



**STATE OF WISCONSIN**  
**Department of Employee Trust Funds**  
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**CORRESPONDENCE MEMORANDUM**

**DATE:** April 30, 2014  
**TO:** Group Insurance Board  
**FROM:** Tara Pray, Manager, Life Insurance & Employee Reimbursement Account Programs  
Mary Statz, Director, Health Benefits & Insurance Plans Bureau  
**SUBJECT:** High Deductible Health Plan / Health Savings Accounts

**Staff requests the Group Insurance Board (Board) approve the following recommendations related to the administration, eligibility, and design of the High Deductible Health Plan (HDHP) and Health Savings Accounts (HSAs).**

Staff and the Group Insurance Board Strategic Planning Workgroup (Workgroup) have researched and reviewed policy considerations related to the development of the HDHP and HSAs. Based on this effort, as well as information presented by the Board's consulting actuary, Deloitte Consulting LLP (Deloitte), staff recommends the following policies for the new HDHP/HSA offering effective January 1, 2015.

**HSA Administration**

**Staff recommends the administration of the HSA be performed by a single vendor.**

A Request for Proposal (RFP) for this service and/or an Employee Reimbursement Account (ERA) vendor was issued April 3, 2014. Staff will recommend a vendor(s) to the Employee Trust Funds Board at the June 26, 2014 meeting.

As an alternative to contracting with a single vendor, existing health plans could be required to administer HSAs for their members. However, staff believes that issues with funding and coordination of HSAs as members move between plans make this approach too difficult to administer efficiently.

**HDHP and HSA Eligibility**

Reviewed and approved by Lisa Ellinger, Administrator, Division of Insurance

*Lisa Ellinger*

Electronically Signed:  
05/08/2014

Board	Mtg Date	Item #
GIB	5.21.14	4B1+

According to the Internal Revenue Service, individuals are eligible to participate in an HSA arrangement if they meet all four of the following qualifying criteria:

- 1) they are enrolled in a specifically-qualified HDHP
- 2) they are not covered by another disqualifying health plan
- 3) they are not eligible for Medicare benefits
- 4) they are not a dependent of another person for tax purposes

Staff interprets the statutory reference to “all employees” in reference to the offering of the HDHP and HSA in §40.515(1), to mean all employees who are otherwise eligible to participate in the State of Wisconsin Group Health Insurance Program.

**Staff recommends the following clarifications and exclusions pertaining to HDHP/HSA participation.**

- **State employees, including domestic partners and non-tax dependent adult children less than 26 years old (see below regarding HSA eligibility for domestic partners and non-tax dependent adult children) are eligible.**
- **Annuitants under the age of 65 are eligible.**

Note: This option may be attractive to annuitants not eligible for Medicare. ETF occasionally receives requests from this group, asking for a lower-cost health insurance plan option.

- **Limited Term Employees (LTEs) eligible for the State of Wisconsin Group Health Insurance Program are eligible.**

According to a legal opinion from the Office of State Employment Relations (OSER), the statute requires this offering be made available to LTEs currently eligible for health insurance. ETF’s legal counsel concurs with this opinion.

Note: The LTE’s share of HDHP premium and the LTE’s HSA contribution may NOT be deducted pre-tax. This is because pre-tax deductions are administered through the State of Wisconsin’s Section 125 Cafeteria Plan, under which they are ineligible to participate per §230.26(4).

- **Local employees will have an HDHP offering available.**

The HDHP should be offered to local employees as a separate program option. Local employers would have the option of establishing their own HSA or Health Reimbursement Account (HRA) administration, but would not be eligible to participate in the HSA program offered to state employees.

- **Eligible state employees will be allowed an annual open enrollment opportunity to select between the HDHP and other benefit options, such as Uniform Benefits or the Standard Plan.**

A goal in this new offering is to provide employees with increased options and flexibility related to health benefits. Therefore, staff does not recommend impeding flexibility in opting into or out of the HDHP.

- **Eligible individuals will be allowed to enroll in the HDHP and HSA mid-year if they are a new hire or experience a HIPAA or Section 125 qualifying life event (i.e., marriage, birth of a child). Staff recommends OSER consider prorating the HSA employer contribution for mid-year elections.**

The HDHP and HSA should be offered to eligible employees throughout the year. This practice would be consistent with how health benefits are currently administered. There is no waiting period and new eligible employees may enroll for single or family coverage in any of the available health plans. Additionally, subscribers are allowed to change health plans when they have a qualifying life event if they apply within 30 days of the event.

Prorating any employer HSA contributions would avoid inequity issues if an individual enrolls in the program later in the year.

- **The single or family employer HSA contribution will be based on the type of HDHP (single vs. family) the subscriber is eligible for and in which they are enrolled.**

Staff research has found that a common practice among employers is to fund the employer HSA contribution based on the type of HDHP coverage (single vs. family) selected. This approach is consistent with IRS treatment of HSA contribution limits. It also eliminates the administrative burden of tracking domestic partners and non-tax dependent children related to employer HSA contributions. All HSA literature will contain a notice that under current IRS regulations, HSA funds may only be used to pay for eligible medical expenses of the account holder and their tax dependents without tax consequences or penalty.

The Patient Protection and Affordable Care Act (PPACA) allows parents to cover their adult children under their insurance plan until the child is 26 years old. For HSA purposes, the IRS treats domestic partners and non-tax dependent adult children covered by an HDHP in the same manner.

#### **HSA domestic partner and non-tax dependent adult child IRS rules:**

- **Using HSA funds:**

- Subscribers can only use their HSA funds for the medical expenses of their domestic partner if the domestic partner is considered a tax dependent.
- **Contribution limits:**
  - Per IRS rules, the HSA contribution limit is established based upon the type of HDHP coverage in place. Therefore, if a subscriber covers their domestic partner with the HDHP, the family HSA contribution limit applies.
  - The subscriber's domestic partner could open their own HSA outside of the State sponsored program if they are not a tax dependent of the subscriber. Under IRS rules, each domestic partner or non-tax dependent adult child may open separate HSAs and, if covered under a family HDHP, they each have a contribution limit of \$6,550 (this is the family limit for 2014, the family contribution limit for 2015 is \$6,650).
- **Eligible employees/annuitants must first be enrolled in an HDHP to be allowed to enroll in an HSA.**

Under IRS rules, an individual must be enrolled in an eligible HDHP to be eligible to contribute to an HSA.

- **HSA eligible employees/annuitants must also be enrolled in the state-sponsored HSA in order to receive any employer contributions and also to contribute pre-tax dollars via payroll deduction.**

It is possible that employees/annuitants could have an open HSA that was established prior to being covered by the State Group Health Insurance Plan. A primary benefit of an employer sponsored HSA is ease of administration. It could be an administrative burden to require employers to contribute to an HSA custodian of the employee's choosing.

**Staff recommends the following groups be considered ineligible for the HDHP/HSA option:**

- **Medicare eligible annuitants 65 and older.**

The State of Wisconsin Group Health Insurance Program currently requires retired subscribers who are 65 and older to enroll in Medicare. Those enrolled in Medicare are not eligible to contribute to an HSA, per IRS rules.

- **Those eligible for the Graduate Assistant coverage under the State of Wisconsin Group Health Insurance Program. Graduate Assistants include:**

**Research Assistants, Fellows, Advanced Opportunity Fellows, Scholars, Trainees, Teaching Assistants and Project/Program Assistants.**

The Graduate Assistant health insurance premiums are approximately 50% less than the current “regular” employee premiums. Research conducted and presented by Deloitte at the March 18, 2014 Workgroup meeting found that HDHPs are currently not offered to Graduate Assistants of the Big 10 colleges.

At this time, ETF staff is discussing the eligibility recommendation with the University Of Wisconsin to make sure that it is compliant with §40.52(3).

**HDHP Design**

**Staff recommends the following design:**

- **The HDHP design will be part of the Uniform Benefit Changes section of the Guidelines Memo for the 2015 benefit year and mirrors Uniform Benefits whenever possible.**

Staff believes it is important to maintain consistency in the health benefit structure once the deductible is reached so that those eligible to participate in the HDHP and HSA are able to compare benefit offerings to make health care decisions for themselves and their families. This consistency will also aid employers in explaining health benefit offerings to new employees, and will provide for ease developing clear communication and educational materials for subscribers.

- **The HDHP will have a “non-embedded” family deductible.**

An embedded deductible under a family plan means there are two kinds of deductibles: one for the family as a whole, and one for each individual family member. Deloitte suggests that embedded deductibles are rare and did not price the plan to include them. This recommendation means that one family deductible will apply for family plans.

- **Uniform Dental will be part of the HDHP and covered dental services will be subject to the deductible--with the exception of pediatric dental.**

PPACA requires pediatric dental benefits to be considered an “Essential Health Benefit” and not be subject to any deductibles. Since Essential Health Benefits are embedded within Uniform Benefits and we do not currently have a stand-alone dental plan, all non-pediatric dental benefits will be subject to the deductible.

- **Preventive drugs will be available on a “first dollar basis” for the HDHP.**

PPACA requires preventive drugs to be available on a first dollar basis for HDHPs -- meaning the deductible need not be met first for insurance coverage to take effect. The attached document contains the list of recommended preventive drugs to be covered under this provision. The list contains the standard drugs that Navitus considers preventive with other client HDHPs.

**Staff recommends OSER consider the following approach to determining the employee share of the premiums:**

- **HDHP premiums for Tier 1 plans should be based on a percentage of the employee share of the traditional health insurance premiums.**
- **HDHP premiums for Tier 2 and Tier 3 plans, including the Standard Plan, should be based on a dollar differential approach vs. the percentage differential recommended for Tier 1 plans.**

This recommendation is based on Deloitte's analysis presented at the April 16, 2014 Workgroup meeting. Deloitte concluded that offering the HDHP with premiums priced as a percentage differential could result in an unintended incentive to opt into a Tier 2 or Tier 3 plan. The primary objective of our current tiering structure is to incent subscribers to choose a Tier 1 health plan.

### **HSA Administration Fees**

**Staff recommends the per-participant, per-month (PPPM) HSA administrative fees, as well as any additional custodian/bank fees related to the establishment and ongoing maintenance of an HSA for active employees, be passed on to employers. Staff recommends this funding be generated through the current method of allocating administrative costs related to the Employee Reimbursement Accounts (ERA) Program. The current ERA administrative costs are assessed via a line item on the health insurance invoice at \$0.80 per health insurance contract. This fee is not built into the health insurance premium.**

The HSA third party administrator will assess a PPPM fee for administration of the accounts. There will also likely be an account establishment one-time fee and an account monthly maintenance fee assessed by the custodian/bank for each HSA. Custodian/bank fees can be paid by the employer or the employee. It is a common practice for employers to pay these fees while an employee is active. Typical one-time account establishment fees range from \$10 - \$25, and the account maintenance fees typically range from approximately \$18 - \$48 per participant per year.

Staff believes the custodian/bank fees are included under the purview of administrative costs outlined in Wis. Stat. §40.515(3), which states that, "The group insurance board

may collect fees from state agencies to pay all administrative costs relating to the establishment and operation of health savings accounts established under this section. The group insurance board shall develop a methodology for determining each state agency's share of the administrative costs.”

Staff recommends that HSA participants who terminate State employment or retire be held responsible for paying all ongoing custodial fees after termination/retirement.

Staff recommends that employers not pay additional fees incurred from the custodian/bank, beyond an account establishment one-time fee and an account monthly maintenance fee. Additional custodial fees could include such fees as:

- Account closing fee
- Investment fee
- Overdraft fee
- Account rollover fee

### **OSER and Department of Administration Responsibilities**

HDHP/HSA issues that are under the purview of OSER and/or the Department of Administration include:

- Level of HSA funding
- Level of HDHP employee premium contribution
- Payment of HSA custodian/bank fees
- Timing of HSA deposits

**Staff will be at the Board meeting to answer any questions.**

Attachment: Navitus Health Solutions High Deductible Health Plan Preventive Drug List



# High Deductible Health Plan Preventive Drug List

Your employer is making an effort to reduce your health care costs by giving you tools to help you stay healthy and productive. Below are the medications your employer has chosen to be included in the High Deductible Health Plan Preventive Drug list described in detail in your benefit plan. These medications help protect against or manage some high risk medical conditions. Taking these medications as directed by your prescriber can help avoid serious health problems. That may mean fewer doctor visits and hospitalizations, reducing your total health care costs.

In the drug list below, generic drugs begin with a lowercase letter. Brand name drugs begin with an uppercase letter.

## ANTIANGINAL AGENTS

DILATRATE SR  
DILTRATE SR CAP  
isosorbide dinitrate cap  
isosorbide dinitrate sl tab  
isosorbide dinitrate tab  
isosorbide mononitrate  
isosorbide mononitrate ER tab  
NITRO-BID OINT.  
NITRO-DUR PATCH  
nitroglycerin cap  
nitroglycerin patch  
nitroglycerin SL tab  
NITROLINGUAL PUMPSPRAY  
NITROMIST AEROSOL  
NITROSTAT SL TAB  
RANEXA TAB

## ANTIARRHYTHMICS

amiodarone tab

disopyramide cap  
disopyramide ER cap  
flecainide tab  
MEXILETINE CAP  
MULTAQ TAB  
NORPACE CR CAP  
PACERONE TAB  
propafenone er  
propafenone tab  
quinidine gluconate CR tab  
QUINIDINE SULFATE ER TAB  
quinidine sulfate tab  
RYTHMOL SR  
TIKOSYN CAP

## ANTIDIABETICS

acarbose  
ACTOPLUS MET  
ACTOPLUS MET XR  
ACTOS  
APIDRA

- Note: The list is subject to change and not all drugs listed may be covered on your formulary. Please refer to your Navitus formulary for a complete list of covered products.





AVANDAMET  
 AVANDARYL  
 AVANDIA  
 BYDUREON  
 BYETTA  
 chlorpropamide  
 CHLORPROPAMIDE TAB  
 CYCLOSET  
 DIABETA  
 DUETACT  
 FORTAMET TAB  
 glimepiride  
 glipizide  
 glipizide er  
 glipizide/metformin  
 GLUCAGEN HYPOKIT  
 GLUCAGON KIT  
 glyburide  
 glyburide micronized  
 glyburide/metformin  
 GLYCRON  
 GLYSET  
 HUMALOG  
 HUMALOG MIX  
 HUMULIN 50/50  
 HUMULIN MIX  
 HUMULIN N U-100  
 HUMULIN PEN  
 HUMULIN R INJ U-500  
 HUMULIN-R U-100  
 INSULIN SYRINGES  
 JANUMET  
 JANUMET XR TAB  
 JANUVIA  
 JENTADUETO TAB  
 JUVISYNC TAB  
 KOMBIGLYZE  
 LANTUS (SOLOSTAR)  
 LEVEMIR  
 metformin  
 metformin ER tab  
 nateglinide  
 NOVOLIN INNOLET  
 NOVOLIN PENFILL  
 NOVOLIN VIAL  
 NOVOLOG  
 NOVOLOG MIX 70/30  
 ONGLYZA  
 pioglitazone tab  
 pioglitazone/metformin tab  
 PRANDIMET  
 PRANDIN  
 PROGLYCEM  
 RELION MIX  
 RELION N  
 RELION R  
 RIOMET SOLN.  
 STARLIX  
 tolazamide  
 TOLBUTAMIDE  
 TRADJENTA TAB  
 VICTOZA INJ.

**ANTHYPERLIPIDEMICS**

ADVICOR TAB  
 ALTOPREV TAB  
 ANTARA CAP  
 atorvastatin tab  
 cholestyramine lite powder  
 cholestyramine lite powder pack  
 cholestyramine powder

- Note: The list is subject to change. Please always refer to your Navitus formulary for a complete list of covered products.



cholestyramine powder pack  
 colestipol granule  
 colestipol powder packet  
 colestipol tab  
 CRESTOR TAB  
 fenofibrate cap  
 fenofibrate tab  
 FIBRICOR TAB  
 fluvastatin cap  
 gemfibrozil tab  
 LESCOL CAP  
 LESCOL XL CAP  
 LIVALO  
 LOFIBRA  
 lovastatin tab  
 LOVAZA CAP  
 NIASPAN ER TAB  
 pravastatin tab  
 SIMCOR TAB  
 simvastatin tab  
 TRICOR TAB  
 TRILIPIX CAP  
 VYTORIN  
 WELCHOL PAK  
 WELCHOL TAB  
 ZETIA TAB

#### ANTIHYPERTENSIVES

ALTACE TAB  
 amlodipine/benazepril cap  
 AMTURNIDE  
 ATACAND HCT  
 ATACAND TAB  
 atenolol/chlorthalidone  
 AVALIDE TAB  
 AVAPRO TAB

AZOR TAB  
 benazepril tab  
 benazepril/hctz tab  
 BENICAR HCT TAB  
 BENICAR TAB  
 bisoprolol/hctz tab  
 captopril tab  
 CAPTOPRIL/HCTZ TAB  
 CATAPRES-TTS PATCH  
 clonidine patch  
 clonidine tab  
 COZAAR TAB  
 DIBENZYLINE CAP  
 DIOVAN HCT TAB  
 DIOVAN TAB  
 doxazosin tab  
 DUTOPROL TAB  
 EDARBI  
 EDARBYCLOR  
 enalapril tab  
 enalapril/hctz tab  
 eplerenone tab  
 eprosartan mesylate tab  
 EXFORGE HCT TAB  
 EXFORGE TAB  
 fosinopril tab  
 fosinopril/hctz tab  
 GUANABENZ TAB  
 guanfacine tab  
 hydralazine tab  
 HYDRALAZINE/ HCTZ CAP  
 HYZAAR TAB  
 irbesartan tab  
 irbesartan/ hctz tab  
 lisinopril

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lisinopril/hctz  
 losartan tab  
 losartan/hctz tab  
 methyldopa tab  
 methyldopa/hctz tab  
 metoprolol/hctz tab  
 minoxidil tab  
 moexipril tab  
 moexipril/hctz  
 nadolol/bend tab  
 NEXICLON XR SUSP  
 NEXICLON XR TAB  
 perindopril tab  
 prazosin cap  
 propranolol/hctz tab  
 quinapril tab  
 quinapril/hctz  
 ramipril cap  
 RESERPINE TAB  
 TARKA TAB  
 TEKAMLO TAB  
 TEKTURNA HCT TAB  
 TEKTURNA TAB  
 terazosin cap  
 TEVETEN HCT TAB  
 TEVETEN TAB  
 trandolapril  
 trandolapril/verapamil tab  
 TRIBENZOR TAB  
 TWYNSTA TAB  
 VALTURNA TAB

#### ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

anastrozole tab  
 exemestane

letrozole tab  
 ZYTIGA

#### BETA BLOCKERS

acebutolol cap  
 atenolol tab  
 betaxolol tab  
 bisoprolol tab  
 BYSTOLIC  
 CARTROL  
 carvedilol tab  
 COREG CR CAP  
 INNOPRAN XL CAP  
 labetalol tab  
 LEVATOL TAB  
 metoprolol ER tab  
 metoprolol tab  
 nadolol tab  
 pindolol tab  
 propranolol ER cap  
 PROPRANOLOL SOLN  
 propranolol tab  
 sotalol AF tab  
 sotalol tab  
 timolol maleate tab

#### CALCIUM CHANNEL BLOCKERS

amlodipine tab  
 CARDENE SR CAP  
 CARDIZEM CD CAP  
 CARDIZEM LA TAB  
 COVERA-HS TAB  
 diltiazem ER cap  
 diltiazem tab  
 DYNACIRC CR TAB  
 felodipine ER tab  
 isradipine cap

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matzim LA tab  
 nicardipine cap  
 NIFEDIPINE CAP  
 nifedipine ER tab  
 nimodipine cap  
 nisoldipine tablet  
 SULAR TAB  
 verapamil er  
 verapamil er cap  
 verapamil sr  
 verapamil sr tab  
 VERAPAMIL TAB

#### CARDIAC GLYCOSIDES

digoxin

#### CARDIOVASCULAR AGENTS - MISC.

AMLODIPINE/ ATORVASTATIN TAB  
 CADUET

#### CONTRACEPTIVES

AMETHYST TAB  
 apri  
 aranelle  
 aviane  
 balziva  
 BEYAZ  
 cesia  
 cryselle  
 ELLA  
 enpresse  
 FEMCON FE  
 jolessa tab/amethia tab  
 junel fe  
 junel tab  
 kariva  
 kelnor  
 LO LOESTRIN

LOESTRIN 24 FE  
 LOSEASONIQUE  
 mononessa  
 NATAZIA  
 necon  
 necon tab 1/50  
 next choice  
 nora-be  
 NORINYL TAB 1/50  
 NUVARING  
 OGESTREL  
 ORTHO TRI-CYCLEN LO  
 ORTHO-EVRA  
 OVCON 50  
 PLAN-B  
 tri lo-sprintec  
 tri-legest  
 trinessa  
 YASMIN  
 YAZ  
 zeosa

#### DIAGNOSTIC PRODUCTS

ACCU-CHEK METERS  
 ACCU-CHEK TEST STRIPS  
 CLINISTIX  
 FREESTYLE METERS  
 FREESTYLE TEST STRIPS  
 KETO-DIASTIX  
 KETOSTIX  
 LANCETS  
 PRECISION METERS  
 PRECISION XTRA TEST STRIPS

#### DIURETICS

acetazolamide cap

- Note: The list is subject to change. Please always refer to your Navitus formulary for a complete list of covered products.



acetazolamide tab  
 ACETAZOLAMIDE TAB 125MG  
 ALDACTAZIDE TAB  
 amiloride tab  
 amiloride/hctz tab  
 bumetanide tab  
 chlorothiazide tab  
 chlorthalidone tab  
 DIURIL ORAL SOLN.  
 DYRENIUM CAP  
 EDECRIN TAB  
 furosemide oral soln  
 FUROSEMIDE SOLN  
 furosemide tab  
 hydrochlorothiazide cap  
 hydrochlorothiazide tab  
 indapamide tab  
 methazolamide tab  
 METHYLCLOTHIAZIDE TAB  
 metolazone tab  
 spironolactone tab  
 spironolactone/hctz tab  
 THALITONE TAB  
 torsemide tab  
 triamterene/hctz cap  
 triamterene/hctz tab

#### HEMATOLOGICAL AGENTS - MISC.

AGGRENOX CAP  
 anagrelide cap  
 BRILINTA TAB  
 cilostazol tab  
 clopidogrel tab 75mg  
 dipyridamole tab  
 EFFIENT TAB  
 pentoxifylline ER tab

PLAVIX 75mg TAB  
 ticlopidine tab

#### LAXATIVES

ACTONEL TAB  
 ACTONEL W/ CALCIUM TAB  
 alendronate tab  
 ATELVIA TAB  
 calcitonin nasal spray  
 etidronate  
 FORTEO  
 FORTICAL SPRAY  
 FOSAMAX SOLN.  
 ibandronate tab  
 MIACALCIN INJ

#### MINERALS & ELECTROLYTES

FLUORABON SOLN.  
 FLUOR-A-DAY TAB  
 GALZIN CAP  
 KLOR-CON M15 CAP  
 KLOR-CON POWDER 25MEQ  
 K-PHOS TAB  
 phospho 250 neutral tab  
 potassium bicarbonate effer tab  
 potassium chloride effer tab  
 potassium chloride ER cap  
 potassium chloride ER tab  
 potassium chloride liquid  
 potassium chloride micro cap  
 potassium chloride powder packet  
 sodium fluoride chew tab  
 sodium fluoride soln.  
 SODIUM FLUORIDE TAB  
 SSKI SOLN.  
 zinc sulfate cap

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#### MOUTH/THROAT/DENTAL AGENTS

chlorhexidine gluconate  
 PREVIDENT  
 PREVIDENT 5000 PLUS  
 PREVIDENT ORAL RINSE  
 sodium fluoride cream  
 sodium fluoride gel  
 SODIUM FLUORIDE GEL PLAIN  
 sodium fluoride paste  
 sodium fluoride rinse  
 sodium fluoride-potassium nitrate paste  
 triamcinolone in orabase

#### SMOKING CESSATION

bupropion (smoking deterrent)  
 buproban  
 CHANTIX  
 nicotine gum  
 NICOTINE KIT  
 nicotine lozenge  
 nicotine patch  
 NICOTROL INHALER  
 NICOTROL NASAL SPRAY

#### VACCINES

CERVARIX INJ.  
 ENGERIX B INJ  
 ENGERIX B INJ.  
 FLUMIST NASAL  
 FLUVIRIN INJ.  
 FLUVIRIN PF INJ.  
 FLUZONE HIGH DOSE PF INJ.  
 FLUZONE INJ.  
 FLUZONE INTRADERMAL  
 GARDASIL INJ.  
 HAVRIX INJ.  
 MENACTRA INJ.

MENHIBRIX INJ.  
 MENOMUNE INJ.  
 MENVEO INJ.  
 MMR INJ.  
 PNEUMOVAX INJ.  
 RECOMBIVAX HB INJ.  
 TWINRIX INJ.  
 VAQTA INJ.  
 VARIVAX INJ.  
 VIVOTIF  
 ZOSTAVAX INJ.

#### VITAMINS

PRENATAL VITAMIN

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