollee is strongly encouraged to have a conversation with their personal provider about the appropriateness of this OTC item.

394	Adult incontinence tab-style disposable briefs, Extra absorbency - Large, for waist size 44"-56"	FitRight® Disposable Briefs, Extra Absorbency - Large	20	\$18
397	Adult incontinence tab-style disposable briefs, Extra absorbency - XL, for waist size 56"-64"	FitRight® Disposable Briefs, Extra Absorbency - XL	20	\$18
398	Adult incontinence tab-style disposable briefs, Extra absorbency - XXL, for waist size 60"-70"	FitRight® Disposable Briefs, Extra Absorbency - XXL	20	\$18
401	Adult incontinence tab-style disposable briefs, Ultra absorbency - Small, for waist size 20"-32"	FitRight® Disposable Briefs, Ultra Absorbency - Small	20	\$18
400	Adult incontinence tab-style disposable briefs, Ultra absorbency - Medium, for waist size 32"-44"	FitRight® Disposable Briefs, Ultra Absorbency - Medium	20	\$18
399	Adult incontinence tab-style disposable briefs, Ultra absorbency - Large, for waist size 44"-56"	FitRight® Disposable Briefs, Ultra Absorbency - Large	20	\$18
402	Adult incontinence tab-style disposable briefs, Ultra absorbency - XL, for waist size 56"-64"	FitRight® Disposable Briefs, Ultra Absorbency - XL	20	\$18
403	Adult incontinence tab-style disposable briefs, Ultra absorbency - XXL, for waist size 60"-70"	FitRight® Disposable Briefs, Ultra Absorbency - XXL	20	\$18
539	Extended wear stretch briefs - Size 1, for waist size 31"-52"	Extended wear high capacity tab-style briefs - Small and Medium	20	\$25
538	Extended wear stretch briefs - Size 2, for waist size 40"-70"	Extended wear high capacity tab-style briefs - Large and XL	20	\$24
Underpads & Chair Pads				
256	Absorbent underpads (disposable chux pads) 23" x 36"	Protection Plus® Disposable Underpads 23" x 36"	20	\$15
617	Chair pad, washable waterproof 21" x 22"	Chair pad, washable waterproof	1	\$14
537	Disposable underpads 36" x 36"	Disposable underpads 36" x 36"	50	\$36
542	Washable underpad 34" x 36"	Washable underpad 34" x 36"	1	\$14
Underwear				
602	Incontinence underwear for men - heavy absorbency, Small/Medium, for Waist Sizes 28" - 40"	FitRight®	20	\$17
603	Incontinence underwear for men - heavy absorbency, Large/XL, for Waist Sizes 40" - 56"	FitRight®	20	\$17
600	Incontinence underwear for women - heavy absorbency, Small/Medium, for Waist Sizes 28" - 40"	FitRight®	20	\$17
601	Incontinence underwear for women - heavy absorbency, Large/XL, for Waist Sizes 40" - 56"	FitRight®	20	\$17
604	Incontinence unisex underwear - XXL, for Waist Sizes 68" - 80"	FitRight®	20	\$20

If you receive a generic, it will be comparable to the name-brand product. This list is subject to change.

Personal Care

Product code	Product name	Compare to	Package count	Price
Dental Floss, Flossers, Picks				
224	Dental floss, waxed	Dental floss, waxed	100 yards	\$5
391	Dental flossers	Dental flossers	90	\$5
554	Interdental brush picks	Gum®	275	\$6
555	Interdental gum brushes	Gum®	10	\$8
Denture Care				
225	Denture adhesive	Fixodent®	1.5 oz.	\$6
392	Denture brush	GUM® Denture Brush	1	\$6
319	Effervescent denture tabs	Efferdent®	90	\$7
553	Fixodent® Denture Adhesive	Fixodent® Denture Adhesive	2.4 oz.	\$9
652	Overnight dental guard with case	Dental Clean	2	\$9
Ear Care				
559	Swimmer's ear solution	Debrox® Swimmer's Ear Drying Drops	1 oz.	\$8
Eye Care				
551	Contact lens solution	Opti-Free® Replenish®	12 oz.	\$8
Foot Care				
613	Antifungal foot powder, miconazole nitrate 2%	Zeasorb® AF	2.5 oz.	\$9
465	Bunion guard	Bunion Guard	1	\$9
473	Moleskin	Moleskin	3 strips	\$6
Power Dental Flossers & Tips				
471	Battery-operated water jet**	Interplak® Battery-Operated Water Jet	1	\$35
472	Battery-operated water jet tips	Interplak® Battery-Operated Water Jet Tips	5	\$12
Toothbrushes & Accessories				
664	Interplak® toothbrush heads 2/pk	Conair®	2	\$23
665	Interplak® toothbrush rechargeable cordless	Conair®	1	\$30
284	Toothbrush	Toothbrush	3	\$6
Toothpaste				
545	Aim® Toothpaste	Aim® Toothpaste	5.5 oz.	\$5
550	Colgate® Toothpaste	Colgate® Toothpaste	4.6 oz.	\$6
552	Crest® Toothpaste	Crest® Toothpaste	5.4 oz.	\$7
558	Pepsodent® Toothpaste	Pepsodent® Toothpaste	5.5 oz.	\$5

If you receive a generic, it will be comparable to the name-brand product. This list is subject to change.

**Limit one per plan year. Prior to purchase, the enrollee is strongly encouraged to have a conversation with their personal provider about the appropriateness of this OTC item.

606	Sensodyne Toothpaste	Sensodyne Toothpaste	6 oz.	\$13
285	Crest® Toothpaste Value Pack	Crest® Toothpaste Value Pack	2	\$8

Skin Care

Product code	Product name	Compare to	Package count	Price
Skin Creams, Lotions, Gels				
409	Eczema Moisturizing Cream	Aveeno® Active Naturals® Eczema Therapy Moisturizing Cream	5 oz.	\$13
563	Skin Repair Cream	Remedy® Intensive Skin Therapy Skin Repair Cream	4 oz.	\$8
Sun & Insect Care				
306	Sun Block SPF 30	Coppertone® SPF 30	8 oz.	\$9
564	Sunscreen SPF 50	Sunscreen SPF 50	8 oz.	\$9

Supports

Product code	Product name	Compare to	Package count	Price
Back				
337	Back support elastic - one size fits most	Futuro®	1	\$25
567	Back support with pulley system, Small/Medium	Back support with pulley system, Small/Medium	1	\$19
566	Back support with pulley system, Large/XL	Back support with pulley system, Large/XL	1	\$19
568	Back support with pulley system 2XL	Back support with pulley system 2XL	1	\$19
Hand, Wrist & Elbow				
565	Arthritis gloves, Small	Vive Arthritis Gloves	1 pair	\$18
364	Arthritis gloves, Medium	Vive Arthritis Gloves	1 pair	\$18
363	Arthritis gloves, Large	Vive Arthritis Gloves	1 pair	\$18
442	Carpal tunnel night brace	Futuro® Carpal Tunnel Night Brace	1	\$23
339	Elbow support	Futuro® Elbow Support	1	\$11
343	Wrist support	Futuro®	1	\$15
Knee, Ankle & Foot				
336	Ankle support	Futuro®	1	\$12
342	Knee support with stays, Small,	Futuro® Knee Support with stays	1	\$18
341	Knee support with stays, Medium,	Futuro® Knee Support with stays	1	\$18
340	Knee support with stays, Large,	Futuro® Knee Support with stays	1	\$18
357	Knee support with stays XL,	Futuro® Knee Support with stays	1	\$18
459	Plantar fasciitis relief sleeve	Plantar fasciitis relief sleeve	1 pair	\$15

If you receive a generic, it will be comparable to the name-brand product. This list is subject to change.

Important

At Humana, it is important you are treated fairly.

Humana Inc. and its subsidiaries do not discriminate or exclude people because of their race, color, national origin, age, disability, sex, sexual orientation, gender, gender identity, ancestry, ethnicity, marital status, religion, or language. Discrimination is against the law. Humana and its subsidiaries comply with applicable federal civil rights laws. If you believe that you have been discriminated against by Humana or its subsidiaries, there are ways to get help.

- You may file a complaint, also known as a grievance:
Discrimination Grievances, P.O. Box 14618, Lexington, KY 40512-4618
If you need help filing a grievance, call **1-877-320-1235** or if you use a **TTY**, call **711**.
- You can also file a civil rights complaint with the **U.S. Department of Health and Human Services**, Office for Civil Rights electronically through their Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or at **U.S. Department of Health and Human Services**, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, DC 20201, **1-800-368-1019**, **800-537-7697 (TDD)**. Complaint forms are available at <https://www.hhs.gov/ocr/office/file/index.html>.
- **California residents:** You may also call the California Department of Insurance toll-free hotline number: **1-800-927-HELP (4357)**, to file a grievance.

Auxiliary aids and services, free of charge, are available to you. 1-877-320-1235 (TTY: 711)

Humana provides free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation, and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.

Multi-Language Insert

Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at 1-877-320-1235 (TTY: 711). Someone who speaks English can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al 1-877-320-1235 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 1-877-320-1235 (TTY: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 1-877-320-1235 (TTY: 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa 1-877-320-1235 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au 1-877-320-1235 (TTY: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi 1-877-320-1235 (TTY: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter 1-877-320-1235 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 1-877-320-1235 (TTY: 711) 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону 1-877-320-1235 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على (1-877-320-1235 (TTY: 711). سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें 1-877-320-1235 (TTY: 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-877-320-1235 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portugues: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número 1-877-320-1235 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan 1-877-320-1235 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer 1-877-320-1235 (TTY: 711). Ta usługa jest bezpłatna.

Japanese: 当社の健康健康保険と薬品処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、1-877-320-1235 (TTY: 711) にお電話ください。日本語を話す人が支援いたします。これは無料のサービスです。

Get your questions answered

- If you have a plan that includes rollover allowance, your unused balance will carry over to your next month or quarter and expire on Dec. 31, 2024.
- If you have a plan that does not include a rollover allowance, your allowance will need to be used within each month or quarter, depending on your plan—any unused allowance will not roll over.
- If you have a Humana Spending Account card, you will need to activate your card before using.
- Orders will be shipped to your home by FedEx, UPS or the US Postal Service.
- Allow 10 to 14 business days for processing from the time CenterWell Pharmacy receives your order.
- If a product is unavailable or not in stock, it may be substituted for a similar product at no additional charge.
- Specific brands, colors, flavors, etc. cannot be requested unless noted in the catalog.
- CenterWell Pharmacy reserves the right to limit the quantities of OTC medications and supplies dispensed.
- Returns or refunds are not accepted for items that were properly dispensed.
- We encourage you to track your order once it has shipped and retrieve the package in a timely manner once it has been delivered.

OTC items may only be purchased for the plan enrollee. It is prohibited to purchase OTC items for family members and friends. Purchase of covered OTC products made under emergency circumstances may be eligible for reimbursement when the benefit allowance is available. Please check with your healthcare provider before using any of the OTC products offered.

**Limit one per plan year. Prior to purchase, the enrollee is strongly encouraged to have a conversation with their personal provider about the appropriateness of this OTC item.

+Product cannot be shipped to P.O. Boxes, Alaska, Hawaii, or Puerto Rico

++ Sale of products containing nicotine are prohibited to members under the age of 21.

Items not covered under this OTC benefit (non-eligible items) include baby items, contraceptives, cosmetics, food supplements such as protein/energy bars or honey, non-medicated soap/shampoo, laundry detergent, shaving items, homeopathic products such as Zicam or Arnicare, and insoles.

An allowance amount is only available if your plan offers the over-the-counter (OTC) service as a benefit. Call CenterWell Pharmacy at **855-211-8370 (TTY: 711)** if you have questions about your order, or about how to use this allowance at CenterWell Pharmacy, Monday- Friday, 8 a.m.—11 p.m., and Saturday, 8 a.m.— 6:30 p.m. Eastern time.

Other pharmacies are available in our network.

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