



Louisiana

Blue Advantage (HMO) | Blue Advantage (PPO)

2021

Over-the-Counter (OTC) Benefit Catalog

Get over-the-counter products every quarter at
NO COST TO YOU!



REMEMBER TO KEEP THIS CATALOG. You will want to reference this catalog each time you place your order.

Please check with your healthcare provider before taking OTC medicines.

Blue Cross and Blue Shield of Louisiana HMO offers Blue Advantage (HMO). Blue Cross and Blue Shield of Louisiana, an independent licensee of the Blue Cross and Blue Shield Association, offers Blue Advantage (PPO).

Your 2021 over-the-counter (OTC) benefit is good for 50 credits per quarter at NO COST TO YOU!

UP TO A
\$200
VALUE
PER YEAR!

How Does it Work?

- » OTC items* can be mailed directly to your home at no cost to you.
- » Only one order per quarter is allowed.
- » Once your OTC order is made, please allow 10-14 business days from the date your order is placed for delivery. Due to the personal nature of these products, returns are not accepted.
- » Try to use all credits each quarter as benefit credits are not carried over to the next quarter and will not be rolled over to the following year.
- » Quarter 1 (January, February and March)
Quarter 2 (April, May and June)
Quarter 3 (July, August and September)
Quarter 4 (October, November and December)
- » For the most up-to-date listing of OTC products available, please visit www.BlueAdvantageOTC.com

**Items and credits listed are subject to change (shipping, handling, and sales tax are included, so there is no cost to you).*

How Do I Place an Order?



Call us Toll Free:
1-866-440-1350 TTY 711

The order line is open Monday through Friday from 7 a.m. to 6 p.m. CST.







-or-






Submit Online at
www.BlueAdvantageOTC.com

Then log in to your Member Portal.









Item	Description	Details	Credits
Analgesic & Pain Relievers			
01	 <p>ACETAMINOPHEN TABLETS <i>Compare to Tylenol® Extra Strength</i></p>	100 ct 500 mg	7
48	 <p>8 HR ARTHRITIS PAIN TABLETS <i>Compare to Tylenol® 8HR Arthritis Pain</i></p>	50 ct 650 mg	12
03	 <p>ASPIRIN CHEWABLE TABLETS <i>Compare to St. Joseph® Low Dose Aspirin</i></p>	36 ct 81 mg	4
67	 <p>ASPIRIN TABLETS <i>Compare to Genuine Bayer® Aspirin</i></p>	100 ct 325 mg	6
02	 <p>ASPIRIN TABLETS <i>Compare to Bayer® Low Dose</i></p>	100 ct 81 mg	6
04	 <p>IBUPROFEN TABLETS <i>Compare to Motrin® IB</i></p>	100 ct 200 mg	11

While we make every effort to ship the product pictured, we may have to substitute based on manufacturer availability.



Item	Description	Details	Credits
05	 <p>PAIN RELIEVING CAPLETS <i>Compare to Aleve®</i></p>	50 ct 220 mg	12
49	 <p>PAIN RELIEVING CREAM <i>Compare to Bengay®</i></p>	3 oz	8
71	 <p>URINARY PAIN RELIEF TABLETS</p>	12 ct 99.5 mg	13

Antacids, Heartburn, Gas Relief & Motion Sickness


09	 <p>ACID REDUCER TABLETS <i>Compare to Original Strength Pepcid® AC</i></p>	60 ct 10 mg	10
07	 <p>ANTACID LIQUID <i>Compare to Maalox® Advanced</i></p>	12 fl oz	13
06	 <p>ANTACID TABLETS <i>Compare to Tums®</i></p>	150 ct 500 mg	9

Item	Description	Details	Credits
08	 <p>CHEWABLE ANTI-GAS TABLETS <i>Compare to Mylanta® Anti-Gas Tablets</i></p>	100 ct 80 mg	9
10	 <p>HEARTBURN RELIEF TABLETS <i>Compare to Prilosec® OTC</i></p>	14 ct 20 mg	16
69	 <p>MECLIZINE ANTIEMETIC CAPLETS <i>Compare to Dramamine®</i></p>	100 ct 12.5 mg	12







Anti-Diarrheal








11	 <p>ANTI-DIARRHEAL LIQUID <i>Compare to Pepto-Bismol®</i></p>	8 fl oz	15
12	 <p>ANTI-DIARRHEAL TABLETS <i>Compare to Imodium® A-D</i></p>	12 ct 2 mg	5

Anti-Fungal







14	 <p>ANTIFUNGAL CREAM <i>Compare to Tinactin®</i></p>	0.5 oz 1%	5
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Item	Description	Details	Credits
13	 <p>VAGINAL CREAM <i>Compare to Gyne-Lotrimin® 7</i></p>	1.5 oz 1%	10
Anti-Hemorrhoidal			
15	 <p>HEMORRHOIDAL OINTMENT <i>Compare to Preparation-H®</i></p>	2 oz	11
Cough, Cold & Allergy			
16	 <p>ALLERGY TABLETS <i>Compare to Zyrtec®</i></p>	100 ct 10 mg	11
82	 <p>BENADRYL ALLERGY CAPSULES</p>	24 ct 25 mg	14
85	 <p>CORICIDIN HBP LIQUID GELS <i>for Chest Congestion & Cough</i></p>	20 ct	16
74	 <p>CORICIDIN HBP TABLETS <i>for Cold & Flu</i></p>	10 ct 325 mg	10




Item	Description	Details	Credits
17	 <p>COUGH SYRUP Compare to Robitussin® Mucus Chest Congestion</p>	4 fl oz	8
61	 <p>FLUTICASONE PROPIONATE NASAL SPRAY Compare to FLONASE®</p>	50 mcg Per Spray	25
20	 <p>HALLS® COUGH DROPS (CHERRY FLAVOR)</p>	30 ct	8
50	 <p>HALLS® COUGH DROPS SUGAR FREE (HONEY LEMON FLAVOR)</p>	25 ct	8
60	 <p>LORATADINE - ANTIHISTAMINE TABLETS Compare to CLARITIN®</p>	100 ct 10 mg	12
18	 <p>MUCUS RELIEF TABLETS Compare to Mucinex® Tablets</p>	60 ct 400 mg	10
19	 <p>SUGAR FREE COUGH LIQUID Compare to Robitussin® Sugar Free</p>	4 fl oz	14

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Item	Description	Details	Credits
Eye & Ear Care			
84	 <p>CLEAR EYES TRIPLE ACTION EYE DROPS</p>	0.5 fl oz	10
22	 <p>EARWAX DROPS <i>Compare to Debrox®</i></p>	0.5 fl oz	10
68	 <p>HEALTHY EYE TABLETS with LUTEIN <i>Compare to Ocuvite® with Lutein</i></p>	60 ct	9
First Aid			
25	 <p>CURAD® BANDAGES - SHEER</p>	80 ct	7
90	 <p>FIRST AID KIT <i>Compare to Johnson & Johnson®</i></p>	70 items	13
23	 <p>HYDROCORTISONE • 10 CREAM <i>Compare to Cortizone 10®</i></p>	1 oz 1%	5








Item	Description	Details	Credits
91	 <p>HYDROGEN PEROXIDE</p>	8 fl oz	6
24	 <p>TRIPLE ANTIBIOTIC OINTMENT <i>Compare to Neosporin®</i></p>	1 oz	7







Laxative, Stool & Constipation Relief








28	 <p>FIBER SUPPLEMENT - SUGAR FREE (ORANGE FLAVOR) <i>Compare to Metamucil®</i></p>	10 oz	13
27	 <p>LAXATIVE POWDER <i>Compare to MiraLAX®</i></p>	4.1 oz	10
26	 <p>LAXATIVE SOFTGELS <i>Compare to Surfak®</i></p>	100 ct 240 mg	16








Oral Care

83	 <p>BIOTENE ORAL RINSE</p>	8 fl oz	12
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Item	Description	Details	Credits
52	 BLISTEX® MEDICATED LIP BALM	.15 oz	4
32	 CREST® TOOTHPASTE	4.6 oz	8
75	 DENTURE BRUSH	QTY: 1	8
30	 EFFERDENT® TABLETS	44 ct	10
94	 REACH® MINT WAXED FLOSS	55 yd	4
77	 REACH® TOOTHBRUSH	QTY: 1	4
29	 SUPER POLIGRIP® EXTRA CARE	2.2 oz	14

Item	Description	Details	Credits
76	 TONGUE CLEANER	QTY: 1	5
Personal Care			
63	 ADULT BRIEFS - SIZES SMALL / MEDIUM (34" - 46" waist) <i>Compare to Depends®</i>	QTY: 20	29
64	 ADULT BRIEFS - SIZE LARGE (44" - 54" waist) <i>Compare to Depends®</i>	QTY: 18	29
65	 ADULT BRIEFS - SIZE X-LARGE (48" - 66" waist) <i>Compare to Depends®</i>	QTY: 14	29
38	 ALCOHOL SWABS <i>Compare to BD® Alcohol Swabs</i>	100 ct	6
37	 BABY SHAMPOO <i>Compare to Johnson's® Baby Shampoo</i>	15 fl oz	15

Item	Description	Details	Credits
100	 <p>BLADDER CONTROL PADS - HEAVY</p>	QTY: 16	10
95	 <p>BLOOD PRESSURE MONITOR ADULT WRIST CUFF</p>	1 ct	50
35	 <p>CHEWABLE GLUCOSE TABLETS (RASPBERRY FLAVOR) <i>Compare to Dex 4® Fast Acting Glucose</i></p>	10 ct 4 g	5
86	 <p>COTTONELLE® FLUSHABLE WIPES</p>	42 ct	10
89	 <p>COTTON SWABS <i>Compare to Q-TIPS®</i></p>	170 ct	4
36	 <p>DANDRUFF SHAMPOO <i>Compare to Selsun Blue® Dandruff Shampoo</i></p>	7 fl oz	12
80	 <p>DIGITAL THERMOMETER</p>	QTY: 1	14








Item	Description	Details	Credits
103	 <p>DISPOSABLE FACE MASKS</p>	50 ct	50
34	 <p>GOLD BOND® DIABETIC FOOT CREAM</p>	3.4 oz	16
79	 <p>GOLD BOND® ECZEMA LOTION</p>	3 oz	12
88	 <p>JUMBO COTTON BALLS</p>	100 ct	4
53	 <p>MOISTURIZER LOTION <i>Compare to Vaseline® Intensive Care™</i></p>	10 fl oz	14
54	 <p>NASAL SPRAY <i>Compare to Ocean®</i></p>	3 fl oz	8
104	 <p>PURELL HAND SANITIZER WITH ALOE</p>	4 fl oz	10

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Item	Description	Details	Credits
62	 REUSABLE COTTON UNDERPAD (30" x 35")	QTY: 1	29
33	 TOE NAIL CLIPPERS	QTY: 1	5

Vitamins & Minerals

41	 B-COMPLEX PLUS VITAMIN C CAPLETS	100 ct	12
72	 BIOTIN TABLETS	120 ct 10,000 mcg	16
55	 CO Q-10 CAPSULES	30 ct 100 mg	13
39	 FISH OIL OMEGA-3 SOFTGELS	100 ct 1000 mg	12

Item	Description	Details	Credits
44	 <p>FOLIC ACID TABLETS</p>	100 ct 400 mcg	5
47	 <p>GLUCOSAMINE PLUS VITAMIN D3 CAPLETS</p> <p><i>Compare to Osteo Bi-Flex® One Per Day</i></p>	60 ct 1500 mg	30
78	 <p>MAGNESIUM OXIDE TABLETS</p>	120 ct 400 mg	8
58	 <p>MELATONIN TABLETS</p>	90 ct 5 mg	11
92	 <p>MULTIVITAMIN MEN 50+ TABLETS</p>	100 ct	16
46	 <p>OYSTER SHELL CALCIUM PLUS VITAMIN D TABLETS</p>	60 ct 500 mg	5
56	 <p>PROBIOTIC BLEND CAPSULES</p>	100 ct	18

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Item	Description	Details	Credits
57	 <p>SUBLINGUAL B-12 VITAMINS TABLETS</p>	110 ct 2500 mcg	14
40	 <p>VITAMIN C TABLETS</p>	110 ct 500 mg	8
42	 <p>VITAMIN D3 SOFTGEL CAPSULES</p>	100 ct 2000 iu	12
43	 <p>VITAMIN E SOFTGELS</p>	110 ct 180 mg	12
93	 <p>WOMEN'S MULTIVITAMIN TABLETS</p>	100 ct	14
98	 <p>ZINC TABLETS</p>	110 ct 50 mg	9

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-or-





Notice of Non-Discriminatory Practices

Blue Cross and Blue Shield of Louisiana and its subsidiary, HMO Louisiana, Inc., comply with applicable federal civil rights laws and do not exclude people or treat them differently on the basis of race, color, national origin, age, disability or sex.

Blue Cross and Blue Shield of Louisiana and its subsidiary:

- Provide free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provide free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, call Customer Service at 1-866-508-7145 (TTY 711). Our phone lines are open 8 a.m. to 8 p.m., 7 days a week from October – March and 8 a.m. to 8 p.m., Monday – Friday from April – September.

If you believe that Blue Cross or its subsidiary 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 in person or by mail, fax or email.

In person: 5525 Reitz Avenue • Baton Rouge, LA 70809

**By mail: Section 1557 Coordinator • P. O. Box 98012 • Baton Rouge, LA 70898-9012
225-295-2300**

1-800-711-5519 (TTY 711)

Fax: 225-298-7240 (Attention: Government Programs)

Email: Section1557Coordinator@bcbsla.com

If you need help filing a grievance, our Section 1557 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>.

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Blue Advantage from Blue Cross and Blue Shield of Louisiana HMO is an HMO plan with a Medicare contract. Blue Advantage from Blue Cross and Blue Shield of Louisiana is a PPO plan with a Medicare contract. Enrollment in either Blue Advantage plan depends on contract renewal.

Multi-Language Interpreter Services

ENGLISH: ATTENTION: If you speak a non-English language, language assistance services, free of charge, are available to you. Call 1-866-508-7145 (TTY: 711).

SPANISH: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-508-7145 (TTY: 711).

FRENCH: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-508-7145 (ATS : 711).

FRENCH CREOLE: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-866-508-7145 (TTY: 711).

VIETNAMESE: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-508-7145 (TTY: 711).

CHINESE: 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 1-866-508-7145 (TTY: 711)。

ARABIC: ملاحظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-866-508-7145 (رقم هاتف الصم والبكم: 711).

TAGALOG: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-508-7145 (TTY: 711).

KOREAN: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-508-7145 (TTY: 711)번으로 전화해 주십시오.

PORTUGUESE: ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-866-508-7145 (TTY: 711).

LAOTIAN: ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການ ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 1-866-508-7145 (TTY: 711).

JAPANESE: 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-866-508-7145 (TTY: 711) まで、お電話にてご連絡ください。

URDU: خبردار: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں۔ کال کریں 1-866-508-7145 (TTY: 711)۔

GERMAN: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-508-7145 (TTY: 711).

PERSIAN (FARSI): توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-866-508-7145 (TTY: 711) تماس بگیرید.

RUSSIAN: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-508-7145 (телетайп: 711).

THAI: เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-866-508-7145 (TTY: 711).



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