



Medicare Advantage Prescription Drug Plans (Individual and Group),
Medicare Advantage Dual-Eligible Special Needs Plans (HMO D-SNP), and
Medicare Supplement Plans
2025 Over-The-Counter Items Benefit Frequently Asked Questions
Issued: October 2024

THIS DOCUMENT IS TO BE USED AS A TOOL ONLY TO VERBALLY
ANSWER QUESTIONS FROM PROSPECTIVE ENROLLEES OR
CURRENT MEMBERS. THIS DOCUMENT CANNOT BE DISTRIBUTED
TO EITHER PROSPECTIVE ENROLLEES OR CURRENT MEMBERS.

An Over-the-Counter (OTC) items benefit offered through CVS (dba OTC Health Solutions) is available to members enrolled in the following plans effective January 1, 2025:

- Medicare Supplement Plan G Extra
- Blue Shield Inspire (HMO) - in Los Angeles/Orange, Alameda/San Mateo, Santa Clara/San Joaquin/Stanslaus/Merced Counties
- Blue Shield 65 Plus (HMO) - in San Luis Obispo/Santa Barbara, Kern, and San Diego Counties
- Blue Shield 65 Plus Choice Plan (HMO) - in San Bernardino/Riverside Counties
- Blue Shield AdvantageOptimum Plan (HMO) - in Los Angeles/Orange, Counties
- Blue Shield AdvantageOptimum Plan I (HMO) - in San Diego County
- Blue Shield TotalDual Plan (HMO D-SNP) - in Los Angeles/San Diego and Orange/San Bernardino Counties
- Blue Shield Inspire (HMO D-SNP) - in San Joaquin/Merced/Stanslaus Counties
- Blue Shield Select (PPO) - in Alameda and Orange/San Diego Counties
- Blue Shield Medicare (PPO) – applies to select employer groups; refer to the employer group's Evidence of Coverage

1. What's the OTC items benefit?

The OTC items benefit offers members a convenient way to obtain over-the-counter health and wellness products by mail. Depending on the plan in which they're enrolled, members will have either a quarterly or monthly allowance (a set amount) to purchase eligible OTC items. Members must order from a list of approved OTC items, and CVS OTC Health Solutions will mail the items directly to the member's preferred address at no extra charge to the member.

Members can view the OTC Items Catalog for a full list of approved OTC items online at blueshieldca.com/medicareotc. Please refer to each plan's Summary of Benefits or Evidence of Coverage for the OTC items allowance amount. Additional limitations apply (see# 6-8 below).

2. Are members required to have separate ID cards to obtain OTC items benefits?

No, a separate ID card is not required. Members must provide their Blue Shield member ID number when ordering online or by phone.

3. Do members who have household savings Medicare Supplement plan each get their own OTC items benefit allowance, or do they share their benefit allowance?

Each member on a Household Savings Medicare Supplement plan with the OTC items benefit receive their own quarterly allowance.

4. How does a member access the OTC items benefit?

Eligible OTC items are listed in the OTC Items Catalog. There are two ways to place an order:

- By creating an account online: For Blue Shield MAPD and Medicare Supplement plans, use: blueshieldca.com/medicareOTC
- By phone at (888) 628-2770 (TTY: 711) from 9 a.m. to 8 p.m. (Pacific Time), Monday through Friday.

Important notes:

- Upon Log in/Registration, the member should only enter the numeric values of their Blue Shield of California member ID.
- Mail order forms for OTC items are not available. Members must place their order using one of the options listed above.
- In-store pick up is not available.

- For Medicare Supplement plan members who have one member ID and are on a Household Savings account, the subscriber should add suffix 00 to the end of the member ID. The other Household member should add suffix 01 to the end of the Member ID so that each member can access their OTC item allowance.

5. How much is the OTC items benefit allowance?

The OTC items benefit allowance varies by plan. See the plan's *Summary of Benefits* or *Evidence of Coverage* for the plan-specific benefit allowance amount.

6. How often can members use their OTC items benefit?

Order limits vary by plan. See the plan's *Summary of Benefits* or *Evidence of Coverage* for the plan-specific order limits.

Each order can include multiple items but cannot exceed the benefit allowance amount. Quantity limits of any single item per transaction may apply. There are select products that have special limits; these are marked by an asterisk * in the OTC Items Catalog.

7. Can unused allowance carry over to the next allowance period?

No, the unused allowance does not carry over or roll over.

8. Can members order more than the benefit allowance?

No, members may not order more than the benefit allowance amount. If the member exceeds the benefit amount when placing an order online, or via phone, the order will not be processed until items exceeding the benefit amount have been removed.

9. How long will it take for members to receive their OTC items?

It may take up to 7 business days for members to receive their orders.

10. What is the return policy?

If members receive a damaged item or haven't received their order, they should contact CVS OTC Health Solutions, at (888) 628-2770 (TTY: 711) from 9 a.m. to 8 p.m. (Pacific Time), Monday through Friday, within 30 days of placing their order. An item of similar or greater value may be

substituted in their order if an item is out of stock. No other returns or exchanges are allowed.

11. Is a catalog available for members?

The OTC Items Catalog is available in English, Spanish, Chinese, Korean, and Vietnamese languages for members to access via the website at blueshieldca.com/medicareotc. Throughout the year, members can request a hard copy of the catalog in any of these languages by calling CVS OTC Health Solutions at **(888) 628-2770 (TTY: 711)** from 9 a.m. to 8 p.m. Pacific Time, Monday through Friday.

12. Are interpreter services available?

The CVS OTC Health Solutions call center offers telephone interpreter services. Members can access these services by calling **(888) 628-2770 (TTY: 711)** from 9 a.m. to 8 p.m. Pacific Time, Monday through Friday.

13. Where can members call for additional questions about their OTC items benefit?

Members may call CVS OTC Health Solutions at **(888) 628-2770 (TTY: 711)** from 9 a.m. to 8 p.m. Pacific Time, Monday through Friday.

14. What's new for the Over-the-Counter items benefit in 2025?

The product list is reviewed annually. For 2025, the following new products were added: Sheet protector, nail clippers, medicated wipes, large pill boxes, and sunscreen, to name a few. Please refer to the OTC Items Catalog to see a comprehensive list of products covered in 2025 at blueshieldca.com/medicareotc.

15. Why is my benefit allowance less than last year?

The benefit allowance is less than last year because the overall cost of health care continues to rise at an increased pace for some plans over

others. The rise in costs can be driven by higher pricing set by manufacturers and higher utilization of the Over-the-Counter items benefit. These reasons impact the Over-the-Counter items allowance put forth by Medicare Advantage plans like Blue Shield and others.

For Medicare Supplement Plan G Extra, the OTC items allowance was not reduced for 2025.