



Over-the-Counter (OTC)

# Benefits



## Be sure to take advantage of your **OTC allowance.**

Your FHCP Medicare plan gives you a \$75 allowance every quarter for over-the-counter (OTC) items, such as vitamins and aspirin—at no cost to you.

### Start saving on your OTC items today:

- 1.** Select what you want to order from the enclosed catalog.
- 2.** Call 1-855-283-3785. We're open Monday through Friday, 8 a.m. to 11 p.m. Eastern time.
- 3.** Or, complete and mail the enclosed order form.

### Get the most out of your OTC allowance:

When you order by mail or phone, we apply your order amount to the quarter in which we receive it. If you mail your order form at the end of the quarter and we receive it at the start of the next quarter, we apply your order to the next quarter's benefit.

#### **Important Reminder:**

Your OTC allowance resets each quarter, and your balance from the previous quarter will not carry over.

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ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
<b>Allergy, Cold, Flu, Decongestant &amp; Sinus</b>				
1946	Allergy Relief Nasal Spray, 24-hr, Fluticasone Propionate	120 spray	50 mcg	\$25.00
1361	All-Nite Cold/Flu	4 oz	12.5 mg, 30 mg, 650 mg	\$6.00
1360	Cepacol Sore Throat Lozenges	16 ct	-	\$8.00
1090	Cetirizine HCL Allergy Relief	14 ct	10 mg	\$7.00
1426	Children's Dimaphen	4 oz	1 mg / 5 ml, 3 mg / 5 ml	\$7.00
1428	Children's Diphenhydramine HCL	4 oz	12.5 mg / 5 ml	\$6.00
1008	Chlorpheniramine Maleate Antihistamine	100 ct	4 mg	\$6.00
1166	Cough & Cold for High Blood Pressure	16 ct	-	\$7.00
1056	Cough Drops, Cherry	30 ct	5.8 mg	\$3.00
1182	Cough Drops, Sugar Free, Cherry	25 ct	5.8 mg	\$4.00
1834	Cough Drops, Menthol	30 ct	-	\$3.00
1054	Cough Syrup, Expectorant	4 oz	200 mg / 10 ml	\$6.00
1356	Cromolyn Sodium Allergy Nasal Spray	26 ml	-	\$16.00
1323	Diabetic Tussin DM	4 oz	-	\$10.00
1009	Diphenhydramine Antihistamine	24 ct	25 mg	\$6.00
1308	Diphenhydramine Antihistamine	100 ct	25 mg	\$7.00
1180	Guaifenesin Cough Expectorant	60 ct	200 mg	\$10.00
1611	Loratadine Allergy Relief	100 ct	10 mg	\$17.00
1178	Mucus Relief DM Expectorant & Cough Suppressant	30 ct	400 mg, 20 mg	\$11.00
1965	Mucus Relief DM Expectorant & Cough Suppressant, Extended Release	14 ct	1,200 mg, 60 mg	\$15.00
1357	Multi-Symptom Cold Formula	24 ct	10 mg, 5 mg, 325 mg	\$7.00
1091	Nasal Decongestant Spray, 12 Hour	1 oz	0.05%	\$6.00
1052	Nasal Spray, Saline	1.5 oz	0.65%	\$6.00
1792	Personal Steam Inhaler	1 ct	-	\$50.00
1176	Sore Throat Lozenges, Cherry	18 ct	-	\$6.50
1904	Sore Throat Spray, Cherry	6 oz	-	\$8.00
1352	Sudogest PE Nasal & Sinus Decongestant	36 ct	10 mg	\$6.00
1164	Vapor Rub	3.5 oz	4.7%, 1%	\$7.00
<b>Antacids &amp; Acid Reducers</b>				
1313	Alka-Seltzer	36 ct	-	\$10.00
1006	Antacid / Anti-Gas Liquid	12 oz	-	\$7.00
1346	Antacid Chewables	150 ct	500 mg	\$7.00
1314	Effervescent Pain Reliever	36 ct	-	\$7.50
1949	Esomeprazole Magnesium, 24-hr Delayed Release Acid Reducer *	42 ct	20 mg	\$22.00
1108	Famotidine Acid Reducer *	30 ct	10 mg	\$7.00
1970	Omeprazole Acid Reducer *	42 ct	20 mg	\$25.00
1966	Omeprazole Acid Reducer, Delayed Release, Dissolvable *	42 ct	20 mg	\$24.00
1900	Ranitidine Acid Reducer	30 ct	75 mg	\$8.50
1800	Simethicone Anti-Gas Chewables	100 ct	80 mg	\$9.00

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
<b>Anticandidal (yeast)</b>				
1115	Clotrimazole 7-Day Treatment Vaginal Cream (with applicator)	45 gm	1%	\$8.00
1117	Miconazole 3-Day Treatment Vaginal Cream (with applicator)	1 kit	2%	\$14.00
1119	Tioconazole 1-Day Treatment Vaginal Cream (with applicator)	1 ct	6.5%	\$20.00
<b>Anti-diarrheal, Laxatives &amp; Digestive Health</b>				
1316	Beano	30 ct	-	\$10.00
1128	Bisacodyl Enteric Coated Laxative	100 ct	5 mg	\$6.00
1045	Bismatrol Chewable Tablets	30 ct	262 mg	\$7.00
1969	ClearLax Unflavored Powder	8.3 oz	17 g	\$13.50
1126	Docusate Sodium Stool Softener	100 ct	100 mg	\$7.00
1733	Enema	4.5 oz	-	\$6.00
1124	Ex-Lax	8 ct	15 mg	\$8.00
1125	Glycerin Suppository	25 ct	2 gm	\$7.00
1067	Lactase Capsules	60 ct	9000 FCC Units	\$10.00
1133	Loperamide HCL Anti-Diarrheal *	12 ct	2 mg	\$6.00
1354	Methylcellulose Fiber Therapy	16 oz	-	\$13.00
1011	Milk of Magnesia	12 oz	400 mg	\$6.00
1340	Natural Vegetable Laxative	13 oz	-	\$10.00
1967	Natural Vegetable Laxative	30.4 oz	-	\$16.00
1968	Natural Vegetable Laxative, Sugar free	15 oz	-	\$13.00
1317	Pepto-Bismol Cherry	12 oz	525 mg / 30 ml	\$11.00
1318	Pink Bismuth	8 oz	525 mg / 30 ml	\$6.50
1012	Polycarbophil Fiber Tablets	90 ct	625 mg	\$11.00
1130	Senna Plus Stool Softener Plus Laxative	60 ct	8.6 mg, 50 mg	\$7.00
<b>Anti-fungal &amp; Anti-itch</b>				
1142	Bactine Solution	4 oz	-	\$10.00
1144	Caldyphen Clear Lotion Local Analgesic	6 oz	1%	\$8.00
1047	Clotrimazole Antifungal Athlete's Foot Cream	1.5 oz	1%	\$6.50
1140	Diphenhydramine HCL / Zinc Acetate Anti-Itch Cream	1 oz	-	\$6.00
1074	Hydrocortisone 1% Cream	1 oz	1%	\$6.00
1874	Medicated Antifungal Foot Powder Spray	4.6 oz	-	\$10.00
1135	Miconazole Nitrate 2% Antifungal Cream	1 oz	2%	\$7.00
1046	Terbinafine HCL Antifungal Cream	.5 oz	1%	\$12.00
1064	Tolnaftate Antifungal Cream	1.25 oz	1%	\$7.00
<b>Cold Sore &amp; Medicated Lip Products</b>				
1152	Abreva	2 gm	10%	\$25.00
1256	Blistex Lip Ointment	6 gm	-	\$5.00
1153	Herpecin-L Lip Balm	.1 oz	1%	\$10.00
1359	Releev Cold Sore Treatment	6 ml	0.13%	\$24.00

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
<b>Dental &amp; Denture Care</b>				
1817	Biotene Dry Mouth Oral Rinse	16 oz	-	\$13.00
1747	Denture Brush	1 ct	-	\$6.50
1032	Denture Cleaning Tablets	40 ct	-	\$6.50
1653	Efferdent Plus Mint Tablets	36 ct	-	\$8.00
1843	Effergrip Denture Cream Adhesive	2.5 oz	-	\$10.00
1187	Fixodent	.75 oz	-	\$6.50
1751	Interdental Flossups	90 ct	-	\$6.00
1454	Orajel Pain Relief	7 gm	20%	\$12.00
1286	Oral Pain Relief	.5 oz	20%	\$7.00
1324	Polident Denture Cream	3.9 oz	-	\$9.00
1892	Polident Overnight	84 ct	-	\$12.50
1455	Reach Waxed Dental Floss - Mint	55 yd	-	\$4.50
1746	Tongue Cleaner	1 ct	-	\$7.00
1413	Toothbrush, Colgate, Adult Soft	1 ct	-	\$3.00
1894	Toothbrush, Professional Care Electronic	1 ct	-	\$80.00
1450	Toothbrush, Rechargeable	1 ct	-	\$36.00
1948	Toothbrush, Soft 2-pack	2 ct	-	\$6.00
1412	Toothbrush, Tek Pro, Angled Soft	1 ct	-	\$3.00
1831	Toothpaste, Colgate	4 oz	-	\$6.00
1838	Toothpaste, Crest Sensi-Relief	4.1 oz	-	\$10.00
1414	Toothpaste, Pepsodent	5.5 oz	-	\$4.50
1716	Toothpaste, Ultrabrite Advanced Whitening	6 oz	-	\$6.00
1744	Water Jet	1 ct	-	\$40.00
1743	Water Jet Replacement Tips	5 ct	-	\$16.00
<b>Diabetes</b>				
1839	Diabetic Skin Relief Foot Cream	3.4 oz	-	\$16.00
1956	Diabetic Socks, Black, Medium 3-pack	3 pair	-	\$9.00
1957	Diabetic Socks, Black, Large 3-pack	3 pair	-	\$9.00
1958	Diabetic Socks, Black, X-Large 3-pack	3 pair	-	\$9.00
1953	Diabetic Socks, White, Medium 3-pack	3 pair	-	\$9.00
1954	Diabetic Socks, White, Large 3-pack	3 pair	-	\$9.00
1955	Diabetic Socks, White, X-Large 3-pack	3 pair	-	\$9.00
1959	Ultra Soft Padded Diabetic Sock, Black, Medium 2-pack	2 pair	-	\$11.00
1960	Ultra Soft Padded Diabetic Sock, Black, Large 2-pack	2 pair	-	\$11.00
1961	Ultra Soft Padded Diabetic Sock, Black, X-Large 2-pack	2 pair	-	\$11.00
1962	Ultra Soft Padded Diabetic Sock, White, Medium 2-pack	2 pair	-	\$11.00
1963	Ultra Soft Padded Diabetic Sock, White, Large 2-pack	2 pair	-	\$11.00
1964	Ultra Soft Padded Diabetic Sock, White, X-Large 2-pack	2 pair	-	\$11.00
<b>Ear Care</b>				
1742	Cotton Tipped Swabs	300 ct	-	\$6.00
1841	Ear Pain Relief Ear Drops	10 ml	-	\$13.00
1190	Ear Wax Removal Drops	15 ml	6.5%	\$6.00
1363	Ear Wax Removal System with Rubber Bulb	15 ml	6.5%	\$8.00
1910	Swim-Ear Ear Drops	1 oz	-	\$10.00

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
<b>Eye Care</b>				
1192	Artificial Tears Drops	.5 oz	-	\$6.00
1194	Artificial Tears Ointment	3.5 gm	-	\$8.00
1199	Clear Eyes Eye Drops	.2 oz	-	\$6.00
1196	Eye Wash Solution	4 oz	-	\$9.00
1468	Multi-Purpose Contact Lens Solution	4 oz	-	\$7.00
1061	Redness Relief Eye Drops	15 ml	0.05%	\$5.00
1905	Stye Eye Compress	1 ct	-	\$13.00
1906	Stye Eye Ointment	3.5 gm	-	\$13.00
<b>First Aid &amp; Medical Supplies</b>				
1344	Adhesive Bandages *	60 ct	-	\$6.00
1764	Adjustable Transfer Bench	1 ct	-	\$65.00
1803	After Bite Relief	.5 oz	-	\$9.00
1200	Alcohol Pads *	100 ct	70%	\$5.00
1808	Antiseptic Skin Cleanser	8 oz	-	\$11.00
1201	Antiseptic Towelettes	100 ct	-	\$7.00
1020	Bacitracin Ointment	1 oz	500 U / gm	\$7.00
1728	Bath Bench with Back	1 ct	-	\$70.00
1727	Bath Bench without Back	1 ct	-	\$55.00
1459	Bath Mat, Non-Skid	1 ct	-	\$17.00
1730	Bath Tub Safety Rail	1 ct	-	\$38.00
1223	Conforming Stretch Gauze Sterile Bandages - 3" x 4.1 yd *	12 ct	-	\$8.00
1763	Cotton Balls	200 ct	-	\$4.50
1669	Cotton Tipped Applicator - 6"	1000 ct	-	\$12.00
1836	CPAP Pillow Fiber Filled	1 ct	-	\$55.00
1837	CPAP Pillow Memory Foam	1 ct	-	\$85.00
1732	Cushion, Foam Ring	1 ct	-	\$22.00
1466	Cushion, Gel / Foam Seat	1 ct	-	\$26.00
1731	Cushion, Lumbar	1 ct	-	\$26.00
1207	Elastic Bandage - 2" x 4.5 yd *	1 ct	-	\$5.00
1209	Elastic Bandage - 3" x 5 yd *	1 ct	-	\$5.00
1211	Elastic Bandage - 4" x 5 yd *	1 ct	-	\$6.00
1213	Elastic Bandage - 6" x 5 yd *	1 ct	-	\$6.00
1846	Fast Freeze, Pain Relief Spray	4 oz	-	\$13.00
1947	First Aid Kit, 20 piece	1 ct	-	\$5.50
1215	First Aid Kit, 75 Pieces	1 ct	-	\$10.00
1738	First Aid Kit, 175 Pieces	1 ct	-	\$18.00
1726	Folding Cane Ergonomic Handle *	1 ct	-	\$22.00
1062	Hot/Cold Pack, 1 small & 1 large	1 ct	-	\$8.00
1795	Humidifier, Ultra-Sonic Cool Mist	1 ct	-	\$80.00
1228	Hydrogen Peroxide	16 oz	3%	\$5.50

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
1761	Ice Bag - 9"	1 ct	-	\$9.00
1796	Insect Repellant Spray - Deet	4 oz	30%	\$12.00
1868	Insect Repellant Spray - Deet	8 oz	30%	\$20.00
1229	Isopropyl Alcohol, Wintergreen	16 oz	70%	\$6.50
1798	Knurled Chrome Grab Bar - 12"	1 ct	-	\$20.00
1797	Knurled Chrome Grab Bar - 24"	1 ct	-	\$25.00
1202	Lantiseptic Skin Protectant Ointment	4 oz	50%	\$10.50
1872	Liquid Bandage	.45 oz	-	\$9.00
1326	Neosporin Plus	.5 oz	-	\$11.00
1840	Nitrile Exam Gloves	100 ct	-	\$10.00
1762	Pain Relief Mask	1 ct	-	\$8.50
1203	Povidone Iodine Solution Antiseptic	4 oz	-	\$7.00
1896	Procedural Face Masks with Earloops	50 ct	-	\$11.00
1777	Quad Cane, Small Base *	1 ct	-	\$25.00
1776	Quad Cane, Large Base *	1 ct	-	\$28.00
1729	Raised toilet seat	1 ct	-	\$36.00
1950	Raised toilet seat with arms	1 ct	-	\$70.00
1460	Shower Mat, Non-Skid	1 ct	-	\$15.00
1217	Tape, Paper Surgical - 1" x 10 yd *	1 ct	-	\$5.00
1218	Tape, Paper Surgical - 2" x 10 yd *	1 ct	-	\$6.00
1219	Tape, Silk Surgical - 1" x 10 yd *	1 ct	-	\$6.00
1220	Tape, Silk Surgical - 2" x 10 yd *	1 ct	-	\$7.00
1221	Tape, Transparent Surgical - 1" x 10 yd *	1 ct	-	\$5.00
1222	Tape, Transparent Surgical - 2" x 10 yd *	1 ct	-	\$6.00
1063	Thermometer, Digital 60 seconds	1 ct	-	\$7.00
1285	Thermometer, Digital Ear	1 ct	-	\$23.00
1697	Thermometer, Flexible Tip, Digital 10 seconds	1 ct	-	\$12.00
1925	Thermometer, Talking Ear and Forehead	1 ct	-	\$55.00
1779	Toilet Safety Rails	1 set	-	\$40.00
1014	Triple Antibiotic Ointment	1 oz	-	\$7.00
1781	Warm or Cold Water Bottle, Rubber Latex	1 ct	-	\$10.00
<b>Foot Care</b>				
1784	Bunion Guard	1 ct	-	\$12.00
1238	Callus Remover Pads	6 ct	-	\$7.00
1236	Corn Remover Pads	9 ct	-	\$7.00
1240	Medicated Foot Powder	5 oz	-	\$7.00
<b>Hemorrhoidal Preparations</b>				
1066	Hemorrhoidal Ointment	2 oz	-	\$8.00
1247	Hemorrhoidal Suppository	12 ct	-	\$7.00
1364	Pre-moist Hemorrhoid Pads	100 ct	-	\$8.00
1248	Preparation H Cream	26 gm	-	\$12.00
<b>Hormone Replacement</b>				
1737	DHEA ‡	50 ct	50 mg	\$12.00

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
<b>Incontinence Supplies</b>				
1300	A & D Ointment	2 oz	-	\$7.00
1303	Adult Briefs, Medium - 32" to 44" *	12 ct	-	\$9.00
1304	Adult Briefs, Large - 45" to 58" *	12 ct	-	\$13.00
1305	Adult Briefs, X-Large - 59" to 64" *	15 ct	-	\$14.00
1811	Attends Discreet Men's Guard	20 ct	-	\$15.00
1810	Attends Discreet Men's Shield	20 ct	-	\$14.00
1813	Attends Discreet Women's Moderate Bladder Control Pad	20 ct	-	\$18.00
1812	Attends Discreet Women's Maximum Bladder Control Pad	20 ct	-	\$20.00
1814	Attends Discreet Women's Ultimate Bladder Control Pad	20 ct	-	\$20.00
1815	Attends Discreet Women's Panty Liner	28 ct	-	\$14.00
1816	Attends Discreet Women's Ultrathin Pad	20 ct	-	\$14.00
1302	Barrier Cream	4 oz	-	\$9.00
1478	Bladder Control Shaped Pad, Moderate Absorbency *	24 ct	-	\$16.00
1479	Bladder Control Shaped Pad, Heavy Absorbency *	24 ct	-	\$17.00
1480	Bladder Control Shaped Pad, Maximum Absorbency *	18 ct	-	\$16.00
1021	Disposable Underwear, Medium - 34" to 44" *	20 ct	-	\$14.00
1026	Disposable Underwear, Large - 44" to 58" *	18 ct	-	\$14.00
1027	Disposable Underwear, X-Large - 58" to 68" *	14 ct	-	\$14.00
1928	Flushable Wipes	24 ct	-	\$7.50
1476	Underpad, Disposable - 23" x 24" *	50 ct	-	\$14.00
1299	Underpad, Disposable - 23" x 36" *	25 ct	-	\$11.00
1477	Underpad, Disposable - 30" x 30" *	10 ct	-	\$8.00
1348	Washcloth with Lanolin	64 ct	-	\$8.00
<b>In-Home Diagnostics</b>				
1253	Blood Pressure Monitor, Desktop Automatic ‡	1 ct	-	\$32.00
1503	Blood Pressure Monitor, Desktop Talking ‡	1 ct	-	\$33.00
1501	Blood Pressure Monitor, Wrist ‡	1 ct	-	\$21.00
1502	Blood Pressure Monitor, Wrist Talking ‡	1 ct	-	\$25.00
1416	EZ Detect Colon Cancer Test Kit ‡	1 ct	-	\$13.00
1505	Finger Pulse Oximeter ‡	1 ct	-	\$30.00
1771	Heart Rate Monitor Watch ‡	1 ct	-	\$40.00
1251	Home Access Cholesterol Test ‡	1 kit	-	\$26.00
1789	Peak Flow Meter ‡	1 ct	-	\$14.00
<b>Motion Sickness</b>				
1264	Dramamine Chewables, Orange	8 ct	50 mg	\$8.00
1263	Driminate Antiemetic	12 ct	50 mg	\$6.00
1366	Meclizine HCL Antiemetic	100 ct	12.5 mg	\$8.00

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ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
<b>Pain Relievers &amp; Fever Reducers</b>				
1001	Acetaminophen	100 ct	325 mg	\$6.00
1105	Acetaminophen	50 ct	500 mg	\$6.00
1600	Acetaminophen	100 ct	500 mg	\$10.00
1311	Arthritis Pain Reliever	100 ct	650 mg	\$13.00
1095	Aspirin	100 ct	325 mg	\$5.50
1096	Aspirin, Enteric Coated	100 ct	325 mg	\$6.00
1002	Aspirin, Enteric Coated, Low Dose	120 ct	81 mg	\$6.00
1802	Aspirin, Low Dose, Chewables	36 ct	81 mg	\$6.00
1367	Capsaicin External Analgesic	2 oz	0.025%	\$9.00
1423	Children's Acetaminophen Chewables	30 ct	80 mg	\$6.50
1421	Children's Ibuprofen	4 oz	100 mg / 5 ml	\$9.00
1944	Cold/Hot Menthol Medicated Patch	5 ct	5%	\$10.00
1861	Heating Pad, 12" X 15" *	1 ct	-	\$26.00
1942	Heating Pad, X-Large, 12" x 24" *	1 ct	-	\$36.00
1943	Heating Pad Wrap For Shoulder, Neck, and Back, 25" x 26" *	1 ct	-	\$55.00
1859	HeatWraps - Back & Hip	2 ct	-	\$13.00
1860	HeatWraps - Neck, Shoulder, & Wrist	3 ct	-	\$13.00
1004	Ibuprofen	100 ct	200 mg	\$7.00
1871	Lidocaine Patch	5 ct	4%	\$14.00
1365	Migraine Relief	100 ct	250 mg, 250 mg, 65 mg	\$8.00
1097	Naproxen	100 ct	220 mg	\$10.00
1332	Pain Reliever, PM - Extra Strength	100 ct	500 mg, 25 mg	\$10.00
1475	Pain Relieving Muscle Rub	2 oz	2.5%	\$6.00
1739	Salonpas Pain Relief Patches	5 ct	-	\$13.00
1912	Thermacare Lower Back & Hip	2 ct	-	\$15.00
1913	Thermacare Menstrual Relief	3 ct	-	\$15.00
1261	Wellpatch Migraine	4 ct	-	\$9.00
<b>Pediculicide (lice treatment)</b>				
1271	Lice Treatment Shampoo	4 oz	-	\$11.00
1269	Permethrin Lice Treatment	59 ml	1%	\$14.00
<b>Personal Care</b>				
1076	Acne Gel 10% Benzoyl Peroxide	1.5 oz	10%	\$7.00
1368	Ammonium Lactate Moisturizing Lotion	8 oz	12%	\$10.00
1065	Hand Sanitizer	8 oz	-	\$4.50
<b>Sleep Aids</b>				
1724	Nasal Strips, Medium	30 ct	-	\$13.00
1725	Nasal Strips, Large	30 ct	-	\$13.00
1276	Sleep Tablets	50 ct	25 mg	\$7.00
<b>Smoking Cessation</b>				
1372	Nicorelief Gum ‡	50 ct	4 mg	\$22.00
1281	Nicotine Lozenges ‡	72 ct	4 mg	\$45.00
1369	Nicotine Patch, Step 1 ‡	14 ct	21 mg / 24 hr	\$36.00

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
1370	Nicotine Patch, Step 2 ‡	14 ct	14 mg / 24 hr	\$36.00
1371	Nicotine Patch, Step 3 ‡	14 ct	7 mg / 24 hr	\$36.00
<b>Supportive Items</b>				
1225	Ankle Support	1 ct	-	\$9.00
1767	Arthritis Gloves, Small	1 pair	-	\$25.00
1766	Arthritis Gloves, Medium	1 pair	-	\$25.00
1765	Arthritis Gloves, Large	1 pair	-	\$25.00
1487	Back Support Elastic - 24" to 46"	1 ct	-	\$16.00
1488	Back Support Elastic with Lumbar	1 ct	-	\$26.00
1770	Carpal Tunnel Brace, Small	1 ct	-	\$25.00
1769	Carpal Tunnel Brace, Medium	1 ct	-	\$25.00
1768	Carpal Tunnel Brace, Large	1 ct	-	\$25.00
1398	Compression Knee High Socks, Men's Black, Medium (Shoe Size 8 - 10) ‡	1 pair	15 - 20 mmHg	\$17.00
1399	Compression Knee High Socks, Men's Black, Large (Shoe Size 10.5 - 12) ‡	1 pair	15 - 20 mmHg	\$17.00
1400	Compression Knee High Socks, Men's White, Medium (Shoe Size 8 - 10) ‡	1 pair	15 - 20 mmHg	\$17.00
1401	Compression Knee High Socks, Men's White, Large (Shoe Size 10.5 - 12) ‡	1 pair	15 - 20 mmHg	\$17.00
1409	Compression Knee High Socks, Women's Black, Small (Shoe Size 4-5)	1 pair	8 - 15 mmHg	\$12.00
1410	Compression Knee High Socks, Women's Black, Medium (Shoe Size 5.5 - 7.5)	1 pair	8 - 15 mmHg	\$12.00
1411	Compression Knee High Socks, Women's Black, Large (Shoe Size 8 - 10.5)	1 pair	8 - 15 mmHg	\$12.00
1406	Compression Knee High Socks, Women's Nude, Small (Shoe Size 4 - 5)	1 pair	8 - 15 mmHg	\$12.00
1407	Compression Knee High Socks, Women's Nude, Medium (Shoe Size 5.5 - 7.5)	1 pair	8 - 15 mmHg	\$12.00
1408	Compression Knee High Socks, Women's Nude, Large (Shoe Size 8 - 10.5)	1 pair	8 - 15 mmHg	\$12.00
1760	Deluxe Criss Cross Back Support, Small - 28" to 32"	1 ct	-	\$24.00
1759	Deluxe Criss Cross Back Support, Medium - 33" to 37"	1 ct	-	\$24.00
1758	Deluxe Criss Cross Back Support, Large - 38" to 42"	1 ct	-	\$24.00
1224	Elbow Support	1 ct	-	\$15.00
1774	Heel & Elbow Protector, Small	1 ct	-	\$14.00
1773	Heel & Elbow Protector, Medium	1 ct	-	\$14.00
1772	Heel & Elbow Protector, Large	1 ct	-	\$14.00
1775	Heel & Elbow Protector, X-Large	1 ct	-	\$14.00
1862	Hip Protector, Small	1 ct	-	\$38.00
1863	Hip Protector, Medium	1 ct	-	\$38.00
1864	Hip Protector, Large	1 ct	-	\$38.00
1865	Hip Protector, X-Large	1 ct	-	\$38.00

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
1465	Knee Stabilizer	1 ct	-	\$22.00
1481	Knee Support, Elastic, Small	1 ct	-	\$9.00
1482	Knee Support, Elastic, Medium	1 ct	-	\$9.00
1483	Knee Support, Elastic, Large	1 ct	-	\$9.00
1484	Knee Support, Elastic, Small with Stays	1 ct	-	\$15.00
1485	Knee Support, Elastic, Medium with Stays	1 ct	-	\$15.00
1486	Knee Support, Elastic, Large with Stays	1 ct	-	\$15.00
1463	Night Wrist Support Smart Glove	1 ct	-	\$26.00
1457	Rib Belt - Female (one size fits most)	1 ct	-	\$19.00
1456	Rib Belt - Male (one size fits most)	1 ct	-	\$19.00
1778	Thumb Brace	1 ct	-	\$20.00
1230	Wrist Splint	1 ct	-	\$17.00
1227	Wrist Support	1 ct	-	\$11.00
<b>Therapeutic Skin &amp; Sun Care</b>				
1070	Aloe Vera Cream	8 oz	-	\$6.00
1893	Moisturizing Body Lotion with Aloe	8 oz	-	\$8.00
1852	Scar Gel	50 gm	-	\$15.00
1284	Sunscreen Lotion SPF 30	3.5 oz	-	\$6.00
<b>Vitamins &amp; Minerals</b>				
1805	Airborne Immune Support Chewables ‡	32 ct	-	\$16.00
1820	Biotin Gummy ‡	60 ct	5,000 mcg	\$12.00
1373	Calcium + Vitamin D ‡	60 ct	600 mg / 400 IU	\$7.00
1823	Calcium + Vitamin D Gummy ‡	60 ct	500 mg, 1000 IU	\$14.00
1291	Calcium Carbonate Supplement Tablets ‡	60 ct	600 mg	\$6.00
1420	Centrum Silver Chewables ‡	60 ct	-	\$19.00
1422	Children's Multivitamin Chewables ‡	100 ct	-	\$8.00
1825	Chromium Picolinate ‡	100 ct	1000 mcg	\$12.00
1827	Cod Liver ‡	100 ct	-	\$10.00
1829	Coenzyme Q-10 ‡	30 ct	50 mg	\$13.00
1385	Daily Multiple Vitamin Tablets with Minerals ‡	100 ct	-	\$7.00
1393	Daily Multivitamin ‡	100 ct	-	\$7.00
1972	Daily Multivitamin Gummy ‡	120 ct	-	\$13.00
1375	Ferrous Gluconate Iron Supplement ‡	100 ct	240 mg	\$7.00
1376	Ferrous Sulfate Iron Supplement ‡	100 ct	325 mg	\$6.00
1155	Fiber Tablets ‡	60 ct	500 mg	\$10.00
1741	Fish Oil, Soft Gels ‡	60 ct	1000 mg	\$10.00
1849	Flaxseed ‡	100 ct	1000 mg	\$11.00
1850	Folic Acid ‡	100 ct	800 mcg	\$8.00
1003	Glucosamine / Chondroitin ‡	60 ct	250 mg, 200 mg	\$11.00
1114	Glucosamine Joint / Muscle ‡	60 ct	500 mg	\$9.00
1866	Immune Support Chewables ‡	50 ct	-	\$12.00
1417	Iron ‡	110 ct	27 mg	\$8.00
1870	Leg Cramps Pain Relief Caplets ‡	100 ct	-	\$17.00
1418	Magnesium ‡	110 ct	250 mg	\$7.00
1377	Magnesium Oxide ‡	100 ct	250 mg	\$7.50

ITEM #	PRODUCT DESCRIPTION	PACKAGING	STRENGTH	PRICE
1879	Melatonin ‡	100 ct	5 mg	\$10.00
1971	Melatonin Gummy ‡	120 ct	5 mg	\$13.00
1378	Niacin ‡	100 ct	100 mg	\$7.00
1394	Niacin ‡	100 ct	500 mg	\$7.00
1930	Niacin, No Flush ‡	60 ct	500 mg	\$15.00
1976	Omega & DHA Gummy ‡	120 ct	275 mg, 50 mg	\$14.00
1886	One Daily Men's Multivitamin ‡	100 ct	-	\$10.00
1887	One Daily Women's Multivitamin ‡	100 ct	-	\$10.00
1274	Prenatal Vitamins ‡	100 ct	-	\$9.00
1395	Rena-Vite ‡	100 ct	-	\$14.00
1392	Senior Multivitamin ‡	90 ct	-	\$10.00
1734	Stress Formula Tablets with Zinc ‡	60 ct	-	\$12.00
1379	Vitamin A ‡	100 ct	10,000 iu	\$7.00
1016	Vitamin B-1 ‡	100 ct	100 mg	\$7.00
1389	Vitamin B-12 ‡	100 ct	500 mcg	\$7.00
1381	Vitamin B-12 ‡	100 ct	1000 mcg	\$8.00
1380	Vitamin B-6 ‡	100 ct	50 mg	\$7.00
1388	Vitamin B-6 ‡	100 ct	100 mg	\$7.00
1382	Vitamin B-Complex ‡	100 ct	-	\$7.00
1915	Vitamin B-Complex Gummy ‡	70 ct	-	\$13.00
1017	Vitamin C ‡	100 ct	500 mg	\$7.00
1706	Vitamin C ‡	100 ct	1000 mg	\$14.00
1916	Vitamin C Gummy ‡	60 ct	250 mg	\$12.00
1383	Vitamin D ‡	100 ct	400 iu	\$7.00
1390	Vitamin D ‡	100 ct	1000 iu	\$7.00
1973	Vitamin D ‡	100 ct	5000 iu	\$10.00
1978	Vitamin D Gummy ‡	120 ct	2000 iu	\$13.00
1391	Vitamin E, Soft Gels ‡	100 ct	100 iu	\$7.00
1384	Vitamin E, Soft Gels ‡	100 ct	400 iu	\$10.00
1419	Zinc Chelated ‡	100 ct	50 mg	\$7.00
<b>Wart Remover</b>				
1288	Dr. Scholl's Wart Removal System	20 ct	-	\$13.00
1075	Wart Remover, Liquid	9 ml	17%	\$10.00
1289	Wartners Wart Removal System	1 ct	-	\$17.00
<b>Weight Loss</b>				
1735	Vitafusion Fiber Weight Management ‡	90 ct	-	\$17.50

\* Part B/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.



# Order guidelines

Your FHCP Medicare plan gives you a \$75 allowance every quarter for over-the-counter (OTC) items, such as vitamins and aspirin—at no cost to you.

## Order by mail.



You may place your order by mailing in the order form that comes with your catalog. **If you're getting close to the end of the quarter and you do not think your order form will be received in time, you can call in your order.**

## Order by phone.



If you have questions or would like to place an order over the phone, OTC Advocates are available Monday through Friday, 8 a.m. to 11 p.m. Eastern time, at 1-855-283-3785.

- For delivery, please allow 7 - 10 business days from the time your order is placed.
- You must use your full benefit amount in one order.
- 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.
- OTC products are intended for member use only to help with a health or medical need. FHCP Medicare prohibits the use of this benefit to order OTC items for family members and friends.
- Due to the personal nature of these products, returns are not accepted.
- Items in the 2019 OTC catalog may change throughout the year.
- For the most up-to-date listing of OTC products available, go to <http://www.fhcpmedicare.com/medicare/resources-and-tools/additional-benefits/>.
- OTC items are available through home delivery only. Products may not be purchased at a local retail pharmacy or through any source other than the FHCP Medicare OTC benefit channels listed above.

# NOTICES

- ✓ If you disenroll from your FHCP Medicare plan, your OTC benefit will automatically terminate.
- ✓ Language assistance services are available to you, free of charge. Call 1-833-866-6559 (TTY: 1-877-955-8773).
- ✓ The health information provided in the catalog is general in nature and is not medical advice or a substitute for professional health care.

# 2019 Over-the-Counter (OTC) Benefit

# Order Form

## STEP 1 - Complete your information below.

Member ID (found on plan member ID card)

 - 

Date of Birth

 /  / 

First Name

Last Name

MI

Street Number

Street Name

Apt/Suite #

City

State

Zip Code

 - 

Please check box if this is a new address

Daytime Phone

 -  - 

Email (Optional)

 @ 

## STEP 2 - Product Selection

Cash, checks, credit cards or money orders are not accepted under this Over-the-Counter (OTC) benefit.

Item #	Product Description	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"/>
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"/>

Please mail this completed form to the following address:

**OTC Servicing Center  
PO Box 267067  
Weston, FL 33236-9895**

Subtotal from Other Side \$  .

Total Order \$  .

If you place your order using an order form, your order total will be applied to the quarter 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 benefit for the third quarter, not your benefit for the second quarter.

## STEP 2 - Product Selection *(continued)*

Cash, checks, credit cards or money orders are not accepted under this Over-the-Counter (OTC) benefit.

Item #	Product Description	Quantity	Unit Price	TOTAL
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"/>
19	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>
20	<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 267067  
Weston, FL 33236-9895**

*If you place your order using an order form, your order total will be applied to the quarter 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 benefit for the third quarter, not your benefit for the second quarter.*



## Section 1557 Notification:

# DISCRIMINATION IS AGAINST THE LAW

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

FHCP Medicare:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - o Qualified sign language interpreters
  - o 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:
  - o Qualified Interpreters
  - o Information written in other languages

If you need these services, contact:

- FHCP Medicare : 1-833-866-6559

If you believe that FHCP Medicare 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:

### **FHCP Medicare**

Civil Rights Coordinator  
1340 Ridgewood Avenue,  
Holly Hill, FL 32117.  
Phone: 1-844-219-6137,  
TTY: 1-800-955-8770  
Fax: 386-676-7149,  
Email: [rights@fhcp.com](mailto:rights@fhcp.com)

You can file grievance in person or by mail, fax, or email. If you need help filing a grievance, the 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>.



**ATTENTION:** If you speak English, language assistance services, free of charge, are available to you. Call 1-833-866-6559. (TTY: 1-800-955-8770)

**ATENCIÓN:** si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-833-866-6559 (TTY: 1-800-955-8770).

**ATANSYON:** Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-833-866-6559 (TTY: 1-800-955-8770).

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-833-866-6559 (TTY: 1-800-955-8770).

**ATENÇÃO:** Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-833-866-6559 (TTY: 1-800-955-8770).

**注意:** 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-833-866-6559 (TTY: 1-800-955-8770)

**ATTENTION :** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-833-866-6559 (ATS : 1-800-955-8770).

**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-833-866-6559 (TTY: 1-800-955-8770).

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-833-866-6559 (телетайп: 1-800-955-8770).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-833-866-6559 (رقم هاتف الصم والبكم: 1-800-955-8770).

**ATTENZIONE:** In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-833-866-6559 (TTY: 1-800-955-8770).

**ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-833-866-6559 (TTY: 1-800-955-8770).

**주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-833-866-6559 (TTY: 1-800-955-8770)번으로 전화해 주십시오.

**UWAGA:** Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-833-866-6559 (TTY: 1-800-955-8770).

**સુચના:** જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-833-866-6559 (TTY: 1-800-955-8770).

**เรียน:** ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-833-866-6559 (TTY: 1-800-955-8770).



