



**2024**

Over-the-Counter  
(OTC) Benefit Catalog

A Complimentary  
**BENEFIT**  
Designed for You.

H0927\_BENOTCCAT24



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Mobile App



Order Online:  
[www.myblueil.com/  
mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide)

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# WELCOME

As a member of our health plan, you have an over-the-counter (OTC) benefit allowance to use every quarter.

This OTC benefit allows you to get nonprescription health and wellness products that help you stay healthy at home.

Throughout this catalog, you will learn more about this benefit, what kind of products you can order, and how you can order them.

Thank you for choosing Blue Cross Community MMAI (Medicare-Medicaid Plan)<sup>SM</sup>. We hope you take advantage of this benefit and start using your OTC benefit allowance today!

## **Be sure to use your OTC benefit allowance before it expires.**

First quarter:  
January 1 – March 31, 2024

Second quarter:  
April 1 – June 30, 2024

Third quarter:  
July 1 – September 30, 2024

Fourth quarter:  
October 1 – December 31, 2024

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# OTC BENEFIT OVERVIEW

You have many easy ways to order eligible products.  
Pick the way that best fits your lifestyle.

## Get products delivered to your door.



Order online



Contact us by phone



Mail in an order form



Use the mobile app



- 
- You do not need a prescription to get these eligible OTC products.
  - There are hundreds of health and wellness products that you can choose from within the pages of this catalog.
  - OTC products are intended for your use only to help with a health or medical need. Blue Cross Community MMAI (Medicare-Medicaid Plan) prohibits the use of this benefit to order OTC items for family members and friends.
  - Additional product details and photos are available for you online.
  - Shipping is free when ordering from this catalog; we've got you covered!
  - You must use your full benefit amount in one orders. Unused benefits will not carry over into the next quarter.
  - Your order total may not exceed your benefit amount. Cash, checks, credit cards, or money orders are not accepted under this OTC benefit.
  - Your order total will be applied to the benefit period in which the order is received.
  - Check out our FAQs at the end of the catalog. If you need additional information or have questions about your OTC benefit, call our dedicated Customer Advocates at 1-855-891-5274 (TTY: 711) or chat with them online at [www.myblueil.com/mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide) Monday - Friday from 7 a.m. to 10 p.m. CST.

# PLACE AN ORDER ONLINE

Get access to convenient features and website exclusives when you manage your OTC benefit account online.

- Browse OTC products available to you
- Access a digital copy of your OTC catalog or order one to be sent to you
- Monitor your available balance while you shop
- Track your recent order and view your order history
- Manage your account
- And more!



**Watch how-to video**

If you have already created an account online, just log in to get started!

If it's your first time ordering online, you will need to register and set up your account.

## Set up your online account.

Access [www.myblueil.com/mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide) and indicate that you are a first-time user by clicking on the 'Create Account' button. Enter your information exactly as it appears on your Blue Cross Community MMAI (Medicare-Medicaid Plan) ID card.

You will need the following:

- First and last name
- Health plan member ID number  
(if your ID number contains any special characters, such as a hyphen (-) or an asterisk (\*), enter only the numbers)
- State
- Date of birth

Next, you will create a unique username and password for your account.

Username \_\_\_\_\_

Password \_\_\_\_\_

Then you will choose and answer three security questions for password recovery.

**Now you can log in and access your OTC benefit online, 24/7.**

If you need any help, call us Monday - Friday from 7 a.m. to 10 p.m. CST at 1-855-891-5274 (TTY: 711). We are happy to help you take full advantage of your OTC benefit.

### **Remember!**

You must place your orders for the benefit period before midnight Eastern Time of the last day of the quarter.

# THE OTC-ANYWHERE MOBILE APP

Log in to the OTC-Anywhere mobile app with your smartphone or tablet to place orders, manage your account, and more.

## Have an account online?

Sign in with the same username and password that you set up when you registered for access to your OTC benefit online.

## New to ordering online?

You will need to register and set up your account on the OTC website or the OTC-Anywhere mobile app. Once your account is created, sign in to the OTC-Anywhere mobile app to access your OTC benefit from anywhere.



**OTC-Anywhere  
Mobile App**  
available on



Download the app

There is no charge to download or use this app. Data rates may apply.

## Need help?

Call a Customer Advocate Monday - Friday from 7 a.m. to 10 p.m. CST at 1-855-891-5274 (TTY: 711).



# PLACE AN ORDER BY PHONE

If you would like to place your order over the phone, we have Customer Advocates available to take your call.

1. Browse the catalog before you call.
2. Write down the item names and numbers you want to order.
3. Contact us at 1-855-891-5274 (TTY: 711).
4. OTC benefit advocates will help answer questions you may have and will place your order for you.

We are available by phone Monday - Friday from 7 a.m. to 10 p.m. CST.

Let us know how we can help you take advantage of this OTC health and wellness benefit!



# SEND IN AN ORDER FORM

You may place an order of OTC products by mailing in an order form. You will find an order form attached to this catalog.

1. Browse the catalog for items you want to order.
2. Fill out the entire order form, from beginning to end.
  - a. Contact and account information
  - b. Product items, names, quantities, and prices
3. Mail the order form to:

OTC Servicing Center  
PO Box 526266  
Miami, FL 33152-9819

After you place an order and get your products delivered to your door, there will be a new order form in that box. Follow the steps again to place your next order!

## Order form tip:

If the end of the benefit period is approaching and you do not think we will receive your order form in time, place your order online or contact us instead.

2024 Over-the-Counter (OTC) Product  
**ORDER FORM**

**STEP 1 - COMPLETE YOUR INFORMATION BELOW**

Member ID (Based on your member ID card)  Date of Birth

First Name  Last Name and Suffix  MI

Street Number  Street Name  Apt/Club #

City  State  Zip Code

Daytime Phone  Mobile Phone (Optional)

**STEP 2 - PRODUCT SELECTION**

Item #	Product	Quantity	Unit Price	TOTAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subtotal from Other Sites				<input type="text"/>
Total Order				<input type="text"/>

Please mail this completed form to the following address:  
OTC Servicing Center, PO Box 526266, Miami, FL 33152-9819

(Member ID) (Sheet 02)

# CATALOG ORDER GUIDELINES

- The products in this catalog are subject to change. Items, quantities, sizes, and prices may change depending on availability. For the most up-to-date listing of OTC products available, go to [www.myblueil.com/mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide), or the OTC-Anywhere mobile app.
  - We reserve the right to limit quantities.
  - The products in this catalog and online are personal items. For this reason, we do not allow returns or exchanges. Please call 1-855-891-5274 (TTY: 711) within 60 days of placing your order if:
    - You haven't received your order.
    - You received a defective or damaged item.
  - For delivery, please allow five to seven business days from the time your order is placed.
- 

\* Part B/Part D - Under certain circumstances some items may be covered under either Part B or Part D. When you are eligible to receive these items under Part B or Part D you may not purchase these items through your Part C supplemental OTC benefit. For your convenience, we've marked these items with an (\*).

‡ Dual-purpose items are medicines and products that can be used for either a medical condition or for general health and well-being. In order to purchase these items under your plan, your personal physician must recommend them to you for a specific diagnosed condition. Please speak to your physician before ordering these items.

# ELIGIBLE PRODUCTS

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
<b>ALLERGY</b>				
1927	Benadryl Allergy Liqui-Gels Dye-Free	24 ct	25 mg	\$12.00
2003	Cetirizine HCL (Allergy Tablets)	45 ct	10 mg	\$13.25
1008	Chlorpheniramine Maleate Antihistamine (Allergy Tablets)	100 ct	4 mg	\$8.75
2300	Claritin 24hr Tablet	10 ct	10 mg	\$22.00
1009	Diphenhydramine Antihistamine (Allergy Tablets)	24 ct	25 mg	\$6.50
1308	Diphenhydramine Antihistamine (Allergy Tablets)	100 ct	25 mg	\$13.25
2021	Diphenhydramine Antihistamine (Allergy Tablets)	400 ct	25 mg	\$16.50
1428	Diphenhydramine HCL (Children's Allergy Liquid)	4 oz	12.5 mg / 5 ml	\$7.75
1804	Fexofenadine (Allergy Tablets)	30 ct	180 mg	\$19.25
1946	Fluticasone Propionate (Allergy Nasal Spray, 24-hour)	144 sprays	50 mcg	\$26.25
2033	Loratadine (Allergy Tablets)	10 ct	10 mg	\$7.25
1611	Loratadine (Allergy Tablets)	100 ct	10 mg	\$16.75
1881	Nasacort	60 sprays		\$26.25
1922	Nasal Decongestant Inhaler - Levmetamfetamine	0.007 oz	50 mg	\$8.75
1091	Nasal Decongestant Spray, 12-Hour	1 oz	0.05%	\$7.50
1052	Nasal Spray, Saline	1.5 oz	0.65%	\$7.25
2303	Zyrtec Tablet, Go Packs	14 ct	10 mg	\$29.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
<b>ANTACIDS &amp; ACID REDUCERS</b>				
1313	Alka-Seltzer	36 ct		\$12.00
1006	Antacid / Anti-Gas Liquid	12 oz		\$9.50
1346	Antacid Chewable	150 ct	500 mg	\$9.25
1314	Effervescent Antacid & Pain Relief	36 ct		\$7.75
1949	Esomeprazole Magnesium (Acid Reducer, Delayed Release)*	42 ct	20 mg	\$23.00
1108	Famotidine (Acid Reducer)	30 ct	10 mg	\$10.00
1970	Omeprazole (Acid Reducer, Delayed Release)*	42 ct	20 mg	\$28.50
1966	Omeprazole (Acid Reducer, Delayed Release, Dissolvable)*	42 ct	20 mg	\$27.50
1800	Simethicone (Gas Relief)	100 ct	80 mg	\$8.75
2019	TUMS Ultra Strength	72 ct	1,000 mg	\$11.00
<b>ANTI-CANDIDAL (YEAST)</b>				
2427	AZO Yeast Plus Dual-Relief	60 ct		\$15.00
1115	Clotrimazole (Vaginal Antifungal 7-Day Cream with Applicator)	45 gm	1%	\$11.50
1117	Miconazole (Vaginal Antifungal 3-Day Cream with Applicator)	1 ct	2%	\$19.25
1119	Tioconazole (Vaginal Antifungal 1-Day Cream with Applicator)	1 ct	6.5%	\$20.75
<b>ANTI-DIARRHEAL, LAXATIVES &amp; DIGESTIVE HEALTH</b>				
1316	Beano	30 ct		\$9.75
1128	Bisacodyl (Stimulant Laxative, Enteric Coated)	100 ct	5 mg	\$8.50
1969	ClearLax Unflavored Powder Laxative	8.3 oz	17 g	\$17.00
1126	Docusate Sodium (Stool Softener)	100 ct	100 mg	\$10.50

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1130	Docusate Sodium Plus Sennosides (Natural Vegetable Laxative)	60 ct	8.6 mg / 50 mg	\$9.25
1733	Enema	4.5 oz		\$7.25
1124	Ex-Lax	8 ct	15 mg	\$8.75
1155	Fiber Tablets ‡	60 ct	500 mg	\$13.25
1125	Glycerin Suppository Laxative	25 ct	2 gm	\$7.75
2387	Hydralyte Electrolyte Rapid Rehydration Orange Powder Stick Pouch	20 ct		\$26.25
2200	Imodium Multi-Symptom Relief Caplets*	12 ct	2 mg	\$12.25
1067	Lactase Capsules	60 ct	3,000 FCC Units	\$13.25
1133	Loperamide HCL (Anti-Diarrheal Tablets)*	12 ct	2 mg	\$7.75
1889	Magnesium Citrate (Saline Laxative, Lemon)	10 oz		\$6.75
1011	Milk of Magnesia	12 oz	1,200 mg	\$7.50
2213	Oral Probiotic	50 ct	250 mg	\$27.50
1317	Pepto-Bismol Cherry	12 oz	525 mg / 30 ml	\$12.00
1045	Pink Bismuth Chewable Tablets	30 ct	262 mg	\$7.75
1318	Pink Bismuth Liquid	8 oz	525 mg / 30 ml	\$7.75
<b>ANTI-FUNGAL</b>				
1047	Clotrimazole (Athlete's Foot Cream)	1.5 oz	1%	\$12.50
1135	Miconazole Nitrate (Anti-fungal Cream)	1 oz	2%	\$9.75
1874	Miconazole Nitrate (Athlete's Foot Spray)	4.6 oz	2%	\$11.50
2305	Nail Restore Fungal Formula	0.34 oz		\$22.75
1046	Terbinafine HCL (Athlete's Foot Cream)	0.5 oz	1%	\$12.50
1064	Tolnaftate (Anti-fungal Cream)	1.25 oz	1%	\$9.25

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
<b>BATHROOM SAFETY &amp; FALL PREVENTION</b>				
2306	Antimicrobial Suction Cup Grab Bar, Chrome, 12"	1 ct		\$20.75
2307	Antimicrobial Suction Cup Grab Bar, Chrome, 16"	1 ct		\$23.75
1459	Bath Mat, Non-Skid	1 ct		\$18.50
2310	Bath Seat Cushion	1 ct		\$27.25
2045	Commode Liner	7 ct		\$19.75
1726	Folding Cane Ergonomic Handle*	1 ct		\$25.25
1790	Gait Belt - 60"	1 ct		\$17.50
1791	Gait Belt - 72"	1 ct		\$22.25
2007	Handheld Shower Head	1 ct		\$27.50
1798	Knurled Chrome Grab Bar - 12"	1 ct		\$23.75
1797	Knurled Chrome Grab Bar - 24"	1 ct		\$24.75
1983	Nightlight	2 ct		\$16.50
1777	Quad Cane, Small Base*	1 ct		\$27.75
1780	Safety Treads, Tub & Stair	1 ct		\$11.00
1460	Shower Mat, Non-Skid	1 ct		\$19.25
2308	Toilet Seat Cushion Vinyl	1 ct		\$19.00
2008	Treaded Slipper Socks, One Size Fits Most	1 pair		\$9.25
<b>COLD &amp; FLU</b>				
1360	Cepacol Sore Throat Lozenges	16 ct	7.5%, 5 mg	\$8.75
1166	Cough & Cold for High Blood Pressure	16 ct	4mg / 30mg	\$9.00
1056	Cough Drops, Cherry	30 ct	5.8 mg	\$3.25
1833	Cough Drops, Honey Lemon	30 ct	7.5 mg	\$3.25
1834	Cough Drops, Menthol	30 ct	5.4 mg	\$3.25

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1054	Cough Syrup, Expectorant	4 oz	200 mg / 10 ml	\$7.75
1323	Diabetic Tussin DM	4 oz	20 mg / 200 mg	\$11.25
1180	Guaifenesin (Cough Expectorant)	100 ct	200 mg	\$11.00
2063	Mucinex	20 ct	600 mg	\$19.75
1178	Mucus Relief DM Expectorant & Cough Suppressant (Guaifenesin 400 mg / Dextromethorphan HBr 20 mg)	30 ct	400 mg / 20 mg	\$11.00
1965	Mucus Relief DM Expectorant & Cough Suppressant, Extended Release	14 ct	1,200 mg / 60 mg	\$16.50
1357	Multi-Symptom Cold Formula	24 ct	10 mg / 5 mg / 325 mg	\$10.50
1931	Nasal Rinse Kit, Saline	50 ct		\$19.75
1352	Phenylephrine HCL (Nasal Decongestant PE)	36 ct	10 mg	\$9.00
1176	Sore Throat Lozenges, Cherry	18 ct		\$6.50
1904	Sore Throat Spray, Cherry	6 oz	1.4%	\$7.75
2061	Tylenol Cold & Flu	24 ct		\$13.25
1164	Vapor Rub	4.0 oz	4.8% / 1.2%	\$9.25
<b>COLD SORE &amp; MEDICATED LIP PRODUCTS</b>				
1152	Abreva	2 gm	10%	\$26.25
1256	Blistex Lip Ointment	6 gm		\$5.50
1255	Carmex	7.5 gm		\$4.50
1153	Herpecin-L Lip Balm	0.1 oz	1%	\$9.75
1359	Releev Cold Sore Treatment	6 ml	0.13%	\$24.75
<b>DENTAL &amp; DENTURE CARE</b>				
1077	Antiseptic Mouthwash	16 oz		\$7.25
2312	Antiseptic Rinse	250 ml		\$6.00
1817	Biotene Dry Mouth Oral Rinse	16 oz		\$14.25



ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1818	Dry Mouth Spray	1.5 oz		\$12.50
1749	Dental Travel Kit	1 ct		\$13.25
1747	Denture Brush	1 ct		\$6.50
1032	Denture Cleaning Tablets	40 ct		\$7.75
1653	Efferdent Plus Mint Tablets	44 ct		\$9.75
1843	Effergrip Denture Cream Adhesive	2.5 oz		\$9.75
1745	Fingertip Tooth & Gum Massager	1 ct		\$9.75
1187	Fixodent	0.75 oz		\$5.50
1751	Interdental Flossups	90 ct		\$6.00
1748	Interdental Gum Brushes	10 ct		\$7.00
2313	Listerine Anticavity Fluoride Mouthwash	1 L		\$12.25
2311	Listerine Original	1 L		\$10.25
1454	Orajel Pain Relief	0.25 oz	20%	\$12.00
1750	Oral Care System Kit	1 ct		\$14.50
1286	Oral Pain Relief	0.5 oz	20%	\$9.00
1324	Polident Denture Cream	3.9 oz		\$9.75
1892	Polident Overnight	84 ct		\$13.25
1901	Reach Waxed Dental Floss - Cinnamon	55 yd		\$4.50
1455	Reach Waxed Dental Floss - Mint	55 yd		\$4.50
1902	Reach Waxed Dental Floss - Unflavored	55 yd		\$4.50
2038	Sea-Bond Denture Adhesive Wafers, Lower	15 ct		\$8.75
2039	Sea-Bond Denture Adhesive Wafers, Upper	15 ct		\$8.75
1746	Tongue Cleaner	1 ct		\$6.50
2015	Toothbrush, Battery Powered	1 ct		\$22.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1830	Toothbrush, Colgate, Adult Medium	1 ct		\$3.50
1413	Toothbrush, Colgate, Adult Soft	1 ct		\$4.00
1948	Toothbrush, Soft 2-pack	2 ct		\$7.75
1412	Toothbrush, Tek Pro, Angled Soft	1 ct		\$4.00
1831	Toothpaste, Colgate	4 oz		\$6.50
1838	Toothpaste, Crest Sensi-Relief	4.1 oz		\$9.75
1914	Toothpaste, Fluoride	6.4 oz		\$6.75
1414	Toothpaste, Pepsodent	5.5 oz		\$5.50
1903	Toothpaste, Sensitive Teeth	4.3 oz		\$6.50
1716	Toothpaste, Ultrabrite Advanced Whitening	6 oz		\$6.50
1743	Water Jet Replacement Tips	5 ct		\$18.50
<b>DIABETES CARE</b>				
2431	Cinnamon Supplement	60 ct	500mg	\$20.00
1839	Diabetic Skin Relief Foot Cream	3.4 oz		\$15.25
1956	Diabetic Socks, Black, Medium 3-pack	3 pairs		\$11.75
1957	Diabetic Socks, Black, Large 3-pack	3 pairs		\$11.75
1958	Diabetic Socks, Black, X-Large 3-pack	3 pairs		\$11.75
1953	Diabetic Socks, White, Medium 3-pack	3 pairs		\$11.75
1954	Diabetic Socks, White, Large 3-pack	3 pairs		\$11.75
1955	Diabetic Socks, White, X-Large 3-pack	3 pairs		\$11.75
2315	Glucose Gummies Mixed Fruit Flavor	60 ct		\$10.00
1997	Glucose Tablets	50 ct		\$8.75
1959	Ultra Soft Padded Diabetic Sock, Black, Medium 2-pack	2 pairs		\$12.00
1960	Ultra Soft Padded Diabetic Sock, Black, Large 2-pack	2 pairs		\$12.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1961	Ultra Soft Padded Diabetic Sock, Black, X-Large 2-pack	2 pairs		\$12.00
1962	Ultra Soft Padded Diabetic Sock, White, Medium 2-pack	2 pairs		\$12.00
1963	Ultra Soft Padded Diabetic Sock, White, Large 2-pack	2 pairs		\$12.00
1964	Ultra Soft Padded Diabetic Sock, White, X-Large 2-pack	2 pairs		\$12.00
2320	Zero Sugar Biotin ‡	60 ct	5000 mcg	\$14.75
2316	Zero Sugar Diabetic Multivitamin ‡	60 ct		\$16.00
2317	Zero Sugar Probiotic	60 ct		\$16.75
2318	Zero Sugar Vitamin C ‡	60 ct		\$14.00
2319	Zero Sugar Vitamin D ‡	60 ct	125 mcg	\$14.00
<b>DIAGNOSTICS</b>				
2163	Covid-19 At Home Test Kit‡	2 ct		\$28.00
1504	Desktop Blood Pressure Monitor Replacement Cuff ‡	1 ct		\$19.75
1416	EZ Detect Colon Cancer Test Kit ‡	1 ct		\$18.50
2424	Non-Contact IR Forehead Thermometer	1 ct		\$14.00
1789	Peak Flow Meter ‡	1 ct		\$21.25
1752	Thermometer Probe Covers	30 ct		\$4.50
1063	Thermometer, Digital 60 Seconds	1 ct		\$10.50
1697	Thermometer, Flexible Tip, Digital 9 Seconds	1 ct		\$14.25
<b>EYE &amp; EAR CARE</b>				
1192	Artificial Tears Drops	0.5 oz		\$6.75
1194	Artificial Tears Ointment	3.5 gm		\$13.25
1196	Bausch + Lomb Eye Wash Solution	4 oz		\$9.25

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1199	Clear Eyes Eye Drops	0.2 oz		\$6.50
1742	Cotton Tipped Swabs	300 ct		\$6.00
1841	Ear Pain Relief Ear Drops	10 ml		\$14.25
1190	Ear Wax Removal Drops	15 ml	6.5%	\$7.75
1363	Ear Wax Removal System with Rubber Bulb	15 ml	6.5%	\$9.75
1516	Eye Patch	1 ct		\$9.75
1806	Irritation Relief Eye Drops	15 ml		\$11.00
2325	Lubricant Eye Gel	10 ml	0.4% / 0.3%	\$25.50
1468	Multi-Purpose Contact Lens Solution	12 oz		\$10.50
1807	Pataday Daily Release (Olopatidine)	5 ml	0.1%	\$22.00
1061	Redness Relief Eye Drops	15 ml	0.05%	\$5.50
2326	Sterile Ultra Lubricant Eye Drops	0.5 oz		\$11.00
1905	Stye Eye Compress	1 ct		\$12.00
1906	Stye Eye Ointment	3.5 gm		\$12.50
1910	Swim-Ear Ear Drops	1 oz		\$8.25
<b>FEMININE CARE</b>				
2437	Estroven Complete Menopause Relief	28 ct		\$20.00
2442	Menstrual Pads Size 1	30 ct		\$18.00
2443	Menstrual Pads Size 2	26 ct		\$18.00
2444	Menstrual Pads Size 3	30 ct		\$18.00
2445	Menstrual Pads Size 4	28 ct		\$18.00
2446	Menstrual Pads Size 5	26 ct		\$18.00
2438	Tampons Light	30 ct		\$18.00
2439	Tampons Regular	30 ct		\$18.00
2440	Tampons Super	30 ct		\$18.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
2441	Tampons Super Plus	30 ct		\$18.00
<b>FIRST AID</b>				
1344	Adhesive Bandages	100 ct		\$6.50
1803	After Bite Relief	0.5 oz		\$11.00
1200	Alcohol Pads*	100 ct	70%	\$5.50
2004	Alcohol Pads*	200 ct	70%	\$6.25
1808	Antiseptic Skin Cleanser	8 oz		\$13.25
1201	Antiseptic Towelettes	100 ct		\$10.00
1020	Bacitracin Ointment	1 oz	500 u / gm	\$8.50
1142	Bactine Solution	4 oz		\$11.50
2054	Band-Aid Comfort-Flex Plastic	60 ct		\$9.25
1676	Band-Aid Johnson & Johnson Gauze Pad - 2" x 2"	25 ct		\$7.75
2060	Benadryl Extra Strength Itch Stopping Cream	1 oz		\$9.75
1926	Burn Relief Spray	4.5 oz	0.5%	\$12.00
1144	Caldyphen Clear (Anti-Itch Lotion)	6 oz	1%	\$8.75
2042	Cast, Bandage and Wound Protector, Arm	2 ct		\$27.50
2043	Cast, Bandage and Wound Protector, Leg	2 ct		\$26.75
1223	Conforming Stretch Gauze Sterile Bandages - 3" x 4.1 yd	12 ct		\$9.75
1763	Cotton Balls	300 ct		\$5.00
1669	Cotton Tipped Applicator - 6"	1000 ct		\$12.50
1140	Diphenhydramine HCL / Zinc Acetate (Anti-Itch Cream)	1 oz		\$6.50
1207	Elastic Bandage - 2" x 4.5 yd	1 ct		\$7.75

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1213	Elastic Bandage - 6" x 5 yd	1 ct		\$7.00
1947	First Aid Kit, 20 Pieces	1 ct		\$7.75
1215	First Aid Kit, 76 Pieces	1 ct		\$13.25
1738	First Aid Kit, 175 Pieces	1 ct		\$19.00
2055	Gold Bond Medicated Body Powder	10 oz		\$12.00
1062	Hot/Cold Pack, 1 Small & 1 Large	2 ct		\$11.75
1074	Hydrocortisone 1% Cream	1 oz	1%	\$6.50
1228	Hydrogen Peroxide	16 oz	3%	\$6.25
1867	Insect Repellent Spray - DEET	2 oz	30%	\$9.25
1796	Insect Repellent Spray - DEET	4 oz	30%	\$13.25
1868	Insect Repellent Spray - DEET	8 oz	30%	\$18.00
1203	Iodine Solution Antiseptic	4 oz	10%	\$10.00
1713	Isopropyl Alcohol	16 oz	70%	\$6.50
1229	Isopropyl Alcohol, Wintergreen	16 oz	70%	\$6.50
1872	Liquid Bandage	0.61 oz		\$9.75
1326	Neosporin + Pain Relief	0.5 oz		\$11.00
1667	Nexcare clear waterproof bandages assorted sizes	50 ct		\$9.25
2204	Nexcare DUO Bandages Assorted	40 ct		\$11.00
2328	Nitrile Gloves (Small)	100 ct		\$23.00
1840	Nitrile Gloves (Large)	100 ct		\$23.00
2329	Nitrile Gloves (X-Large)	100 ct		\$23.00
2018	Petroleum Jelly	4 oz		\$7.75
1896	Procedural Face Masks with Earloops	50 ct		\$23.75
1217	Tape, Paper Surgical - 1" x 10 yd	1 ct		\$6.75
1219	Tape, Silk Surgical - 1" x 10 yd	1 ct		\$7.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1221	Tape, Transparent Surgical - 1" x 10 yd	1 ct		\$6.00
1819	Tegaderm Transparent Dressing	8 ct		\$11.50
1014	Triple Antibiotic Ointment	1 oz		\$10.00
2057	Vaseline Petroleum Jelly	13 oz		\$8.75
2333	Vinyl Gloves (Small)	100 ct		\$17.50
2230	Vinyl Gloves (Large)	100 ct		\$17.50
2334	Vinyl Gloves (X-Large)	100 ct		\$17.50
<b>FOOT CARE</b>				
1784	Bunion Guard	1 ct		\$9.75
1238	Callus Remover Pads	6 ct		\$8.75
1236	Corn Remover Pads	9 ct		\$8.25
2335	Deodorant Foot Powder	6 oz		\$9.00
2388	Dr. Scholl's Float-On-Air Insole Men's	1 pair		\$20.75
2389	Dr. Scholl's Float-On-Air Insole Women's	1 pair		\$20.75
1785	Hammer Toe Crest	1 ct		\$12.00
2391	Kerasal Fungal Nail Renewal	0.33 oz		\$24.00
2390	Kerasal Intensive Foot Repair Ointment	0.33 oz		\$19.75
1786	Lamb's Wool Padding	1 ct		\$7.75
1240	Medicated Foot Powder	5 oz		\$10.00
1782	Moleskin Sheets Plus	4 ct		\$7.75
1788	Toe Protector, Small	1 ct		\$9.75
1787	Toe Protector, Large	1 ct		\$9.75
1783	Toe Separator	6 ct		\$8.75
<b>HEMORRHOIDAL PREPARATIONS</b>				
1066	Hemorrhoidal Ointment	2 oz		\$11.25

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1247	Hemorrhoidal Suppository	12 ct		\$9.00
1364	Pre-moist Hemorrhoid Pads	100 ct		\$9.75
1248	Preparation H Cream	26 gm		\$13.25
1895	Preparation H Medicated Wipes	48 ct		\$12.00
1098	Tucks Medicated Cooling Pads by Blistex	100 ct		\$15.00
<b>HOME AIDS</b>				
2336	Aluminum Reacher with Magnetic Tip Non-Folding 32"	1 ct		\$10.50
2046	Button and Zipper Pull Aid	1 ct		\$18.25
2241	Cane Ice Grip Attachment	1 ct		\$11.50
2037	CPAP Mask Wipes	72 ct		\$13.75
1732	Cushion, Foam Ring	1 ct		\$24.00
1731	Cushion, Lumbar	1 ct		\$26.25
1515	Denture Case	1 ct		\$4.00
1753	Elastic Mattress Cover - 80" x 36" x 6"	1 ct		\$10.00
2409	Elastic Mattress Cover - Full	1 ct		\$20.00
2410	Elastic Mattress Cover - Queen	1 ct		\$25.00
2411	Elastic Mattress Cover - King	1 ct		\$30.00
2346	Exercise Resistance Bands	5 ct		\$6.25
2417	Fabric Exercise Resistance Bands	3 ct		\$20.00
2130	Generic: Reading Glass Diopter +1.0	1 ct	1.0 diopter	\$14.50
2133	Generic: Reading Glass Diopter +1.25	1 ct	1.25 diopter	\$14.50
2136	Generic: Reading Glass Diopter +1.5	1 ct	1.50 diopter	\$14.50
2139	Generic: Reading Glass Diopter +1.75	1 ct	1.75 diopter	\$14.50
2142	Generic: Reading Glass Diopter +2.0	1 ct	2.00 diopter	\$14.50



ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
2145	Generic: Reading Glass Diopter +2.25	1 ct	2.25 diopter	\$14.50
2148	Generic: Reading Glass Diopter +2.75	1 ct	2.75 diopter	\$14.50
2151	Generic: Reading Glass Diopter +3.0	1 ct	3.00 diopter	\$14.50
2154	Generic: Reading Glass Diopter +3.25	1 ct	3.25 diopter	\$14.50
2157	Generic: Reading Glass Diopter +3.5	1 ct	3.50 diopter	\$14.50
2160	Generic: Reading Glass Diopter +4.0	1 ct	4.00 diopter	\$14.50
2347	Hand Exercise Strengtheners	1 pair		\$9.00
1431	Hearing Aid Batteries (Size 10)	8 ct		\$10.50
1430	Hearing Aid Batteries (Size 13)	8 ct		\$10.50
1429	Hearing Aid Batteries (Size 312)	8 ct		\$10.50
2343	Jar Opener for Seniors	3 ct		\$8.75
1756	Kitchen Scale, Dial ‡	1 ct		\$10.00
2016	Kitchen Scale, Digital ‡	1 ct		\$27.50
2413	LED Magnifier	1 ct		\$10.00
2418	Leg Lifter	1 ct		\$10.00
2214	Measuring Cup Scale ‡	1 ct		\$29.50
1875	Medical ID Bracelet - Blank	1 ct		\$19.25
1877	Medical ID Bracelet - Diabetic	1 ct		\$22.25
1876	Medical ID Bracelet - Heart	1 ct		\$22.25
2017	Medicine Bottle Opener with Magnifier	1 ct		\$11.00
1512	Night Guard (Boil and Bite Mouth Guard)	1 ct		\$27.50
2416	Overdoor Neck Traction Set	1 ct		\$15.00
2415	Overdoor Shoulder Pulley Set	1 ct		\$25.00
1933	Pill Crusher with Storage	1 ct		\$11.00
1932	Pill Cutter with Safety Shield	1 ct		\$11.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1514	Probing Cane- White	1 ct		\$23.00
2337	Reacher Suction Cup 22"	1 ct		\$15.00
2338	Reacher Suction Cup 33"	1 ct		\$15.25
1799	Sharps Container, 1 Gallon	1 ct		\$9.50
2339	Shoe Horn No Bend 24"	1 ct		\$12.00
2344	Stress Balls	3 ct		\$8.00
2350	Tray Walker Fold Away	1 ct		\$19.25
1934	Weekly AM/PM Pill Case	1 ct		\$12.00
2419	White Noise Machine	1 ct		\$25.00
2348	Wrist and Ankle Weights	1 ct		\$27.50
<b>INCONTINENCE SUPPLIES</b>				
1300	A & D Ointment	2 oz		\$7.75
1510	Adult Briefs, Small - 25" to 34" (Tabs)	24 ct		\$18.50
2026	Adult Briefs, Medium - 32" to 44" (Tabs)	24 ct		\$18.50
2027	Adult Briefs, Large - 44" to 58" (Tabs)	24 ct		\$23.75
2028	Adult Briefs, X-Large - 58" to 63" (Tabs)	20 ct		\$19.75
2219	Attends Bariatric 2X-Large Underwear	12 ct		\$27.50
1811	Attends Discreet Men's Guard	20 ct		\$15.25
1810	Attends Discreet Men's Shield	20 ct		\$15.15
1812	Attends Discreet Women's Maximum Bladder Control Pad	20 ct		\$22.00
1815	Attends Discreet Women's Panty Liner	28 ct		\$10.25
1814	Attends Discreet Women's Ultimate Bladder Control Pad	20 ct		\$25.25
1302	Barrier Cream	4 oz		\$9.75
2010	Bathing Wipes	8 ct		\$8.75

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
2048	Bedpan	1 ct		\$8.00
1479	Bladder Control Shaped Pad, Heavy Absorbency	20 ct		\$19.50
1480	Bladder Control Shaped Pad, Maximum Absorbency	20 ct		\$19.50
2381	Discreet Men's Underwear, Small/Medium	20 ct		\$25.75
2382	Discreet Men's Underwear, Large/X-Large	18 ct		\$25.75
2383	Discreet Women's Underwear, Medium	20 ct		\$25.75
2385	Discreet Women's Underwear, Large	18 ct		\$25.75
2384	Discreet Women's Underwear, X-Large	16 ct		\$25.75
1021	Disposable Underwear, Medium - 34" to 44" (Pull-up)	20 ct		\$17.50
1026	Disposable Underwear, Large - 44" to 58" (Pull-up)	18 ct		\$17.50
1027	Disposable Underwear, X-Large - 58" to 68" (Pull-up)	14 ct		\$17.50
1928	Flushable Wipes	24 ct		\$8.75
2000	Flushable Wipes	60 ct		\$13.25
1202	Lantiseptic Skin Protectant Ointment	4 oz	50%	\$13.25
2049	Male Urinal	1 ct		\$7.50
1884	No-Rinse Body Wash	8 oz		\$13.25
1508	Oxytrol	4 ct	3.9mg / day	\$25.25
2022	Perineal Wash Rinse-Free	8 oz		\$9.25
1477	Underpad, Disposable - 30" x 30"	10 ct		\$12.25
1996	Underpad, Extra Absorbent Air Permeable, 30" x 36"	5 ct		\$19.75
1348	Washcloth with Lanolin	64 ct		\$11.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
<b>MOTION SICKNESS</b>				
1264	Bonine Adult 8's	8 ct	25 mg	\$8.75
1263	Dimenhydrinate (Motion Sickness Tablets)	12 ct	50 mg	\$7.75
1366	Meclizine HCL (Motion Sickness Caplets)	100 ct	12.5 mg	\$9.75
<b>NUTRITIONAL SUPPLEMENTS</b>				
2114	Bountiful Beets Extract	10.6 oz		\$19.75
2116	Country Farms Apple Cider Vinegar Gummy	60 ct		\$15.25
2115	Country Farms Super Shake (Chocolate)	12.4 oz		\$23.75
2104	Glucerna: Chocolate Shake 8oz each	6 ct		\$20.75
2105	Glucerna: Vanilla Shake 8oz each	6 ct		\$20.75
2108	Keto Meal Shake - Chocolate	16 oz		\$27.75
2107	Keto Meal Shake - Vanilla	20 oz		\$29.00
<b>PAIN RELIEF AIDS</b>				
2425	Absorbine Roll-on Pain Reliever	2.5 oz	4% / 1.5%	\$20.00
1809	Arthritis Hot Pain Relief Cream	3 oz	10%	\$7.75
2229	Arthritis Pain Relieving Gel	3.5 oz	1%	\$18.50
1924	Aspercreme	1.25 oz		\$9.00
1944	Cold/Hot Menthol Medicated Patch	5 ct	5%	\$11.00
2355	Diclofenac Sodium Topical Gel	3.5 oz	1%	\$15.75
1980	Eagle Brand Medicated Oil	36 ml	14.5% / 30%	\$12.50
1845	Epsom Salt	4 lb		\$10.25
1846	Fast Freeze Pain Relief Spray	4 oz		\$14.75
1861	Heating Pad, 12" x 15"*	1 ct		\$28.50
1859	HeatWraps - Back & Hip	2 ct		\$12.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1860	HeatWraps - Neck, Shoulder, & Wrist	3 ct		\$13.25
1761	Ice Bag - 9"	1 ct		\$12.75
1871	Lidocaine Patch	5 ct	4%	\$14.25
1923	Menthol Gel	8 oz	2%	\$11.75
1762	Pain Relief Mask	1 ct		\$11.75
1475	Pain Relieving Muscle Rub	2 oz	2.5%	\$7.75
2386	Salonpas Lidocaine Gel Patch	6 ct		\$17.50
1739	Salonpas Pain Relief Patches	6 ct		\$15.25
1912	Thermacare Lower Back & Hip	3 ct		\$16.50
1913	Thermacare Menstrual Relief	4 ct		\$16.50
2374	Tiger Balm	1 ct		\$9.00
1979	Tiger Balm Ultra Strength Ointment	0.63 oz	11%	\$11.00
1266	Voltaren Topical Gel	3.5 oz	0.01	\$27.50
1781	Warm or Cold Water Bottle, Rubber Latex	1 ct		\$13.25
<b>PAIN RELIEVERS &amp; FEVER REDUCERS</b>				
1423	Acetaminophen (Children's Pain Relief Chewable)	30 ct	80 mg	\$7.00
1105	Acetaminophen (Pain Reliever, Extra Strength)	50 ct	500 mg	\$7.00
2002	Acetaminophen (Pain Reliever, Extra Strength)	500 ct	500 mg	\$16.50
1001	Acetaminophen (Pain Reliever, Regular Strength)	100 ct	325 mg	\$8.00
2050	Advil	100 ct	200 mg	\$16.50
1104	Aleve	90 ct	220 mg	\$16.50
1311	Arthritis Pain Reliever	100 ct	650 mg	\$14.00
1095	Aspirin	100 ct	325 mg	\$7.25

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1096	Aspirin, Enteric Coated	100 ct	325 mg	\$7.50
1002	Aspirin, Enteric Coated, Low Dose	120 ct	81 mg	\$7.75
1998	Aspirin, Enteric Coated, Low Dose	500 ct	81 mg	\$13.25
1802	Aspirin, Low Dose, Chewable	36 ct	81 mg	\$7.25
2426	AZO Urinary Pain Relief	24 ct	99.5 mg	\$15.00
1720	Bayer Back & Body Pain, Extra Strength	24 ct	500 mg / 32.5 mg	\$8.25
1367	Capsaicin (Pain Relief Cream)	2.1 oz	0.025%	\$12.50
2052	Excedrin Migraine	100 ct	250 mg / 250 mg / 65 mg	\$18.50
1004	Ibuprofen (Pain Reliever / Fever Reducer)	100 ct	200 mg	\$10.50
2001	Ibuprofen (Pain Reliever / Fever Reducer)	500 ct	200 mg	\$17.50
1041	Naproxen Sodium (Pain Reliever / Fever Reducer)	50 ct	220 mg	\$8.50
1097	Naproxen Sodium (Pain Reliever / Fever Reducer)	100 ct	220 mg	\$11.75
1365	Pain Reliever Plus (Acetaminophen 250mg / Aspirin 250 mg / Caffeine 65 mg)	100 ct	250 mg / 250 mg / 65 mg	\$10.00
1332	Pain Reliever, PM (Acetaminophen, Extra Strength / Diphenhydramine 25 mg)	100 ct	500 mg / 25 mg	\$11.75
2058	Tylenol Extra Strength	100 ct	500 mg	\$16.50
2051	Tylenol Regular Strength	100 ct	325 mg	\$13.75
2036	Urinary Pain Relief Tablets	40 ct	162 mg	\$14.50
<b>PEDICULICIDE (LICE TREATMENT)</b>				
1269	Lice Treatment Rinse (Permethrin)	59 ml	1%	\$21.00
1271	Lice Treatment Shampoo	4 oz		\$14.50

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
<b>SKIN &amp; SUN CARE</b>				
1076	Acne Gel 10% Benzoyl Peroxide	1.5 oz	10%	\$9.25
1070	Aloe Vera Cream	8 oz		\$7.25
1368	Ammonium Lactate Moisturizing Lotion	8 oz	12%	\$14.50
2436	Antibacterial Soap	7.5 oz		\$13.00
2225	Aquaphor Healing Ointment	2.8 oz		\$14.25
2356	Aveeno Daily Moisturizing Body Wash	18 oz		\$24.25
1821	Calamine Skin Protectant Lotion	6 oz		\$9.00
2433	Foot Cream	8 oz		\$9.00
2432	Hand Cream	2 oz		\$8.00
1065	Hand Sanitizer	8 oz		\$7.00
1893	Moisturizing Body Lotion with Aloe	8 oz		\$8.75
2056	Oxy Daily Cleansing Pads Maximum	90 ct		\$10.75
1852	Scar Gel	0.7 oz		\$19.75
2359	Stridex Medicated Pads Sensitive	90 ct		\$7.25
1908	Sunscreen Lotion SPF 30	1.5 oz		\$5.50
1284	Sunscreen Lotion SPF 30	4 oz		\$10.00
2434	Sunscreen Lotion SPF 50	7 oz		\$10.00
2435	Sunscreen Spray SPF 50	5.5 oz		\$12.00
<b>SLEEP AIDS</b>				
2363	Melatonin Quick Dissolve Tablet	90 ct	10 mg	\$9.50
2224	MidNite Sleep Aid	30 ct		\$14.25
1724	Nasal Strips, Medium	30 ct		\$14.25
1725	Nasal Strips, Large	30 ct		\$14.25
2360	Natures Bounty Melatonin Capsule	60 ct	10 mg	\$17.75

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
2361	Natures Bounty Melatonin Softgel	90 ct	5 mg	\$12.50
2362	Sleep Aid	16 ct	25 mg	\$8.50
1276	Sleep Tablets	50 ct	25 mg	\$8.25
<b>SUPPORTS &amp; BRACES</b>				
1225	Ankle Support	2 ct		\$12.00
2041	Arm Sling	1 ct		\$15.25
1767	Arthritis Gloves, Small	1 pair		\$29.50
1766	Arthritis Gloves, Medium	1 pair		\$29.50
1765	Arthritis Gloves, Large	1 pair		\$29.50
2011	Arthritis Knee Sleeve, Small	1 ct		\$27.50
2012	Arthritis Knee Sleeve, Medium	1 ct		\$27.50
2013	Arthritis Knee Sleeve, Large	1 ct		\$27.50
2014	Arthritis Knee Sleeve, X-Large	1 ct		\$27.50
1487	Back Support Elastic - 24" to 46"	1 ct		\$25.25
1488	Back Support Elastic with Lumbar	1 ct		\$29.50
2420	Calf Compression Sleeves, Small	1 pair		\$15.00
2421	Calf Compression Sleeves, Medium	1 pair		\$15.00
2422	Calf Compression Sleeves, Large	1 pair		\$15.00
2423	Calf Compression Sleeves, X-Large	1 pair		\$15.00
1241	Cervical Collar	1 ct		\$9.25
1398	Compression Knee High Socks, Men's Black, Medium (Shoe Size 8 - 10) ‡	1 pair	15 - 20 mmHg	\$19.75
1399	Compression Knee High Socks, Men's Black, Large (Shoe Size 10.5 - 12) ‡	1 pair	15 - 20 mmHg	\$19.75
1400	Compression Knee High Socks, Men's White, Medium (Shoe Size 8 - 10) ‡	1 pair	15 - 20 mmHg	\$19.75



ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1401	Compression Knee High Socks, Men's White, Large (Shoe Size 10.5 - 12) ‡	1 pair	15 - 20 mmHg	\$19.75
1406	Compression Knee High Socks, Women's Beige, Small (Shoe Size 4 - 5)	1 pair	8 - 15 mmHg	\$20.75
1407	Compression Knee High Socks, Women's Beige, Medium (Shoe Size 5.5 - 7.5)	1 pair	8 - 15 mmHg	\$20.75
1408	Compression Knee High Socks, Women's Beige, Large (Shoe Size 8 - 10.5)	1 pair	8 - 15 mmHg	\$20.75
1409	Compression Knee High Socks, Women's Black, Small (Shoe Size 4 - 5)	1 pair	8 - 15 mmHg	\$19.75
1410	Compression Knee High Socks, Women's Black, Medium (Shoe Size 5.5 - 7.5)	1 pair	8 - 15 mmHg	\$19.75
1411	Compression Knee High Socks, Women's Black, Large (Shoe Size 8 - 10.5)	1 pair	8 - 15 mmHg	\$19.75
1760	Deluxe Criss Cross Back Support, Small - 28" to 32"	1 ct		\$27.50
1759	Deluxe Criss Cross Back Support, Medium - 33" to 37"	1 ct		\$27.50
1758	Deluxe Criss Cross Back Support, Large - 38" to 42"	1 ct		\$27.50
1224	Elbow Support	1 ct		\$17.25
1774	Heel & Elbow Protector, Small	1 ct		\$13.25
1773	Heel & Elbow Protector, Medium	1 ct		\$13.25
1772	Heel & Elbow Protector, Large	1 ct		\$13.25
1775	Heel & Elbow Protector, X-Large	1 ct		\$13.25
1465	Knee Stabilizer	1 ct		\$25.25
1481	Knee Support, Elastic, Small	1 ct		\$12.00
1482	Knee Support, Elastic, Medium	1 ct		\$12.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1483	Knee Support, Elastic, Large	1 ct		\$12.00
1484	Knee Support, Elastic, Small with Stays	1 ct		\$20.75
1485	Knee Support, Elastic, Medium with Stays	1 ct		\$20.75
1486	Knee Support, Elastic, Large with Stays	1 ct		\$20.75
1897	Protective Arm Sleeve, Small	1 pair		\$23.00
1898	Protective Arm Sleeve, Large	1 pair		\$27.75
1457	Rib Belt, Female (one size fits most)	1 ct		\$20.75
1456	Rib Belt, Male (one size fits most)	1 ct		\$20.75
2040	Tennis Elbow Support	1 ct		\$14.25
1778	Thumb Brace	1 ct		\$19.75
1918	Wrist Compression, Small	1 ct		\$16.00
1919	Wrist Compression, Medium	1 ct		\$16.00
1920	Wrist Compression, Large	1 ct		\$16.00
1921	Wrist Compression, X-Large	1 ct		\$16.00
1230	Wrist Splint	1 ct		\$23.00
1227	Wrist Support	1 ct		\$13.25
<b>VITAMINS &amp; MINERALS</b>				
1805	Airborne Immune Support Chewable ‡	32 ct		\$17.50
2233	Beet Root and Cherry Extract Gummy ‡	60 ct		\$10.25
2035	Beta Carotene ‡	100 ct	25,000 IU	\$11.00
1820	Biotin Gummy ‡	60 ct	2,500 mcg	\$17.00
1373	Calcium + Vitamin D3 ‡	60 ct	600 mg / 400 IU	\$9.00
1823	Calcium + Vitamin D3 Gummy ‡	60 ct	250 mg / 500 IU	\$14.25
1291	Calcium ‡	60 ct	600 mg	\$9.25
1945	Calcium Chew, Chocolate ‡	60 ct	500 mg / 1,000 IU	\$13.25

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1420	Centrum Chewable Adult 50+ ‡	60 ct		\$19.75
1825	Chromium Picolinate ‡	100 ct	200 mcg	\$14.25
1827	Cod Liver Oil ‡	110 ct		\$10.00
1828	Coenzyme Q-10 ‡	30 ct	100 mg	\$17.50
1393	Daily Multivitamin ‡	100 ct		\$10.50
1972	Daily Multivitamin Gummy ‡	120 ct		\$14.25
1385	Daily Multivitamin with Minerals ‡	100 ct		\$11.00
1737	DHEA Hormonal Supplement ‡	50 ct	50 mg	\$13.25
1204	Digestive Advantage- Probiotic‡	30 ct		\$20.75
1417	Ferrous Gluconate (Iron Supplement) ‡	110 ct	27 mg	\$8.75
1376	Ferrous Sulfate (Iron Supplement) ‡	100 ct	325 mg	\$9.50
1741	Fish Oil, Soft Gels ‡	60 ct	1,000 mg	\$8.75
1849	Flaxseed ‡	100 ct	1,000 mg	\$12.00
1850	Folic Acid ‡	100 ct	800 mcg	\$7.25
1114	Glucosamine (Joint Health Support) ‡	60 ct	500 mg	\$12.00
1003	Glucosamine / Chondroitin (Joint Health Support) ‡	60 ct	250 mg / 200 mg	\$14.50
1975	Healthy Eyes with Lutein ‡	60 ct		\$11.75
1206	Herbal Cranberry Supplement‡	60 ct	250 mg	\$17.50
1866	Immune Support Chewable ‡	50 ct		\$13.25
2236	Iron with Vitamin C Gummy ‡	60 ct		\$11.50
1869	Leg Cramps Pain Relief Caplets ‡	50 ct		\$16.00
1870	Leg Cramps Pain Relief Caplets ‡	100 ct		\$18.50
1418	Magnesium ‡	110 ct	250 mg	\$7.75
2232	Magnesium Citrate Gummy ‡	90 ct		\$10.25
1879	Melatonin ‡	100 ct	5 mg	\$13.25

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1971	Melatonin Gummy ‡	120 ct	2.5 mg	\$16.50
2091	Natural Biotin ‡	60 ct	5,000 mcg	\$15.25
2092	Natural Coenzyme Q-10 ‡	45 ct	100 mg	\$22.75
2089	Natural Magnesium ‡	60 ct	482 mg	\$13.25
2094	Natural Melatonin ‡	60 ct	5 mg	\$13.25
2082	Natural Vitamin B-12 ‡	60 ct	500 mcg	\$11.00
2083	Natural Vitamin B-12, Sublingual ‡	60 ct	5,000 mcg	\$21.75
2079	Natural Vitamin B-Complex ‡	100 ct		\$11.00
2084	Natural Vitamin C ‡	100 ct	1,000 mg	\$15.25
2085	Natural Vitamin C with Rose Hips ‡	60 ct	1,500 mg	\$18.25
2077	Natural Vitamin D3 ‡	100 ct	1,000 IU	\$13.25
2078	Natural Vitamin D3 ‡	60 ct	5,000 IU	\$13.25
2086	Natural Vitamin E, Soft Gels ‡	90 ct	400 IU	\$13.25
2087	Natural Vitamin E, Soft Gels ‡	30 ct	1,000 IU	\$16.00
2090	Natural Zinc ‡	100 ct	50 mg	\$11.00
1394	Niacin ‡	100 ct	500 mg	\$13.25
1930	Niacin, No Flush ‡	60 ct	500 mg	\$14.50
1886	One Daily Men's Multivitamin ‡	100 ct		\$11.00
1887	One Daily Women's Multivitamin ‡	100 ct		\$11.00
1977	Potassium Gluconate ‡	100 ct	595 mg	\$7.75
1210	Saw Palmetto Herbal ‡	60 ct	560 mg	\$18.50
1392	Senior Multivitamin ‡	90 ct		\$12.00
1734	Stress Formula Tablets with Zinc ‡	60 ct		\$11.50
2234	Turmeric with Ginger and Black Pepper Gummy ‡	60 ct		\$10.75
1735	Vitafusion Fiber Weight Management ‡	90 ct		\$23.00

ITEM #	PRODUCT NAME	PACKAGING	STRENGTH	PRICE
1379	Vitamin A ‡	100 ct	10,000 IU	\$8.75
1016	Vitamin B-1 ‡	100 ct	100 mg	\$10.00
1381	Vitamin B-12 ‡	100 ct	1,000 mcg	\$14.50
1389	Vitamin B-12 ‡	100 ct	500 mcg	\$7.50
1974	Vitamin B-12, Sublingual ‡	30 ct	5,000 mcg	\$12.75
1388	Vitamin B-6 ‡	100 ct	100 mg	\$10.00
1382	Vitamin B-Complex ‡	100 ct		\$9.75
1915	Vitamin B-Complex Gummy ‡	70 ct		\$14.25
1017	Vitamin C ‡	100 ct	500 mg	\$9.50
1706	Vitamin C ‡	110 ct	1,000 mg	\$12.00
1916	Vitamin C Gummy ‡	60 ct	125 mg	\$13.25
1390	Vitamin D3 ‡	100 ct	1,000 IU	\$9.75
1973	Vitamin D3 ‡	100 ct	5,000 IU	\$12.75
1978	Vitamin D3 Gummy ‡	120 ct	1,000 IU	\$16.50
1384	Vitamin E, Soft Gels ‡	110 ct	400 IU	\$11.00
1419	Zinc Chelated ‡	110 ct	50 mg	\$7.75
<b>WART REMOVER</b>				
1288	Dr. Scholl's Wart Removal System	24 ct	40%	\$16.50
1075	Wart Remover, Liquid	9 ml	17%	\$11.00

# FREQUENTLY ASKED QUESTIONS

## **How much is my quarterly allowance?**

You can check your available balance online at [www.myblueil.com/mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide), or by contacting us at 1-855-891-5274 (TTY: 711) Monday - Friday from 7 a.m. to 10 p.m. CST.

## **Where can I find more information about the products?**

Create an account online at [www.myblueil.com/mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide), and you will see descriptions and photos of the products available. You may also call our Customer Advocates at 1-855-891-5274 (TTY: 711) Monday - Friday from 7 a.m. to 10 p.m. CST for more information.

## **Does my OTC benefit allowance roll over if I don't use it?**

Unused OTC benefit dollars do not roll over from one period to the next, or from one year to the next. Make sure to take advantage of the benefit dollars before they expire!

## **What if I want to buy more products but do not have enough OTC benefit dollars?**

Your order total may not exceed your total benefit amount. Cash, checks, credit cards or money orders are not accepted under the OTC benefit.

# NOTICES

- If you disenroll from Blue Cross Community MMAI (Medicare-Medicaid Plan), your OTC benefit will automatically terminate.
- Blue Cross Community MMAI (Medicare-Medicaid Plan) is provided by Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC), an Independent Licensee of the Blue Cross and Blue Shield Association. HCSC is a health plan that contracts with both Medicare and Illinois Medicaid to provide benefits of both programs to enrollees. Enrollment in HCSC's plan depends on contract renewal.
- ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Member Services at 1-877-723-7702 (TTY: 711). We are available seven (7) days a week. Our call center is open Monday-Friday 8:00 a.m. – 8:00 p.m. Central time. On weekends and Federal holidays, voice messaging is available. If you leave a voice message, a Member Services representative will return your call no later than the next business day. The call is free.
- ATENCIÓN: Si habla español, los servicios de asistencia lingüística están a su disposición sin costo alguno para usted. Llame al 1-877-723-7702 (TTY: 711). Estamos a su disposición los siete (7) días de la semana. Nuestra central telefónica está abierta de lunes a viernes de 8:00 a. m. a 8:00 p. m., hora del centro. Para los fines de semana y días feriados federales, está disponible el servicio de mensajes de voz. Si deja un mensaje de voz, un representante de Atención al Asegurado le devolverá la llamada antes del próximo día laborable. La llamada es gratuita.
- The health information provided in the catalog is general in nature and is not medical advice or a substitute for professional health care.
- Some product costs may exceed benefit allowances and may not be affordable for some members.
- All product and company names are trademarks™ or registered® trademarks of their respective holders. Use of them does not imply any affiliation with or endorsement by them.





Blue Cross and Blue Shield of Illinois complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Blue Cross and Blue Shield of Illinois does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Blue Cross and Blue Shield of Illinois:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

- Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that Blue Cross and Blue Shield of Illinois has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Civil Rights Coordinator, Office of Civil Rights Coordinator, 300 E. Randolph St., 35<sup>th</sup> floor, Chicago, Illinois 60601, 1-855-664-7270, TTY/TDD: 1-855-661-6965, Fax: 1-855-661-6960. You can file a grievance by phone, mail, or fax. If you need help filing a grievance, a Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)  
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

**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 1-877-723-7702 (TTY: 711). Someone who speaks English/Language 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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (TTY: 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

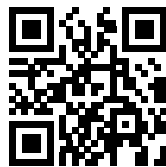
**Italian:** È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero 1-877-723-7702 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

**Portuguese:** 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 1-877-723-7702 (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 1-877-723-7702 (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 1-877-723-7702 (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、1-877-723-7702 (TTY: 711) にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。



**Blue Cross Community MMAI (Medicare-Medicaid Plan)<sup>SM</sup>**

[www.myblueil.com/mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide)

# ORDER FORM

## STEP 1 - COMPLETE YOUR INFORMATION BELOW

Member ID (found on plan member ID card)

Date of Birth

 /  / 

First Name

Last Name and Suffix

MI

Street Number

Street Name

Apt/Suite #

City

State

Zip Code

 - 

Email\* (Optional)

 @ 

Daytime Phone

 -  - 

\*By providing your email address/mobile phone number to us, you consent that we may send communication to you via email/text. Mobile service provider's message and data rates may apply.

Mobile Phone\* (Optional)

 -  - 

## STEP 2 - PRODUCT SELECTION

Cash, checks, credit cards, or money orders are not accepted under this OTC benefit.

Item #	Product	Quantity	Unit Price	TOTAL
1	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
2	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
3	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>

Subtotal from Other Side \$  .

Total Order \$  .

**Please mail this completed form to the following address:**

**OTC Servicing Center, PO Box 526266, Miami, FL 33152-9819**

**To order additional products, please see reverse. Please mail the completed form back in the postage-paid envelope provided.**

If you place your order using an order form, your order total will be applied to the month in which we receive your form. For example, if you mail your order form on June 29th, but we receive it on July 1st, your order total will be applied to your July benefit, not your June benefit.

## STEP 2 - PRODUCT SELECTION (Continued)

Cash, checks, credit cards, or money orders are not accepted under this OTC benefit.

Item #	Product	Quantity	Unit Price	TOTAL
4	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
5	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
6	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
7	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
8	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
9	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
10	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
11	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
12	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
13	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
14	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
15	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
16	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
17	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
18	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
			<b>Subtotal</b>	\$ <input type="text"/> . <input type="text"/>

A new order form will be provided with your shipment and additional forms can be printed at [www.myblueil.com/mmai/otc/guide](http://www.myblueil.com/mmai/otc/guide).

*Please mail the completed form back in the postage-paid envelope provided.*

If you place your order using an order form, your order total will be applied to the month in which we receive your form. For example, if you mail your order form on June 29th, but we receive it on July 1st, your order total will be applied to your July benefit, not your June benefit.