

Employee *Benefit Guide*





Vitable Health offers accessible, affordable healthcare designed around you.

 enrollments@vitablehealth.com

 (484) 469-9177

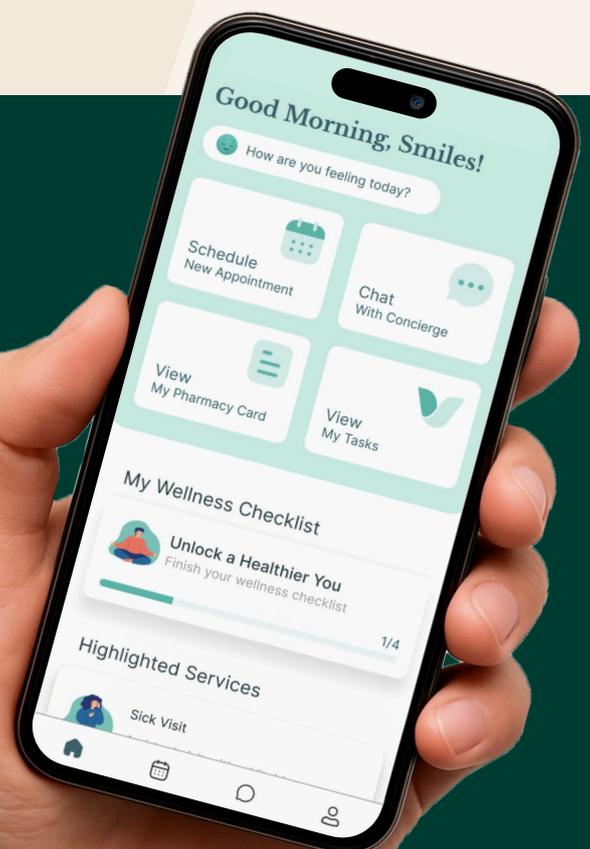
Our goal is simple: make quality, personalized care accessible to everyone.

Don't go without health coverage

Taking care of your health shouldn't be a gamble. Regular checkups and preventive care can catch small issues early, keeping you healthy and avoiding bigger problems down the road.

Our affordable plans make accessing basic healthcare services easy and convenient.

Enroll today and take control of your health and wellness!





Vitable Primary Care

- Unlimited virtual visits, mental health coaching, and urgent care visits with \$0 copay through Vitable's primary care network
- Over 1,000 free prescription drugs
- Lab services and annual wellness checks
- Chronic condition management and more
- **Add dependents at no additional fee!**



GLP-1 & Premium Labs

- Premium VPC add-on services
- Access to Wegovy® (semaglutide) or Zepbound® (tirzepatide)
- Premium labs: about 100 tests across 16 organ systems
- Includes Vitable Primary Care membership



MEC

- 100% coverage for ACA preventive services
- Only covered through in-network providers
- ACA-compliant prescriptions included
- Prescription discounts
- Includes Vitable Primary Care membership

MEC Plus

- All of the benefits of MEC plan, plus...
- Additional pediatric care and urgent care
- Sick visits, specialist care, X-rays, and labs
- Additional mental health visits

Vitable Primary Care

Virtual Services <i>Offered to all VPC members (Core & Enhanced)</i>	Details
Vitable Primary Care (Telemedicine)	\$0 Copay through Vitable Primary Care
Mental Health Coaching (Virtual)	\$0 Copay through Vitable Primary Care
Labs (Available at partnered LabCorp or Quest locations)	\$0 Copay through Vitable Primary Care
Generic Prescription Drugs (Tier 1)	\$0 Copay through Vitable Primary Care
Enhanced Services <i>Only offered to VPC Enhanced members in select regions</i>	Details
In-Home Visits (Select regions)	\$0 Copay through Vitable Primary Care
Licensed Mental Health Therapy (Select regions)	\$0 Copay through Vitable Primary Care <i>10 visits per year</i>

Additional Benefits

General Information	MEC	MEC Plus
Annual Maximum/ Lifetime Max Benefit	Unlimited	Unlimited
Deductible	None	None
Maximum Out-of-Pocket	Not Applicable	Not Applicable
PPO Network	First Health	First Health
Medical Benefits	In-Network	In-Network
Primary Care & Pediatric Sick / Office Visits	Not Covered	\$15 Copay \$200 per visit max <i>5 visits per year</i>
Specialist Visits	Not Covered	\$25 Copay \$200 per visit max <i>2 visits per year</i>
Laboratory Services	Preventive care only included	Preventive care only included
X-Rays	Not Covered	\$50 Copay \$200 per visit max <i>3 visits per year</i>
Urgent Care	Not Covered	\$25 Copay \$200 per visit max <i>2 visits per year</i>
Emergency Services (Excludes Ambulance)	Not Covered	Not Covered
Emergency Transport (Ground Ambulance)	Not Covered	Not Covered
Outpatient Surgery	Not Covered	Not Covered
In-Patient Surgery /Services	Not Covered	Not Covered

Additional Benefits (cont.)

	MEC	MEC Plus
Medical Benefits	In-Network	In-Network
Maternity Professional Services	Not Covered	Not Covered
Maternity Inpatient Facility	Not Covered	Not Covered
Physical / Speech / Occupational Therapy	Not Covered	Not Covered
Chiropractic Care	Not Covered	Not Covered
Skilled Nursing Facility	Not Covered	Not Covered
Durable Medical Equipment	Not Covered	Not Covered
Outpatient Facility (e.g. Ambulatory Surgery Center)	Not Covered	Not Covered
Complex Imaging	Not Covered	Not Covered
Hospital / ICU Confinement (In-patient Hospital Stay)	Not Covered	Not Covered
COBRA	Eligible	Eligible
Prescription Drug Benefits		
Prescription Drugs (Tier 2)	Copay \$10	Copay \$10

The Minimum Essential Coverage is not underwritten by an Insurance Company.

SELF-FUNDED MINIMUM ESSENTIAL COVERAGE BENEFITS ARE SUBJECT TO CHANGE AND WILL BE UPDATED AS DETERMINED BY ACA REQUIREMENTS. PREVENTIVE SERVICES LIST WAS PROVIDED BY HEALTHCARE.GOV, WWW.HEALTHCARE.GOV/PREVENTIVE-CARE-BENEFITS.

DISCLAIMER: BENEFITS LISTED ON THIS PROPOSAL ARE INTENDED TO BE A BRIEF SUMMARY AND ARE SUBJECT TO CHANGE, REFER TO THE SUMMARY OF BENEFITS FOR FULL DETAILS OF THE BENEFITS, INCLUDING DESCRIPTION OF COVERAGE AND A LIST OF EXCLUSIONS.

The MVP Advantage plan satisfies both ACA "Part A" and "Part B" employer mandates by providing Minimum Essential Coverage (MEC) and Minimum Value (MV) standards.

Please note, the U.S. Preventive Services Task Force periodically updates these lists and sets the requirements such as age, gender, or health conditions for services to be covered. For a current list including all requirements, visit www.healthcare.gov/preventive-care-benefits/.

IMPORTANT: Your doctor may provide a preventive service, such as a cholesterol screening test, as part of an office visit. Be aware that you may be required to pay some costs for the office visit, if the preventive service is not the primary purpose of the visit, or if your doctor bills you for the preventive services separately from the office visit.

Vitable *Primary* Care

Vitable's Primary Care membership comes standard with your health benefits. As a health benefit paid for by your employer, you and your family get free access to a team of primary care and mental health providers under Vitable's network.

Get unlimited virtual primary care visits, mental health coaching, labs, and over 1,000 free prescription drugs with no out-of-pocket costs.

Vitable

Get to Know Your *Free Vitable* Membership



Scan to get started
or visit app.vitablehealth.com/enroll-new



Virtual Primary Care

Schedule appointments for those common, everyday health concerns such as annual check-ups, sports/school physicals, sick visits, and more!



Lab Tests

40+ lab tests are covered 100% (free!) through Vitable. Easily access tests at our partner LabCorp and Quest locations and review test results in our app.



Mental Health Coaching

Mental health coaches empower individuals to thrive and plan, providing guidance on things like coping skills, stressors, and goal setting.

For members 18+



Free Dependents

No additional charge to add any number of dependents to your Vitable membership, so your whole family can access Vitable services.

Dependent members must be 18 mo. - 64 yrs.



Free Prescriptions

Over 1,000 of prescription drugs are covered for free when prescribed through Vitable. We also offer discounts for other medications outside of our covered prescriptions.

Vitable does not prescribe injectables or controlled substances.



Care Navigation

When you need care that we cannot provide directly, our member support team will find providers and resources in your area, guiding you every step of the way.

Primary & Episodic Care

Vitable delivers comprehensive primary and urgent care designed to meet your everyday health needs. With same- or next-day virtual visits, on-demand care team chat, and personalized care navigation, getting the support you need has never been easier.

Our guided Care Pathways make it simple for you and your family to take control of your health. Through regular check-ins, convenient asynchronous tools, scheduled lab work, and medication management, you gain access to everything you need to stay on track—and be your healthiest self.

Scope of Service - Primary & Episodic Care

Primary Care

- Annual Physicals
- School Physicals
- Flu Vaccines
- Smoking cessation
- Oral Contraceptives
- Sports Physicals
- Sick Visits
- Allergies
- Cholesterol screens
- And more!

Episodic Care

- Allergies
- Ear Infections
- Pink eye
- GI/Digestive Issues
- Urinary Tract Infection
- Cold & Flu
- STI / STD Testing
- Respiratory Concerns
- Minor sprains/strains
- Skin Concerns

Scope of Service - Chronic Conditions



Managed Chronic Conditions

- Hypothyroid (*Low thyroid*)
- High Blood Pressure
- Type II Diabetes (*Non-Insulin Dependent*)
- Acid Reflux
- Anemia
- Asthma
- High Cholesterol



Out-of-Scope Chronic Conditions

- Kidney Disease
- Hepatitis
- Heart Disease
- Atrial Fibrillation
- Type I Diabetes
- STI / STD Testing
- Heart Failure
- Osteoporosis

Covered Labs

To access labs: Download the Vitable app, claim your account, and schedule a visit through Vitable.

If your provider deems a lab test necessary, you can complete the test at our partner LabCorp and Quest locations. Once complete, you can view the results right in the app and review the results with your provider.

Sample Covered Labs

- BMP
Basic Metabolic Panel
- CMP
Comprehensive Metabolic Panel
- CBC w/ Diff
Complete Blood Count with Differential
- BUN
- Creatinine, Serum
- eGFR
- Glucose
- Hemoglobin A1C
- Lipid Panel
- TSH w/ reflex T4
- Free T4
- Triiodothyronine (T3)
- Vitamin D
- Vitamin B12
- Folate
- Iron
- Ferritin
- Iron and Total Iron-binding Capacity (TIBC)
- Transferrin Saturation
- Reticulocyte Count
- Hematocrit
- Hematocrit
- Hemoglobin
- Urinalysis
- Microalbumin, urine
- Albumin/Creatinine Ratio, Random Urine
- Urine Culture
- Hepatic Function Panel
- HIV
- Hepatitis C Virus (HCV) Antibody With Reflex to PCR
- And more!

Free & Discounted Prescriptions

Don't overpay for medication. With Vitable you gain access to huge discounts on prescriptions, with some being completely free. Get the treatment you need without the financial stress.

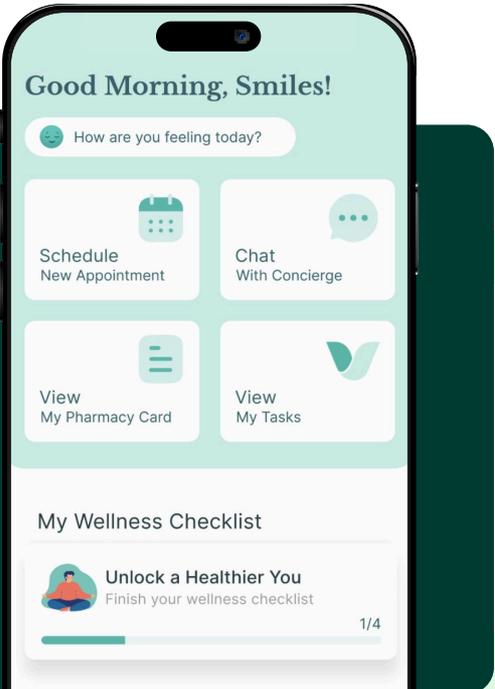
To access your free and discounted prescriptions: download the Vitable app, claim your account, and schedule a visit through Vitable.

Sample Covered Prescriptions Categories

- Addiction
- Cholesterol
- Mental Health
- Allergy
- Cough
- Migraines
- Antacids
- Dental
- Muscle Relaxant
- Anti-inflammatory
- Dermatology
- Nausea
- Antibiotics
- Diabetes
- Pain
- Anticoagulants
- Diuretics
- Parkinson's Disease
- Anticonvulsants
- Ear Drops
- Sleep Aids
- Antifungals
- Eye Drops
- Steroids
- Antivirals
- Flu
- Thyroid
- Asthma
- Gout
- Topicals
- Bladder
- Laxatives
- Vitamins
- Blood Pressure
- Medical Supplies
- Women's Health
- Cardiac
- Men's Health

Accessing your Prescription benefits

- 1 Download the app & activate your account
- 2 Schedule your Vitable primary care visit
- 3 Get updated when your script is ready
- 4 Find your local in-network pharmacy
- 5 Show them your Vitable Rx card



VPC Enhanced Benefits

Only offered to VPC Enhanced members; select regions.

To confirm your VPC plan type and determine if your plan is in an eligible region, please reference the [Vitable Care Navigation](#) tool using your zip code.

Additional steps and resources provided in the VPC Appendix on the following page.

In-Home Visits

Only available in select regions.

Our network is composed of local physicians, nurse practitioners, and healthcare providers who can come to you in-home to assess common health needs. If your virtual provider determines that an in-home visit is needed after a telemedicine appointment, they will submit a request on your behalf.

Scope of Service - In-Home Visits

Physical Exams

Lab Work

Blood draws

Biometrics Screening

Licensed Mental Health Therapy

Only available in select regions.

Our mental health offering makes personalized care easy and discreet. Members gain access to licensed therapists who can help to diagnose, manage, and treat mental health concerns that may be affecting your overall quality of life.

Scope of Service - Mental Health Treatments

Included Mental Health Services

- Care Pathways
- One-on-One Counseling
- Mental Health Coaching
- Asynchronous Tools
- Recurring Examinations
- Lab Work
- Medication Management*

Out-of-Scope Mental Health Services

- Medication management for dependents under age 18
- Medication management for members requiring MAOIs, anti-psychotics, Lithium, or controlled substances.
- Mental health services outside of Vitable Health's mental health offering

** Vitable providers can prescribe the following medications to treat mental illnesses with SSRIs, SNRIs, 2nd Gen Antidepressants, and TCAs. Members can receive up to a 30-day 1 time refill every 6 months of medications prescribed by an outside provider for members not using Vitable for primary management.*

Benefit Support

 info@vitablehealth.com

 (484) 416-0769

Enrollment Support

 enrollments@vitablehealth.com

 (484) 469-9177

Appendix A: VPC Enhanced Benefits Eligibility

How do I verify if I am eligible for Enhanced Benefits?

Enhanced Benefits include **in-home visits** and **licensed mental health therapy**.

1. Login to your Vitable app [here](#).
2. Click the person icon in the bottom right corner (*Image 1*).
3. Under Benefits Overview (*Image 2*):
 - a. If it says **“Vitable Primary Care - Core”**: You do not have licensed mental health benefits or in-home visits.
 - b. If it says **“Vitable Primary Care - Enhanced”**: Proceed to step 4 to see if you are in an eligible region.
4. Navigate to the Vitable Care Navigator tool in the app [here](#) (*Image 2 - “View coverage details”*).
5. Make sure you are on “VPC Enhanced” (top right) (*Image 3*).
6. Select “Plan Services”.
7. Update your zipcode in the top left hand corner (*Image 4*).
8. Review the benefits listed under “Plan Services”.
 - a. If **“in-home appointment” is present**: You have this benefit.
 - b. If **“Therapy” is present**: You have this benefit.
 - c. If the benefit is not listed, you do not have that benefit.

Image 1

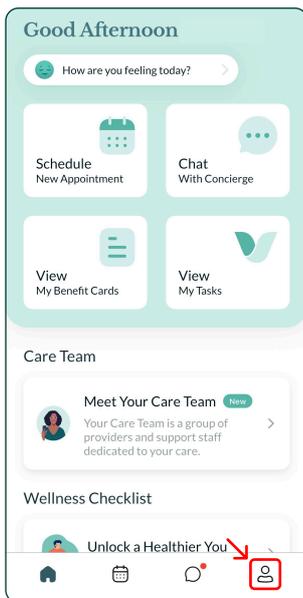


Image 2

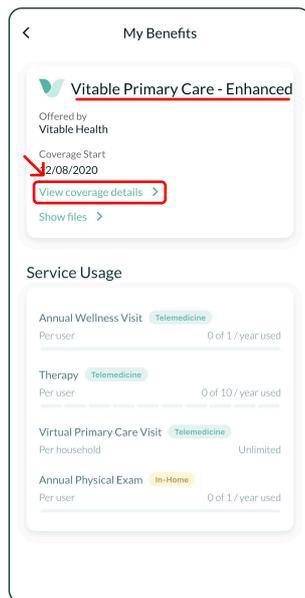


Image 3

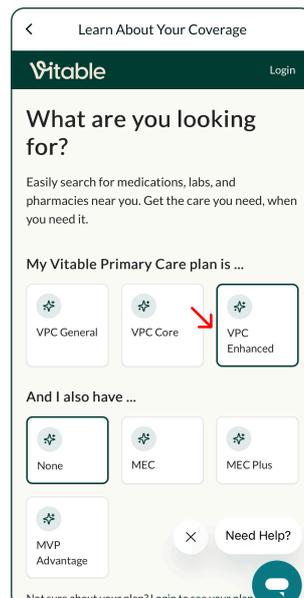
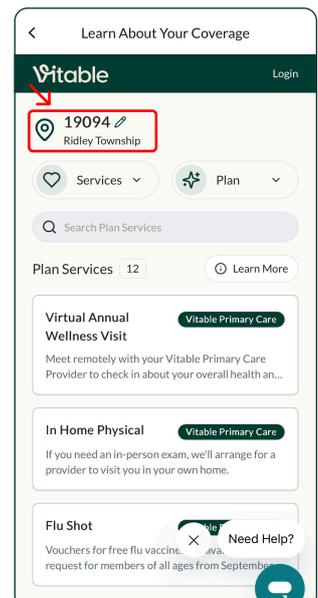


Image 4



Appendix B: What to Expect in a Virtual or In-Home Visit

What should I expect leading up to my visit?

For Virtual Visits:

- Provider Enters the Visit (virtual)
- Your provider will collect any prior medical history if needed
- If an exam is required, your provider will inform you on next steps
- Provider will review findings and chat through diagnosis / treatments

For In-Home Visits:

- Your provider will update the app when they leave and arrive. This will notify you in-app
- Your provider will collect any prior medical history if needed
- If an exam is required, your provider will inform you on next steps
- Provider will review findings and chat through diagnosis / treatments

What should I expect after my visit?

Upon completing your visit, please allow 24 hours for your records to be charted and completed, this also applies for any lab draws or prescriptions. Depending on the care provided, the post visit process may look something like the following:

- A member engagement specialist will follow up with you post-visit
- You will be notified in the 'help chat' section about any lab results/prescriptions
- Your visit summary will be available within 24 hours
- If you need results sooner than 24 hours, you should chat with your provider about that during your appointment

Member expectations

- Please ensure you are in a private space and can give your un-divided attention to your provider
- Have access to your mobile phone in case your provider needs to contact you
- Connect to reliable WIFI for any telemedicine visits
- Double check the service you require is covered under your Vitable membership

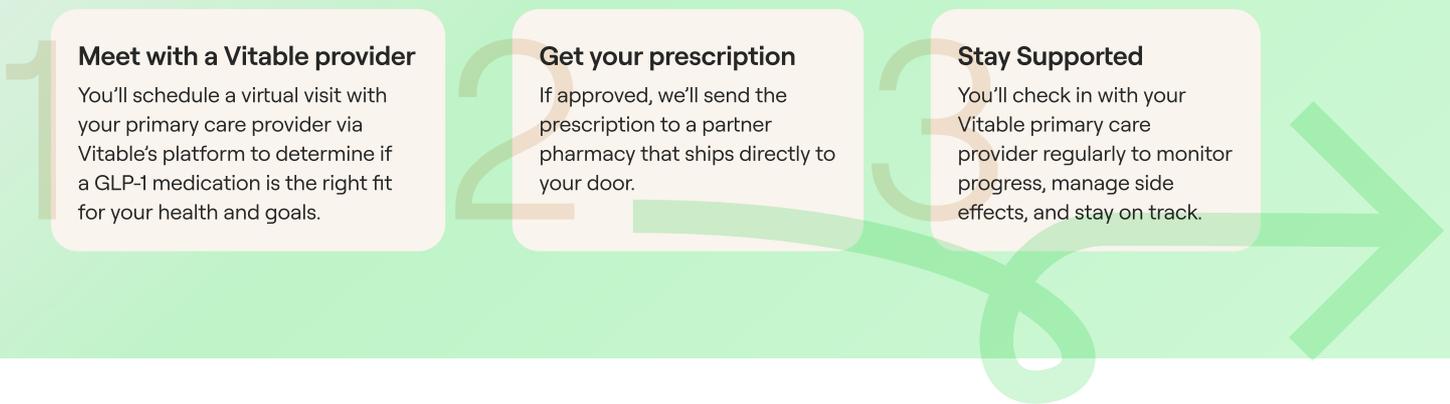
Vitable's *GLP-1* Program

Vitable

A better way to access prescription weight loss support

Our GLP-1 program helps eligible members access medications like Wegovy® (semaglutide) or Zepbound® (tirzepatide) through your Vitable Primary Care membership.

How It Works



What's included in the GLP-1 Program

- Virtual one-on-one medical evaluation and eligibility screening
- Ongoing primary care and monthly or quarterly follow-ups
- FDA-approved medications Wegovy® (semaglutide) or Zepbound™ (tirzepatide)
- Prescription management and guidance
- Help managing side effects and lifestyle adjustments
- Mental health support
- Access to 1000+ free additional prescriptions and labs for managing other conditions

How do I take the medication?

Both Wegovy® and Zepbound™ are injectable medications, but the experience is different depending on the drug:

wegovy®
semaglutide injection

comes in a pre-filled injection pen. There's no vial or syringe, and the pen is designed to be simple and discreet to use at home — just press it against your skin and click.

zepbound™
(tirzepatide) injection

is currently available as a multi-dose vial, which means it requires a small syringe for self-injection. Your provider will show you exactly how to use it safely and confidently.

Not sure which one is right for you? Your provider will walk through the options and guide you based on medical needs, preferences, and comfort with the method of use.

Who's eligible?

You may qualify if

Your BMI is over 30, or
Your BMI is 27+ with a weight-related condition, like:

High blood pressure

Type 2 diabetes

High cholesterol

Sleep apnea

Heart disease

Fatty liver

Osteoarthritis



Your Vitable primary care provider will walk you through the clinical guidelines during your visit.



Vitable Primary Care

All visits, labs, mental health, and lifestyle support are included in your Vitable membership offered by your employer.



Medication Cost

\$499/mo

one of the lowest available rates

Available in 40+ states: Coming soon in Florida, Georgia, Indiana, Louisiana, Mississippi, Missouri, South Carolina, and Tennessee. ** Not available in Alabama (due to state telehealth restrictions).

Frequently Asked Questions

What are GLP-1s?

GLP-1s are injectable medications that help with weight loss by reducing appetite, slowing digestion, and improving insulin response.

What medications are included?

Wegovy® (semaglutide) and Zepbound™ (tirzepatide)

Is this covered by insurance?

No, this is a cash-pay only program through our pharmacy partners.

How often do I need follow-ups?

Typically monthly at first, then every 3 months once stable.

What are the side effects?

Most people tolerate the medication well, but common side effects include nausea, constipation, fatigue, and loss of appetite. Your provider will discuss all risks with you.

Will I gain weight back after stopping?

There's a chance — but with the right support, lifestyle habits, and medical guidance, you can reduce that risk.

Resources

Instructions and Self-Help Videos

You'll receive clear instructions from your provider, but you can also review how to safely take your medication using the links below.

For Wegovy (semaglutide):

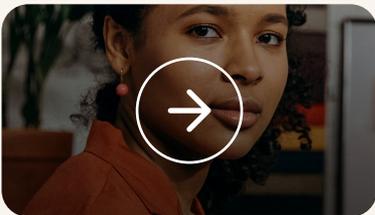
- [Wegovy administration instructions](#)
- [Wegovy self-help videos](#)

For Zepbound (tirzepatide):

- [Zepbound administration instructions](#)
- [Zepbound self-help videos](#)

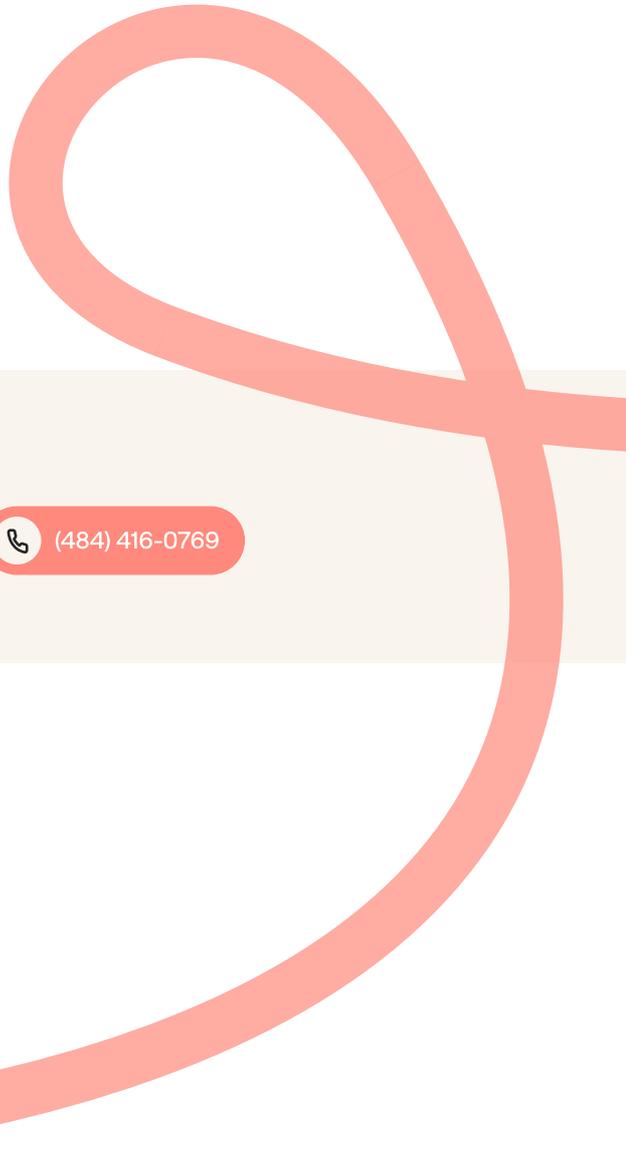
Additional Information:

- [Florida Weight-Loss Consumer Bill of Rights](#)



Member Support

-  scheduling@vitablehealth.com
-  (484) 416-0769



Vitable's Premium *Lab Panel*

Vitable

Take Control of Your Health

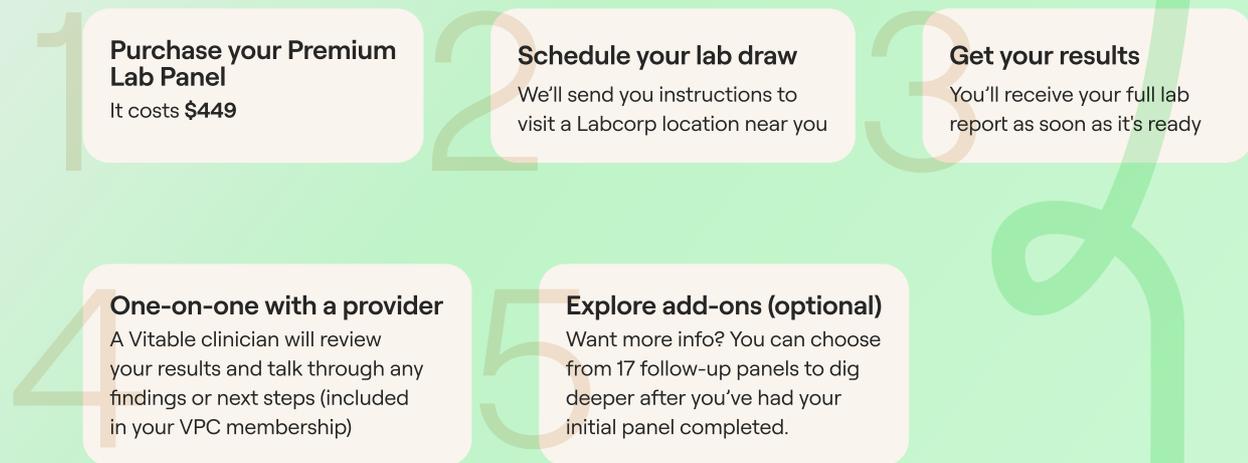
Preventative testing made simple — so you can catch issues early and stay ahead of your health.

You'll receive clear instructions from your provider, but you can also review how to safely take your medication using the links below.

What Is It?

Think of it as your health's annual report. Covering everything from cardiovascular risk to vitamin deficiencies, our Premium Lab Panel is designed to screen for potential issues before they become a problem, providing you and your provider with a more comprehensive view of your health.

How It Works



How Much Does It Cost?

- \$449 for the full baseline panel (paid directly to Vitable)
- Add-on labs are priced individually and available only after your baseline review
- Provider visits, follow-ups, and care coordination are included in your Vitable Primary Care membership
- No insurance required. No hidden fees. No copays or deductibles.

What's Included

Included	Details
Lab Tests	About 100 tests across 16 organ systems
Lab Draw	Single blood draw via Labcorp (nationwide access)
Add-On Panels Available	17 targeted panels (ordered after provider review)
Provider Review & Follow-up	Clinical review + follow-up with a Vitable clinician. Included for free in your VPC membership
Insurance Required?	No
Hidden Fees?	No
Cost	\$449 (self-pay)

Common Questions

Do I need to see a provider first?

No — you'll do the labs first and review results with your provider afterward.

What if something looks off?

Your Vitable provider will walk through your results and help you create a plan, including any necessary follow-up testing.

Can I get a copy of my results?

Yes — you'll receive a notification once your results are ready, and you can download the full report.

Do I need to fast?

Yes — please fast for 8–12 hours before your lab draw. Water is okay.

Can I skip the add-ons?

Definitely. The baseline panel is designed to give you a comprehensive overview on its own. Add-ons are optional.

Is this covered by insurance?

No — this program is self-pay and outside of insurance, but it's designed to be affordable and transparent.

How long does it take to get results?

You'll typically get your lab results within 3–5 business days after your Labcorp visit. We'll notify you as soon as they're ready.

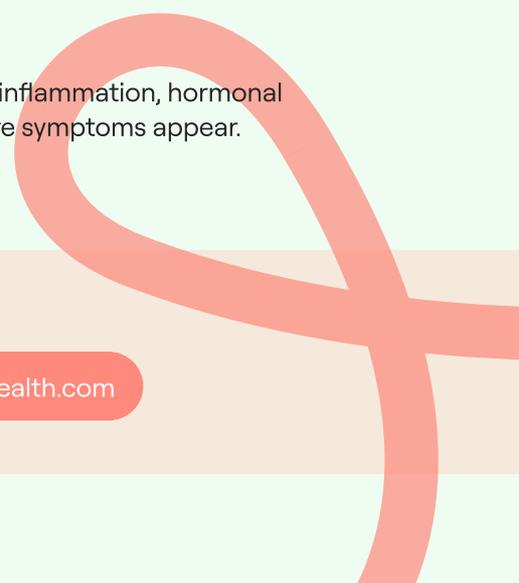
What kinds of things can this panel help detect?

The Premium Lab Panel can help identify early signs of heart disease, diabetes, inflammation, hormonal imbalances, liver and kidney issues, nutrient deficiencies, and more, often before symptoms appear.



Need help?

 support@vitablehealth.com



Vitable *MEC*

Vitable MEC and MEC Plus plans cover different services with varying costs. All plans come standard with Vitable's Primary Care membership.

MEC and MEC Plus plans are designed to offer preventive coverage only.

Vitable

All Vitable plans come standard with **Vitable's Primary Care** membership. This is included in the employer-paid costs and offer employees unlimited access to primary care, mental health, prescriptions, and annual wellness visits.

Vitable Minimum Essential Coverage (MEC) and MEC Plus Plans provide an affordable way to cover preventative care, routine health checks, and access to cost-effective medications.

MEC Plans cover enrolled members for preventative services (including contraceptives) with no annual or lifetime limits, and MEC Plus Plans provide additional services and coverages for those looking for more.

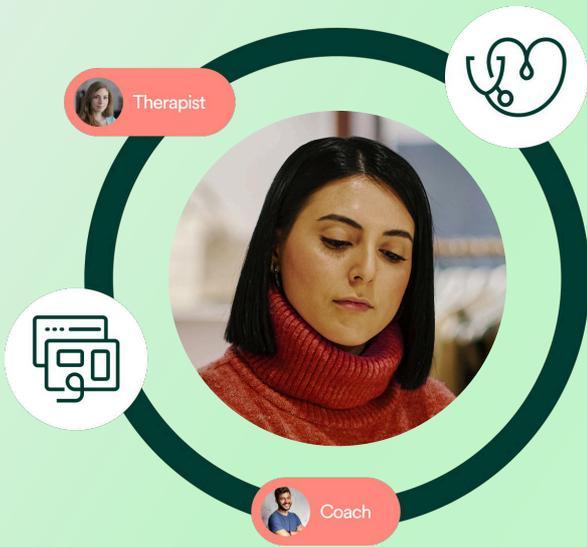
Network & Pricing

With Vitable MEC/MEC Plus and MVP Plans, you can access the First Health network to see an in-network provider for covered services without needing reimbursement.

Costs for these additional benefits are deducted directly from your paycheck by your employer. Please contact your employer if you have questions about how these deductions work.

	Vitable Primary Care	MEC	MEC Plus
Cost per Month (Employees, Spouses & Dependents under 25)	Included in Vitable packages	\$30 per Employee + \$30 Dependents	\$125 per Employee + \$100 Dependents
Deductible	No	No	No
In-network providers?	Yes, Vitable network.	Yes, this plan uses a provider network.	Yes, this plan uses a provider network.
Copay?	No	No	Yes
Reimbursement request needed?	No charge for covered services. No reimbursement required.	No charge for covered services. No reimbursement required.	No reimbursement required.

Why Enroll in the MEC Plan?



- 1 Preventive services covered at 100%.
- 2 No cost for preventive prescriptions and discounts on non-preventive prescriptions.
- 3 Free access to Vitable Primary Care.
- 4 Unlimited mental health coaching through Vitable Primary Care.
- 5 Specialist and Pediatric Visits with Medical Bill Advocacy for MEC Plus.

Covered Services Include:

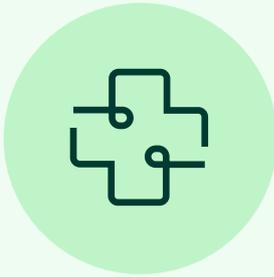
- **Medical screenings:**
 - Blood pressure
 - Cholesterol
 - Diabetes
- **Annual well-woman exam**
- **Well baby and well child exams**
- **Flu shots**
- **Routine immunizations**
- **Counseling on topics including:**
 - Alcohol and drug abuse
 - Depression
 - Diet and obesity
 - Domestic violence
 - Sexually transmitted diseases
 - Tobacco cessation
- **Contraception:**
 - FDA approved methods excluding abortifacient drugs
 - Female sterilization procedures
- **Cancer screenings:**
 - Colorectal
 - Breast

Save Money! Use Vitable’s Primary Care

When you use Vitable’s Primary Care for everyday healthcare needs, instead of your MEC plan or traditional insurance, you are saving money on out-of-pocket expenses like copays on urgent care visits and prescriptions. Here’s an example of how using Vitable’s Primary Care can save you money on visits, preventive care, and prescriptions:

Refer to benefit grid for actual benefit amount.

<div style="border: 1px solid #ccc; border-radius: 10px; padding: 10px; background-color: #e0f2f1;"> <p style="text-align: center; margin: 0;"><i>Example</i></p> <p style="font-size: 0.8em; margin: 5px 0 0 0;">You are about to go to an urgent care because your child has cough and fever. You want to see a provider and get prescriptions as quickly as possible.</p> </div>	Vitable Primary Care	\$0	+	\$0	+	\$0	=	Your Cost \$0
	Same-day Virtual Primary Care Visit	Primary Care Lab Services	Prescription Drugs					
<hr style="border: 0.5px solid #ccc;"/>								
	Out-of-Pocket Costs	\$225	+	\$70	+	\$50	=	Your Cost \$345
	Urgent Care Visit	Lab Services	Prescription Drugs					



Network Access

Members enrolled in our MEC plans have access to the First Health Network, which offers a limited selection of providers. To expand access, Vitable partners with Mishe to help ensure members can get the care they need.

To explore your options, contact our Member Support Team at **(484) 416-0769** or **support@vitablehealth.com**.



Vitable's Primary Care Membership

With Vitable's Primary Care membership, all primary care and mental health visits along with 1,000+ generic prescription drugs and lab services are covered for free (no out-of-pocket costs). Plus, you can extend your membership to all your dependents and family members at no additional cost.

Vitable members get access to a dedicated team of primary care providers and mental health coaches that you establish a long-term relationship with. Your team of Primary Care Providers (PCP) will partner with you to address your medical concerns and help you stay healthy. Members also have same-day/next-day access to providers for urgent care needs as well as services provided by mental health professionals.



Ventegra: Pharmacy Benefits

Ventegra partners with Vitable to offer members free access to over 1,000 generic prescription drugs. With embedded member ID, you can pick up your prescriptions at no additional cost from thousands of participating pharmacies such as CVS, RiteAid, Wal-Mart, Costco, and Stop&Shop.

You can find the full list of covered prescriptions by visiting Vitable's coverage tool:

<https://app.vitablehealth.com/coverage/Vitable%20Primary%20Care%20-%20Enhanced>

Introduction

The right to COBRA continuation coverage was created by a federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA). COBRA continuation coverage can become available to you when you would otherwise lose your group health coverage. It also can become available to other members of your family who are covered under the Plan when they would otherwise lose their group health coverage. For additional information about your rights and obligations under the Plan and under federal law, you should review the Plan's Summary Plan Description, which will be mailed to you following your enrollment in the plan.

What is Cobra Continuation Coverage?

COBRA continuation coverage is a continuation of Plan coverage when coverage would otherwise end because of a life event known as a "qualifying event." Specific qualifying events are listed below. After a qualifying event, COBRA continuation coverage must be offered to each person who is a "qualified beneficiary." You, your spouse, and your dependent children could become qualified beneficiaries if coverage under the Plan is lost because of the qualifying event. Under the Plan, qualified beneficiaries who elect COBRA continuation coverage must pay for COBRA continuation coverage.

If you are an employee, you will become a qualified beneficiary if you lose your coverage under the Plan due to one of the following qualifying events:

- Your hours of employment are reduced
- Your employment ends for any reason other than your gross misconduct

If you are the spouse or domestic partner of an employee, you will become a qualified beneficiary if you lose your coverage under the Plan due to any of the following qualifying events:

- Your spouse or domestic partner dies
- Your spouse's or domestic partner's hours of employment are reduced
- Your spouse's or domestic partner's employment ends for any reason other than his or her gross misconduct
- Your spouse or domestic partner becomes entitled to Medicare benefits (under Part A, Part B, or both)
- You become divorced or legally separated from your spouse or domestic partner

Your dependent children will become qualified beneficiaries if they lose coverage under the plan due to any of the following qualifying events:

- The parent/employee dies
- The parent/employee's hours of employment are reduced
- The parent/employee's employment ends for any reason other than his or her gross misconduct.
- The parent/employee becomes entitled to Medicare benefits (Part A, Part B, or both)
- The parents become divorced or legally separated
- The child stops being eligible for coverage under the plan as a "dependent child"

When is Cobra Coverage Available?

The Plan will offer COBRA continuation coverage to qualified beneficiaries only after the Plan Administrator has been notified that a qualifying event has occurred.

The employer must notify the Plan Record-keeper if any of the following qualifying events occur: the end of employment, a reduction of hours of employment, death of the employee, commencement of a proceeding in bankruptcy with respect to the employer, or the employee's becoming entitled to Medicare benefits (under Part A, Part B, or both).

Have questions or are
you not sure if you've
already enrolled?



enrollments@vitablehealth.com



(484) 469-9177

Vitable

vitablehealth.com/for-members

Covered Prescriptions

Don't pay more than you need to for medication. With Vitable, prescriptions come with huge discounts and just a \$10 copay - so you can treat a condition without breaking the bank.



How to Access Your Prescriptions

- 1 Get a prescription from your provider (or a provider of your choice)*
- 2 Go to your preferred pharmacy.
- 3 Show your pharmacy card in the Vitable Health app at checkout.

*Note: Vitable providers may not be able to prescribe all medications on this formulary. Examples include insulin and other prescriptions that require in-person monitoring and cannot be prescribed through telemedicine.

Addiction

- Naloxone HCl Nasal Spray 4 MG/0.1ML
- Nicotine Nasal Spray 10 MG/ML (0.5 MG/SPRAY)
- Varenicline Tartrate Tab 0.5 MG (Base Equiv)
- Varenicline Tartrate Tab 1 MG (Base Equiv)
- Varenicline Tartrate Tab 11 × 0.5 MG & 42 × 1 MG Start Pack

Allergy

- Azelastine HCl Nasal Spray 0.15% (205.5 MCG/SPRAY)
- Azelastine HCl-Fluticasone Prop Nasal Spray 137-50 MCG/ACT
- Epinephrine Solution Auto-injector 0.15 MG/0.3ML (1:2000)
- Epinephrine Solution Auto-injector 0.3 MG/0.3ML (1:1000)
- Promethazine HCl Oral Soln 6.25 MG/5ML

Antacids

- Dexlansoprazole Cap Delayed Release 30 MG
- Dexlansoprazole Cap Delayed Release 60 MG
- Famotidine For Susp 40 MG/5ML
- Lansoprazole Cap Delayed Release 15 MG
- Lansoprazole Tab Delayed Release Orally Disintegrating 15 MG
- Omeprazole Magnesium Delayed Release Tab 20 MG (Base Equiv)
- Omeprazole Tablet Delayed Release Disintegrating 20 MG
- Pantoprazole Sodium For Delayed Release Susp Packet 40 MG
- PEG 3350-KCl-Na Bicarb-NaCl-Na Sulfate For Soln 236 GM
- PEG 3350-KCl-NaCl-Na Sulfate-Na Ascorbate-C For Soln 100 GM
- PEG 3350-KCl-Sod Bicarb-NaCl For Soln 420 GM

Sucralfate Susp 1 GM/10ML

Sucralfate Tab 1 GM

Anticonvulsants

Divalproex Sodium Cap Delayed Release Sprinkle 125 MG

Gabapentin Tab 800 MG

Oxcarbazepine Susp 300 MG/5ML (60 MG/ML)

Oxcarbazepine Tab 300 MG

Oxcarbazepine Tab 600 MG

Oxcarbazepine Tab ER 24HR 150 MG

Oxcarbazepine Tab ER 24HR 300 MG

Oxcarbazepine Tab ER 24HR 600 MG

Phenytoin Sodium Extended Cap 100 MG

Phenytoin Sodium Extended Cap 200 MG

Phenytoin Sodium Extended Cap 300 MG

Topiramate Cap ER 24HR 100 MG

Topiramate Cap ER 24HR 200 MG

Topiramate Cap ER 24HR 25 MG

Topiramate Cap ER 24HR 50 MG

Topiramate Cap ER 24HR Sprinkle 100 MG

Topiramate Cap ER 24HR Sprinkle 150 MG

Topiramate Cap ER 24HR Sprinkle 200 MG

Topiramate Cap ER 24HR Sprinkle 25 MG

Topiramate Cap ER 24HR Sprinkle 50 MG

Zonisamide Cap 100 MG

Antifungals

Clotrimazole w/ Betamethasone Cream 1-0.05%

Econazole Nitrate Cream 1%

Fluconazole Tab 50 MG

Griseofulvin Ultramicrosize Tab 125 MG

Griseofulvin Ultramicrosize Tab 250 MG

Iodoquinol-Hydrocortisone in Aloe Vehicle Cream 1-1.9%

Itraconazole Cap 100 MG

Ketoconazole Foam 2%

Ketoconazole Tab 200 MG

Naftifine HCl Cream 2%

Naftifine HCl Gel 2%

Nystatin Tab 500000 Unit

Nystatin-Triamcinolone Cream 100000-0.1 Unit/GM-%

Nystatin-Triamcinolone Oint 100000-0.1 Unit/GM-%

Oxiconazole Nitrate Cream 1%

Tavaborole Soln 5%

Anti-inflammatory

Celecoxib Cap 400 MG

Diclofenac Sodium Soln 1.5%

Etodolac Cap 200 MG

Ibuprofen Chew Tab 100 MG

Naproxen Tab EC 375 MG

Naproxen Tab EC 500 MG

Sulindac Tab 200 MG

Antivirals

Acyclovir Cream 5%

Acyclovir Oint 5%

Albendazole Tab 200 MG

Atovaquone-Proguanil HCl Tab 250-100 MG

Atovaquone-Proguanil HCl Tab 62.5-25 MG

Famciclovir Tab 125 MG

Famciclovir Tab 250 MG

Famciclovir Tab 500 MG

Hydroxychloroquine Sulfate Tab 100 MG

Hydroxychloroquine Sulfate Tab 200 MG

Hydroxychloroquine Sulfate Tab 300 MG

Hydroxychloroquine Sulfate Tab 400 MG

Mefloquine HCl Tab 250 MG

Praziquantel Tab 600 MG

Antibiotics

Amoxicillin (Trihydrate) Chew Tab 250 MG

Amoxicillin & K Clavulanate Tab 250-125 MG

Amoxicillin & K Clavulanate Tab ER 12HR 1000-62.5 MG

Ampicillin Cap 500 MG

Cefdinir For Susp 250 MG/5ML

Cefixime Cap 400 MG

Cefprozil Tab 500 MG

Cephalexin Cap 750 MG

Cephalexin Tab 250 MG

Cephalexin Tab 500 MG

Ciprofloxacin For Oral Susp 500 MG/5ML (10%) (10 GM/100ML)

Clindamycin HCl Cap 75 MG

Clindamycin Palmitate HCl For Soln 75 MG/5ML (Base Equiv)

Clindamycin Phosphate Vaginal Cream 2%

Clotrimazole Troche 10 MG

Dicloxacillin Sodium Cap 250 MG

Dicloxacillin Sodium Cap 500 MG

Doxycycline Hyclate Cap 50 MG

Doxycycline Monohydrate Cap 100 MG

Doxycycline Monohydrate Tab 100 MG

Doxycycline Monohydrate Tab 50 MG

Doxycycline Monohydrate Tab 75 MG

Erythromycin Ethylsuccinate For Susp 400 MG/5ML

Erythromycin Tab 250 MG

Erythromycin Tab 500 MG

Erythromycin Tab Delayed Release 250 MG

Erythromycin Tab Delayed Release 333 MG

Minocycline HCl Cap 100 MG

Moxifloxacin HCl Tab 400 MG (Base Equiv)

Nitrofurantoin Macrocrystalline Cap 100 MG

Nitrofurantoin Macrocrystalline Cap 25 MG

Nitrofurantoin Macrocrystalline Cap 50 MG

Ofloxacin Tab 400 MG

Penicillin V Potassium For Soln 125 MG/5ML *

Penicillin V Potassium For Soln 250 MG/5ML *

Sulfamethoxazole-Trimethoprim Susp 200-40 MG/5ML

Terconazole Vaginal Cream 0.8%

Tetracycline HCl Cap 250 MG

Tetracycline HCl Cap 500 MG

Tinidazole Tab 250 MG

Tinidazole Tab 500 MG

Asthma

Acetylcysteine Inhal Soln 10%

Acetylcysteine Inhal Soln 20%

Albuterol Sulfate Soln Nebu 0.5% (5 MG/ML)

Epinephrine HCl Nasal Soln 0.1%

Formoterol Fumarate Soln Nebu 20 MCG/2ML

Ipratropium Bromide HFA Inhal Aerosol 17 MCG/ACT

Levalbuterol HCl Soln Nebu Conc 1.25 MG/0.5ML (Base Equiv)

Sodium Chloride Soln Nebu 0.9%

Sodium Chloride Soln Nebu 10%

Sodium Chloride Soln Nebu 3%

Sodium Chloride Soln Nebu 7%

Umeclidinium Br Aero Powd Breath Act 62.5 MCG/ACT (Base Eq)

Blood Pressure

Amlodipine Besylate-Valsartan Tab 10-160 MG

Amlodipine Besylate-Valsartan Tab 10-320 MG

Amlodipine Besylate-Valsartan Tab 5-160 MG

Amlodipine Besylate-Valsartan Tab 5-320 MG

Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-160-12.5 MG

Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-160-25 MG

Amlodipine-Valsartan-Hydrochlorothiazide Tab 10-320-25 MG

Amlodipine-Valsartan-Hydrochlorothiazide Tab 5-160-12.5 MG

Amlodipine-Valsartan-Hydrochlorothiazide Tab 5-160-25 MG

Benazepril & Hydrochlorothiazide Tab 5-6.25 MG

Bisoprolol & Hydrochlorothiazide Tab 10-6.25 MG

Bisoprolol & Hydrochlorothiazide Tab 2.5-6.25 MG

Bisoprolol Fumarate Tab 10 MG

Captopril Tab 100 MG

Captopril Tab 12.5 MG

Carvedilol Phosphate Cap ER 24HR 10 MG

Carvedilol Phosphate Cap ER 24HR 20 MG

Carvedilol Phosphate Cap ER 24HR 40 MG

Carvedilol Phosphate Cap ER 24HR 80 MG

Enalapril Maleate Oral Soln 1 MG/ML

Fosinopril Sodium & Hydrochlorothiazide Tab 10-12.5 MG

Fosinopril Sodium & Hydrochlorothiazide Tab 20-12.5 MG

Metoprolol & Hydrochlorothiazide Tab 100-25 MG

Metoprolol & Hydrochlorothiazide Tab 100-50 MG

Metoprolol & Hydrochlorothiazide Tab 50-25 MG

Nadolol Tab 80 MG

Nebivolol HCl Tab 10 MG (Base Equivalent)

Nebivolol HCl Tab 2.5 MG (Base Equivalent)

Nebivolol HCl Tab 20 MG (Base Equivalent)

Nebivolol HCl Tab 5 MG (Base Equivalent)

Nifedipine Cap 10 MG

Nifedipine Cap 20 MG

Nifedipine Tab ER 24HR 90 MG

Nifedipine Tab ER 24HR Osmotic Release 90 MG

Olmesartan-Amlodipine-Hydrochlorothiazide Tab 20-5-12.5 MG

Prazosin HCl Cap 5 MG

Propranolol HCl Cap ER 24HR 120 MG

Propranolol HCl Cap ER 24HR 160 MG

Propranolol HCl Oral Soln 40 MG/5ML

Propranolol HCl Tab 60 MG

Propranolol HCl Tab 80 MG

Telmisartan-Hydrochlorothiazide Tab 40-12.5 MG

Telmisartan-Hydrochlorothiazide Tab 80-25 MG

Trandolapril Tab 2 MG

Valsartan Tab 160 MG

Valsartan-Hydrochlorothiazide Tab 320-12.5 MG

Valsartan-Hydrochlorothiazide Tab 320-25 MG

Cardiac

Amlodipine Besylate-Atorvastatin Calcium Tab 10-10 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 10-20 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 10-40 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 10-80 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 2.5-10 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 2.5-20 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 2.5-40 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 5-10 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 5-20 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 5-40 MG

Amlodipine Besylate-Atorvastatin Calcium Tab 5-80 MG

Clopidogrel Bisulfate Tab 300 MG (Base Equiv)

Isosorbide Dinitrate Tab 10 MG

Isosorbide Dinitrate Tab 20 MG

Isosorbide Dinitrate Tab 30 MG

Isosorbide Dinitrate Tab 40 MG

Isosorbide Dinitrate-Hydralazine HCl Tab 20-37.5 MG

Minoxidil Tab 10 MG

Nitroglycerin Oint 2%

Cholesterol

Cholestyramine Light Powder Packets 4 GM

Cholestyramine Powder Packets 4 GM

Choline Fenofibrate Cap DR 135 MG (Fenofibric Acid Equiv)

Fenofibrate Micronized Cap 130 MG

Fenofibrate Micronized Cap 43 MG

Fenofibrate Tab 120 MG

Fenofibrate Tab 40 MG

Niacin Tab ER 1000 MG (Antihyperlipidemic)

Niacin Tab ER 750 MG (Antihyperlipidemic)

Omega-3-acid Ethyl Esters Cap 1 GM

Pitavastatin Calcium Tab 1 MG

Pitavastatin Calcium Tab 2 MG

Pitavastatin Calcium Tab 4 MG

Cough

Benzonatate Cap 150 MG

Benzonatate Cap 200 MG

Dermatology

Adapalene Cream 0.1%

Azelaic Acid Gel 15%

Calcipotriene Cream 0.005%

Calcipotriene Oint 0.005%

Clindamycin Phosph-Benzoyl Peroxide (Refrig) Gel 1.2 ①-5%

Ivermectin Cream 1%

Permethrin Cream 5%

Selenium Sulfide Shampoo 2.3%

Sulfacetamide Sodium Lotion 10% (Acne)

Sulfacetamide Sodium w/ Sulfur Lotion 10-5%

Tazarotene Cream 0.05%

Tazarotene Cream 0.1%

Tazarotene Gel 0.05%

Tazarotene Gel 0.1%

Tretinoin Cream 0.1%

Tretinoin Gel 0.01%

Tretinoin Gel 0.025%

Tretinoin Gel 0.05%

Diabetes

Acarbose Tab 100 MG

Acarbose Tab 25 MG

Acarbose Tab 50 MG

Glucagon (rDNA) For Inj Kit 1 MG

Glyburide-Metformin Tab 1.25-250 MG

Insulin Aspart Inj Soln 100 Unit/ML *

Insulin Aspart Prot & Aspart (Human) Inj 100 Unit/ML (70-30) *

Insulin Aspart Prot & Aspart Sus Pen-inj 100 Unit/ML (70-30) *

Insulin Aspart Soln Cartridge 100 Unit/ML *

Insulin Aspart Soln Pen-injector 100 Unit/ML *

Insulin Glargine Soln Pen-Injector 100 Unit/ML *

Insulin Glargine-yfgn Inj 100 Unit/ML *

Insulin Glargine-yfgn Soln Pen-Injector 100 Unit/ML *

Insulin Lispro Inj Soln 100 Unit/ML *

Insulin Lispro Prot & Lispro Inj 100 Unit/ML (75-25) *

Insulin Lispro Prot & Lispro Sus Pen-inj 100 Unit/ML (50-50) *

Insulin Lispro Prot & Lispro Sus Pen-inj 100 Unit/ML (75-25) *

Insulin Lispro Soln Cartridge 100 Unit/ML *

Insulin Lispro Soln Pen-injector 100 Unit/ML (0.5 Unit Dial) *

Insulin Lispro Soln Pen-injector 100 Unit/ML (1 Unit Dial) *

Insulin Lispro Soln Pen-injector 200 Unit/ML *

Insulin NPH (Human) (Isophane) Inj 100 Unit/ML *

Insulin NPH (Human) (Isophane) Susp Pen-injector 100 Unit/ML *

Insulin NPH & Regular Susp Pen-Inj 100 Unit/ML (70-30) *

Insulin NPH Isophane & Regular Human Inj 100 Unit/ML (70-30) *

Insulin Regular (Human) Inj 100 Unit/ML *

Insulin Regular (Human) Inj 500 Unit/ML *

Insulin Regular (Human) Soln Pen-Injector 100 Unit/ML *

Insulin Regular (Human) Soln Pen-Injector 500 Unit/ML *

Liraglutide Soln Pen-injector 18 MG/3ML (6 MG/ML)

Metformin HCl Tab ER 24HR Modified Release 1000 MG

Metformin HCl Tab ER 24HR Osmotic 1000 MG

Metformin HCl Tab ER 24HR Osmotic 500 MG

Nateglinide Tab 120 MG

Nateglinide Tab 60 MG

Pioglitazone HCl-Glimepiride Tab 30-2 MG

Pioglitazone HCl-Glimepiride Tab 30-4 MG

Saxagliptin HCl Tab 2.5 MG (Base Equiv)

Saxagliptin-Metformin HCl Tab ER 24HR 2.5-1000 MG

Saxagliptin-Metformin HCl Tab ER 24HR 5-1000 MG

Saxagliptin-Metformin HCl Tab ER 24HR 5-500 MG

Diuretics

Spirolactone & Hydrochlorothiazide Tab 25-25 MG

Spirolactone Susp 25 MG/5ML

Ear Drops

Hydrocortisone w/ Acetic Acid Otic Soln 1-2%

Neomycin-Polymyxin-HC Otic Susp 3.5 MG/ML-10000 Unit/ML-1%

Eye Drops

Bacitracin Ophth Oint 500 Unit/GM

Bepotastine Besilate Ophth Soln 1.5%

Bimatoprost Ophth Soln 0.03%

Brimonidine Tartrate Ophth Soln 0.1%

Brimonidine Tartrate Ophth Soln 0.2%

Brimonidine Tartrate-Timolol Maleate Ophth Soln 0.2-0.5%

Brinzolamide Ophth Susp 1%

Bromfenac Sodium Ophth Soln 0.07% (Base Equivalent)

Bromfenac Sodium Ophth Soln 0.075% (Base Equivalent)

Bromfenac Sodium Ophth Soln 0.09% (Base Equiv) (Once-Daily)

Dexamethasone Sodium Phosphate Ophth Soln 0.1%

Diclofenac Sodium Ophth Soln 0.1%

Difluprednate Ophth Emulsion 0.05%

Gentamicin Sulfate Ophth Soln 0.3%

Levobunolol HCl Ophth Soln 0.5%

Loteprednol Etabonate Ophth Gel 0.5%

Loteprednol Etabonate Ophth Susp 0.2%

Loteprednol Etabonate Ophth Susp 0.5%

Neomycin-Bacitrac Zn-Polymyx 5(3.5)MG-400Unt-10000Unt Op Oin

Neomycin-Polymyxin-Dexamethasone Ophth Oint 0.1%

Neomycin-Polymyxin-Dexamethasone Ophth Susp 0.1%

Neomycin-Polymyxin-HC Ophth Susp

Olopatadine HCl Ophth Soln 0.2% (Base Equivalent)

Prednisolone Acetate Ophth Susp 1%

Sulfacetamide Sodium Ophth Soln 10%

Tafluprost Preservative Free (PF) Ophth Soln 0.0015%

Timolol Maleate Ophth Gel Forming Soln 0.25%

Timolol Maleate Ophth Gel Forming Soln 0.5%

Timolol Maleate Ophth Soln 0.5% (Once-Daily)

Timolol Maleate Preservative Free Ophth Soln 0.25%

Timolol Maleate Preservative Free Ophth Soln 0.5%

Timolol Ophth Soln 0.5%

Tobramycin-Dexamethasone Ophth Susp 0.3-0.1%

Travoprost Ophth Soln 0.004% (Benzalkonium Free) (BAK Free)

Tropicamide Ophth Soln 0.5%

Tropicamide Ophth Soln 1%

Gout

Colchicine Cap 0.6 MG

Colchicine w/ Probenecid Tab 0.5-500 MG

Febuxostat Tab 40 MG

Febuxostat Tab 80 MG

Probenecid Tab 500 MG

Men's Health

Dutasteride-Tamsulosin HCl Cap 0.5-0.4 MG

Sildenafil Cap 4 MG

Sildenafil Cap 8 MG

Tadalafil Tab 20 MG

Mental Health

Hydroxyzine HCl Syrup 10 MG/5ML

Migraines

- Dihydroergotamine Mesylate Nasal Spray 4 MG/ML
- Frovatriptan Succinate Tab 2.5 MG (Base Equivalent)
- Naratriptan HCl Tab 2.5 MG (Base Equiv)
- Rizatriptan Benzoate Oral Disintegrating Tab 10 MG (Base Eq)
- Rizatriptan Benzoate Oral Disintegrating Tab 5 MG (Base Eq)
- Rizatriptan Benzoate Tab 5 MG (Base Equivalent)
- Sumatriptan Nasal Spray 20 MG/ACT
- Sumatriptan Nasal Spray 5 MG/ACT
- Zolmitriptan Nasal Spray 5 MG/Spray Unit
- Zolmitriptan Orally Disintegrating Tab 2.5 MG
- Zolmitriptan Orally Disintegrating Tab 5 MG
- Zolmitriptan Tab 2.5 MG

Medical Supplies

- *Injection Device - Kit***
- Filter Needle 18 x 1-1/2"
- Insulin Pen Needle 29 G X 12.7 MM (1/2")
- Insulin Pen Needle 29 G X 5 MM (1/5" or 3/16")
- Insulin Pen Needle 31 G X 5 MM (1/5" or 3/16")
- Insulin Pen Needle 31 G X 6 MM (1/4" or 15/64")
- Insulin Pen Needle 31 G X 8 MM (1/3" or 5/16")
- Insulin Pen Needle 32 G X 4 MM (1/6" or 5/32")
- Insulin Syringe/Needle U-100 0.3 ML 29 x 1/2"
- Insulin Syringe/Needle U-100 0.3 ML 30 x 1/2"
- Insulin Syringe/Needle U-100 0.3 ML 30 x 5/16"
- Insulin Syringe/Needle U-100 0.3 ML 31 x 5/16"
- Insulin Syringe/Needle U-100 1 ML 28 x 1/2"
- Insulin Syringe/Needle U-100 1 ML 29 x 1/2"
- Insulin Syringe/Needle U-100 1 ML 30 x 5/16"

- Insulin Syringe/Needle U-100 1 ML 31 x 5/16"
- Insulin Syringe/Needle U-100 1/2 ML 28 x 1/2"
- Insulin Syringe/Needle U-100 1/2 ML 29 x 1/2"
- Insulin Syringe/Needle U-100 1/2 ML 30 x 5/16"
- Insulin Syringe/Needle U-100 1/2 ML 31 x 5/16"
- Insulin Syringe/Needle U-500 0.5 ML 31G x 6MM (15/64")
- Needle (Disp) 19 x 1"
- Needle (Disp) 20 x 1-1/2"
- Needle (Disp) 20 x 1"
- Needle (Disp) 22 x 3/4"
- Needle (Disp) 23 x 14" (350 MM)
- Syringe (Disposable) 12 ML
- Syringe (Disposable) 140 ML
- Syringe (Disposable) 20 ML
- Syringe (Disposable) 30 ML
- Syringe (Disposable) 35 ML
- Syringe (Disposable) 60 ML
- Syringe/Needle (Disp) 10 ML 19G x 1-1/2"
- Syringe/Needle (Disp) 12 ML 18 x 1"
- Syringe/Needle (Disp) 20 ML 19G x 1-1/2"

Muscle Relaxant

- Baclofen Tab 20 MG
- Baclofen Tab 5 MG
- Chlorzoxazone Tab 250 MG
- Chlorzoxazone Tab 375 MG
- Chlorzoxazone Tab 500 MG
- Chlorzoxazone Tab 750 MG
- Cyclobenzaprine HCl Tab 7.5 MG
- Methocarbamol Tab 1000 MG

Tizanidine HCl Cap 4 MG (Base Equivalent)

Tizanidine HCl Cap 6 MG (Base Equivalent)

Nausea

Granisetron HCl Tab 1 MG

Meclizine HCl Tab 25 MG

Meclizine HCl Tab 50 MG

Scopolamine TD Patch 72HR 1 MG/3DAYS

Pain

Dicyclomine HCl Oral Soln 10 MG/5ML

Dicyclomine HCl Tab 20 MG

Gabapentin (Once-Daily) Tab 600 MG

Oxybutynin Chloride Solution 5 MG/5ML

Tolterodine Tartrate Cap ER 24HR 2 MG

Tolterodine Tartrate Cap ER 24HR 4 MG

Tolterodine Tartrate Tab 1 MG

Steroid

Alclometasone Dipropionate Cream 0.05%

Betamethasone Dipropionate Augmented Oint 0.05%

Betamethasone Dipropionate Cream 0.05%

Betamethasone Dipropionate Lotion 0.05%

Betamethasone Dipropionate Oint 0.05%

Betamethasone Valerate Oint 0.1% (Base Equivalent)

Budesonide Inhalation Susp 1 MG/2ML

Budesonide Rectal Foam 2 MG/ACT

Calcipotriene-Betamethasone Dipropionate Oint 0.005-0.064%

Calcipotriene-Betamethasone Dipropionate Susp 0.005-0.064%

Clobetasol Propionate Emollient Base Cream 0.05%

Clobetasol Propionate Lotion 0.05%

Clobetasol Propionate Spray 0.05%

Desoximetasone Cream 0.05%

Desoximetasone Cream 0.25%

Desoximetasone Oint 0.05%

Desoximetasone Oint 0.25%

Dexamethasone Tab 0.5 MG

Dexamethasone Tab 0.75 MG

Dexamethasone Tab 1 MG

Dexamethasone Tab 2 MG

Dexamethasone Tab Therapy Pack 1.5 MG (21)

Diflorasone Diacetate Oint 0.05%

Fluticasone Propionate Aer Pow BA 100 MCG/ACT

Fluticasone Propionate Aer Pow BA 250 MCG/ACT

Fluticasone Propionate Aer Pow BA 50 MCG/ACT

Fluticasone Propionate Cream 0.05%

Fluticasone Propionate HFA Inhal Aer 110 MCG/ACT

Fluticasone Propionate HFA Inhal Aer 220 MCG/ACT

Fluticasone Propionate HFA Inhal Aero 44 MCG/ACT

Fluticasone Propionate Oint 0.005%

Halcinonide Cream 0.1%

Hydrocortisone Acetate Suppos 25 MG

Hydrocortisone Butyrate Lotion 0.1%

Hydrocortisone Cream 0.5%

Hydrocortisone Cream 1%

Hydrocortisone Liquid 1%

Methylprednisolone Tab 16 MG

Methylprednisolone Tab 32 MG

Methylprednisolone Tab 8 MG

Methylprednisolone Tab Therapy Pack 4 MG (21)

Mometasone Furoate Cream 0.1%

Mometasone Furoate Inhal Aerosol Suspension 100 MCG/ACT

Mometasone Furoate Inhal Aerosol Suspension 200 MCG/ACT

Mometasone Furoate Inhal Aerosol Suspension 50 MCG/ACT

Mometasone Furoate Inhal Powd 110 MCG/ACT (Breath Activated)

Mometasone Furoate Inhal Powd 220 MCG/ACT (Breath Activated)

Mometasone Furoate Nasal Susp 50 MCG/ACT

Mometasone Furoate Oint 0.1%

Mometasone Furoate Solution 0.1% (Lotion)

Prednisolone Sod Phosphate Oral Soln 5 MG/5ML (Base Equiv)

Prednisolone Tab 5 MG

Prednisone Tab Therapy Pack 10 MG (48)

Prednisone Tab Therapy Pack 5 MG (48)

Triamcinolone Acetonide Dental Paste 0.1%

Triamcinolone Acetonide Lotion 0.025%

Triamcinolone Acetonide Lotion 0.1%

Triamcinolone Acetonide Nasal Aerosol Suspension 55 MCG/ACT

Triamcinolone Acetonide Oint 0.05%

Thyroid

Thyroid Tab 120 MG (2 Grain)

Thyroid Tab 15 MG (1/4 Grain)

Thyroid Tab 30 MG (1/2 Grain)

Thyroid Tab 60 MG (1 Grain)

Thyroid Tab 90 MG (1 1/2 Grain)

Topicals

*Scar Treatment Products - Gel**

*Silicone Patch & Vitamin E-Silicone Liquid Kit**

Aluminum Chloride Soln 20%

Diclofenac Sodium (Actinic Keratoses) Gel 3%

Doxepin HCl Cream 5%

Gentamicin Sulfate Cream 0.1%

Gentamicin Sulfate Oint 0.1%

Lidocaine Anorectal Cream 5%

Lidocaine Cream 4%

Lidocaine HCl Cream 3%

Lidocaine HCl Cream 4%

Lidocaine HCl Lotion 3%

Lidocaine Oint 5%

Lidocaine Patch 4%

Lidocaine-Prilocaine Cream 2.5-2.5%

Mupirocin Calcium Cream 2%

Pimecrolimus Cream 1%

Salicylic Acid Gel 6%

Tacrolimus Oint 0.03%

Tacrolimus Oint 0.1%

Urea Lotion 40%

Vaccines

COVID-19 Subunit Vacc-Novavax IM Susp Pref Syr 5 MCG/0.5ML *

Hepatitis A Vaccine Inj Susp 25 Unit/0.5ML *

Hepatitis A Vaccine Inj Susp 50 Unit/ML *

Influenza Virus Vac Tiss-Cult Subunit IM Susp *

Influenza Virus Vacc Recombinant HA PF Soln Pref Syr 0.5 ML *

Poliovirus Vaccine, IPV Injection *

Vitamins

Calcium Acetate (Phosphate Binder) Cap 667 MG (169 MG Ca)

Cholecalciferol Cap 10 MCG (400 Unit)

Cholecalciferol Chew Tab 10 MCG (400 Unit)

Phytonadione Tab 5 MG

Potassium Chloride Microencapsulated Crys ER Tab 15 mEq

Potassium Phosphate Monobasic Tab 500 MG

Women's Health

*Condoms - Female***

*Condoms - Male***

*Diaphragm Arc-Spring***

*Diaphragms***

Cervical Cap 22 MM

Cervical Cap 26 MM

Cervical Cap 30 MM

Condoms Latex Lubricated

Desogest-Ethin Est Tab
0.1-0.025/0.125-0.025/0.15-0.025MG-MG

Desogestrel & Ethinyl Estradiol Tab 0.15 MG-30 MCG

Diaphragm Wide Seal 60 MM

Diaphragm Wide Seal 65 MM

Diaphragm Wide Seal 70 MM

Diaphragm Wide Seal 75 MM

Diaphragm Wide Seal 80 MM

Diaphragm Wide Seal 85 MM

Diaphragm Wide Seal 90 MM

Diaphragm Wide Seal 95 MM

Drospirenone Tab 4 MG

Estradiol Gel 0.06% (0.75 MG/1.25 GM Metered-Dose Pump)

Estradiol TD Gel 0.25 MG/0.25GM (0.1%)

Estradiol TD Gel 0.5 MG/0.5GM (0.1%)

Estradiol TD Gel 0.75 MG/0.75GM (0.1%)

Estradiol TD Gel 1 MG/GM (0.1%)

Estradiol TD Gel 1.25 MG/1.25GM (0.1%)

Estradiol Vaginal Tab 10 MCG

Estradiol Valerate-Dienogest Tab 3 MG /2-2 MG/2-3 MG/1 MG

Ethinodiol Diacetate & Ethinyl Estradiol Tab 1 MG-50 MCG

Levonor-Eth Est Tab 0.15-0.02/0.025/0.03 MG &Eth Est 0.01 MG

Levonorgestrel-Ethinyl Estradiol-FE Tab 0.1 MG-20 MCG (21)

Medroxyprogesterone Acetate IM Susp 150 MG/ML

Medroxyprogesterone Acetate IM Susp Prefilled Syr 150 MG/ML

Nonoxynol-9 Film 28%

Nonoxynol-9 Gel 3%

Nonoxynol-9 Gel 4%

Nonoxynol-9 Vaginal Sponge 1000 MG

Nonoxynol-9 Vaginal Suppos 100 MG

Norethin-Eth Estradiol-Fe Tab 1 MG-10 MCG (24)/10 MCG @

Norethindrone & Ethinyl Estradiol Tab 0.4 MG-35 MCG

Norethindrone & Ethinyl Estradiol Tab 0.5 MG-35 MCG

Norethindrone & Ethinyl Estradiol Tab 1 MG-35 MCG

Norethindrone Ac-Ethinyl Estrad-Fe Tab 1-20/1-30/1-35 MG-MCG

Norethindrone Ace-Ethinyl Estradiol-FE Tab 1 MG-20 MCG (24)

Norethindrone-Eth Estradiol Tab 0.5-35/0.75-35/1-35 MG-MCG

Norethindrone-Eth Estradiol Tab 0.5-35/1-35/0.5-35
MG-MCG

Norgestrel & Ethinyl Estradiol Tab 0.3 MG-30 MCG

Progesterone IM in Oil 50 MG/ML