## Florida DSNP Over-the-Counter (OTC) Health and Wellness Product Order Form

Depending on your level of Medicaid eligibility as a member of Humana, you may be eligible to order the Over-the-Counter (OTC) products listed on the form on the next page from CenterWell Pharmacy at no additional cost. These OTC products may be available to you in addition to the monthly OTC allowance available through your plan benefits. Purchase of covered OTC products made under emergency circumstances may be eligible for reimbursement when the monthly OTC allowance is available to cover the purchase.

Call CenterWell Pharmacy Customer Care at **800-526-1490** (TTY: **711**) if you have questions about your eligibility or how to use this benefit at CenterWell Pharmacy. Customer Care representatives are available Monday – Friday, 8 a.m. – 11 p.m. and Saturday, 8 a.m. – 6:30 p.m., Eastern time.

## How to order:

(if eligible)

Place your order no later than the 20th of each month to ensure that CenterWell Pharmacy is able to process your order within the applicable benefit month.

Please allow 5 to 7 business days from the time CenterWell Pharmacy receives your order to shipment.

## You can place your order:

(if eligible)

Mail: Fill out the OTC Health and Wellness Product Order Form and mail only the order form pages to:

CenterWell Pharmacy PO Box 1197 Cincinnati, OH 45201-1197

Fax: Fill out the OTC Health and Wellness Product Order Form and fax only the order form pages to: 1-800-379-7617

Note: The following items are not covered under this OTC benefit (non-eligible items): Alternative medicines (including botanicals, herbals, probiotics and neutraceuticals including garlic, Echinacea, saw palmetto, ginkgo biloba, etc), Baby items, Contraceptives, Convenience (non-medical items), Cosmetics, Food Supplements, Replacement items, Attachments, and Peripherals (including hearing aid batteries, contact lens containers, etc when not factory packaged with original item).

\*Dual-Purpose items: Before ordering dual purpose items, which are products that can be used for either a medical condition or for general health and well-being, it is your responsibility to have appropriate conversations with your personal provider; and, your personal provider must orally recommend the OTC item for a specific diagnosable condition. You may order other items on this order without consulting with your personal provider but prior consultation is always advised. It is prohibited to order OTC items for anyone, including family members and friends, other than the plan member. Please review your Evidence of Coverage document for further information.

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

Humana is a Coordinated Care plan with a Medicare contract and a contract with the Florida Medicaid program. Enrollment in the Humana plan depends on contract renewal.

## Florida DSNP OTC Health and Wellness Products Order Form



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Membei	r ID (found	on Humana ID card) Dat	te of Birth		Gender								
			M /		Male								
First Nar	me		Last N	lame	Female	- 1							
Street N	umber	Street Name			Apt/Suit	e#							
City				State Zip Code									
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Daytime Phone Evening Phone													
	_			] - [[[] - []									
STEP 2 - Complete product selection - check the box next to the product you want to order													
Limit one (1) per item, per month													
Item	Product	Product name		Compare to	Package	Price							
100111	code			•	count	111100							
	I	l J	, Cold & A		<u> </u>	Ι.							
Ш	113	Cetirizine HCL 10mg		Zyrtec® 10mg	30	\$0							
	111	Guaifenesin (Expectorant) 400		Guaifenesin (Expectoran +00mg	at) 30	\$0							
	110	Loratadine 10mg		Claritin®	30	\$0							
	290	Loratadine Liquid 5mg/5ml	(	Children's Claritin®	4 oz.	\$0							
		Vitamins, Min	nerals & S	Supplements									
	109	Calcium Citrate plus Vitamin [	D C	Citrical® Caplets plus D	60	\$0							
	298	Ferrous Sulfate 325mg	F	eosol® 100	100	\$0							
		Pai	in Relieve	ers									
	229	Enteric Coated Aspirin 325mg	g E		100	\$0							
	605	Acetaminophen Arthritis 650r 24ct		Acetaminophen Arthritis 550mg	5 24	\$0							
Smoking Cessation													
	315	Nicotine Transdermal Patch, 7	7mg, N	Nicotine Transdermal Pa	itch 7	\$0							
	313	7/Box+ Nicotine Transdermal Patch, 1	1 / ma   N	Nicotine Transdermal Pa	tch 7	\$0							
	313	7/Box+	141119, 11	vicotine transaermai Pa	ILCII /	\$U							
	314	Nicotine Transdermal Patch, 2 7/Box Patch <sup>+</sup>	21mg,   N	Nicotine Transdermal Pa	itch 7	\$0							
	123	Stop Smoking Gum, 2mg+	l l	Nicorette® 2mg gum	50	\$0							
	124	Stop Smoking Gum, 4mg+	1	Nicorette® 4mg gum	50	\$0							
		Won	men's He	alth									
П	041	Clotrimazole 1% Vaginal Crea	ım (	Syne-Lotrimin® Cream	1.5 oz.	\$0							