### Aspirin

#### Aspirin to Prevent Cardiovascular Disease (CVD): Men
The U.S. Preventive Services Task Force (USPSTF) recommends the use of aspirin for men age 45 to 79 years when the potential benefit due to a reduction in myocardial infarctions outweighs the potential harm due to an increase in gastrointestinal hemorrhage.

**CVS Caremark Recommendation**
- Age limit ≥ 45 (men and women)
- No prior authorization
- Quantity limit of 100 units per fill
- Generic only
- OTC (requires prescription)

**GPI Description***
- Single ingredient: All oral dosage forms ≤ 325 MG. Includes dosage forms such as:
  - Aspirin tab 81 ~ 325 MG
  - Aspirin chew tab 75 ~ 81 MG
  - Aspirin tab delayed release 81MG, 162 MG & 325 MG
  - Aspirin dispersible tab 81 MG

#### Aspirin to Prevent CVD: Women
The USPSTF recommends the use of aspirin for women age 55 to 79 years when the potential benefit of a reduction in ischemic strokes outweighs the potential harm of an increase in gastrointestinal hemorrhage.

### Iron Supplements

#### Iron Supplementation in Children
The USPSTF recommends routine iron supplementation for asymptomatic children aged 6 to 12 months who are at increased risk for iron deficiency anemia.

**CVS Caremark Recommendation**
- Age limit = through year 1
- No prior authorization
- No quantity limits
- Brand and generic
- Rx or OTC (requires prescription)

**GPI Description***
- Single ingredient: Pediatric oral liquids
  - Carbonyl Iron susp 15mg/1.25ml
  - Iron susp. 15 MG ~ 1.5 ML & 15 MG/1.25 L
  - Ferrous sulfate elixir 220 MG/5 ML
  - Ferrous sulfate syrup 300 MG/5 ML
  - Ferrous sulfate soln 75 MG/ML
  - Ferrous sulfate soln 75 MG/0.6 ML
## Oral Fluorides

**Chemoprevention of Dental Caries (Cavities)**
The USPSTF recommends that primary care clinicians prescribe oral fluoride supplementation at currently recommended doses to preschool children older than 6 months of age whose primary water source is deficient in fluoride.

<table>
<thead>
<tr>
<th>CVS Caremark Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Age limit ≤ 6 yrs</td>
</tr>
<tr>
<td>• No prior authorization</td>
</tr>
<tr>
<td>• No quantity limit</td>
</tr>
<tr>
<td>• Brand and generic</td>
</tr>
<tr>
<td>• Rx products only</td>
</tr>
</tbody>
</table>

**GPI Description**
- Single ingredient: Oral dosage forms ≤ 0.5 MG
  - Sodium fluoride tab 0.5 MG
  - Sodium fluoride chew tab 0.25 - 0.5 MG
  - Sodium fluoride soln 0.125 ~ 0.25 MG/DROP
  - Sodium fluoride soln 0.25 MG/0.6 ML
  - Sodium fluoride soln 0.5 MG/ML

## Folic Acid

**Supplementation with Folic Acid**
The USPSTF recommends that all women planning or capable of pregnancy take a daily supplement containing 0.4 to 0.8 MG (400 to 800 MCG) of folic acid.

<table>
<thead>
<tr>
<th>CVS Caremark Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Women only</td>
</tr>
<tr>
<td>• Age limit ≤ 55</td>
</tr>
<tr>
<td>• No prior authorization</td>
</tr>
<tr>
<td>• Quantity limit 100 units per fill</td>
</tr>
<tr>
<td>• Generic only</td>
</tr>
<tr>
<td>• OTC (requires prescription)</td>
</tr>
</tbody>
</table>

**GPI Description**
- Single ingredient
  - Folic acid tab 0.4 MG & 0.8 MG
### Counseling for Tobacco Use: Adults
The USPSTF recommends that clinicians ask all adults about tobacco use and provide tobacco cessation interventions for those who use tobacco products.

### CVS Caremark Recommendation
- No prior authorization of tobacco cessation products
  - Clients with existing PA and quantity limits may choose to continue the requirement
- Limit of 168 day supply in one year of treatment with Generic Nicotine replacement products (nicotine patch, gum, and lozenges)
- Limit of 168 day supply in one year of treatment with Chantix or Generic Zyban
- Generic only on nicotine replacement products
- Limit to generic Zyban
- Rx or OTC (requires prescription)

### GPI Description*
- Bupropion HCl tab SR 12 HR 150 MG
- Nicotine TD patch 24 HR kit 21 MG, 14 MG, & 7 MG/24HR
- Nicotine polacrilex gum 2 ~ 4 MG
- Nicotine polacrilex lozenge 2 ~ 4 MG
- Varenicline tartrate tab 0.5 ~ 1 MG (base equiv)
  - Chantix brand
- Varenicline tartrate tab 0.5 MG X 11 & tab 1 MG X 42 pack
  - Chantix brand

*Products listed may be updated periodically. ‡For a complete listing of product names, contact your account representative.

This document contains CVS Caremark recommendations to assist clients in making ACA-compliant preventive services coverage decisions.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark.

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# Immunizations

**Immunizations: Vaccines**
The USTPF recommends immunizations for routine use in children, adolescents and adults that are recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention (CDC) on the CDC Immunization Schedules.

<table>
<thead>
<tr>
<th>CVS Caremark Recommendation</th>
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</thead>
<tbody>
<tr>
<td>• Children - birth through age 18</td>
</tr>
<tr>
<td>• Adults – covered age ≥ 19</td>
</tr>
<tr>
<td>• Rx Only</td>
</tr>
<tr>
<td>• Plans may choose to cover vaccines under the medical or pharmacy benefit</td>
</tr>
<tr>
<td>• If plans cover under the pharmacy benefit any vaccines which appear on the Immunization Schedules of the CDC, then the non-grandfathered or new start plans should apply $0 copay for these vaccines.‡</td>
</tr>
<tr>
<td>• No prior authorization</td>
</tr>
</tbody>
</table>

**Children:** Immunization vaccines for children from birth to age 18. Doses, recommended ages and recommended populations vary:
- Diphtheria, Tetanus, Pertussis
- Haemophilus influenzae type b
- Hepatitis A
- Hepatitis B
- Human Papillomavirus
- Inactivated Poliovirus
- Influenza
- Measles, Mumps, Rubella
- Meningococcal
- Pneumococcal
- Rotavirus
- Varicella

**Adults:** Immunization vaccines for adults. Doses, recommended ages and recommended populations vary:
- Hepatitis A
- Hepatitis B
- Herpes Zoster
- Human Papillomavirus
- Influenza
- Measles, Mumps, Rubella
- Meningococcal
- Pneumococcal
- Tetanus, Diphtheria, Pertussis
- Varicella

*Products listed may be updated periodically. ‡For a complete listing of product names, contact your account representative.*

This document contains CVS Caremark recommendations to assist clients in making ACA-compliant preventive services coverage decisions.
## Prevention of Falls in Community-Dwelling Older Adults

### Falls Prevention in older adults: Vitamin D

The USTPF recommends vitamin D suppletionation to prevent falls in community-dwelling adults age 65 years and older who are at increased risk for falls.

### CVS Caremark Recommendation

<table>
<thead>
<tr>
<th>Requirement</th>
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<tbody>
<tr>
<td>Age limit ≥ 65 (men and women)</td>
</tr>
<tr>
<td>OTC (requires prescription)</td>
</tr>
<tr>
<td>No prior authorization</td>
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</tbody>
</table>

### GPI Description:

**Single ingredient:** Vitamin D dosing range: 600IU – 800IU  
(available products to meet dose range)

- Ergocalciferol tab 400 unit
- Cholecalciferol cap 400 unit
- Cholecalciferol tab 400 unit
- Cholecalciferol chewable tab 400 unit
- Cholecalciferol oral liquid 1200 unit/ 15 ml
- Cholecalciferol oral liquid 1000 unit/ 10 ml
- Cholecalciferol oral liquid 400 unit/ml
- Cholecalciferol drops 400 unit/0.03 ml (per drop)