

VA National Formulary Hormonal Contraceptive Agents
VA Pharmacy Benefits Management Services, Medical Advisory Panel, and VISN Pharmacist Executives
September 2022

The table below is a listing of VA National Formulary hormonal contraceptive agents. To allow for substitution of the least expensive equivalent product, all contraceptives are listed on the National Formulary as the generic components.

Hormonal contraceptives (pill, transdermal patch, vaginal ring, and injection) are highly effective in preventing pregnancy when used as directed, without significant differences between formulations. Combination hormonal contraceptive agents (containing an estrogen and progestin) differ mainly in strength of estrogen, type and strength of progestin, regimen, and route of administration. Nuisance side effects associated with combination hormonal contraceptives may be managed by adjusting the estrogen/progestin content or ratio. Progestin-only products may be considered in patients with contraindications or a desire to avoid estrogen. For patients with compliance issues, non-oral hormonal contraceptives that do not require daily dosing including the medroxyprogesterone depot injection, vaginal ring, transdermal patch, or contraceptive implant may be useful.

Table 1. VA National Formulary Hormonal Contraceptives

Subclass	Estrogen	Progestin	Reference Drugs*	Example Products**	Regimen
Monophasic pills with 20 mcg EE	20 mcg EE	Drospirenone 3 mg	Yaz	Jasmiel	24 active pills; 4 inert pills
				Loryna	
				Lo-Zumandimine	
				Melamisa	
				Nikki	
				Vestura	
		Levonorgestrel 0.1 mg	Alesse, Levlite	Afirmelle	21 active pills; 7 inert pills
				Aubra EQ	
				Aviane	
Norethindrone 1 mg	Loestrin 1/20	Falmina	21 active pills		
		Larissia			
		Lessina			
		Lutera			
		Sronyx			
		Vienna			
				Aurovela	
				Junel	
				Larin	
				Loestrin	

Subclass	Estrogen	Progestin	Reference Drugs*	Example Products**	Regimen
Monophasic pills with 30 mcg EE	30 mcg EE	Desogestrel 0.15 mg	Ortho-Cept	Apri	21 active pills; 7 inert pills
				Cyred EQ	
				Enskyce	
				Isibloom	
				Juleber	
				Kalliga	
	Drospirenone 3 mg	Yasmin	Ocella	21 active pills; 7 inert pills	
			Syeda		
			Yasmin		
	Levonorgestrel 0.15 mg	Nordette	Altavera	21 active pills; 7 inert pills	
			Ayuna		
			Chateal EQ		
			Iclevia		
Kurvelo					
Levora					
Lillow					
Marlissa					
Norethindrone 1.5 mg	Loestrin 1.5/30	Aurovela	21 active pills		
		Hailey			
		Junel			
		Larin			
Monophasic pills with 35 mcg EE	35 mcg EE	Norethindrone 1 mg	Ortho Novum	Alyacen	21 active pills; 7 inert pills
				Dasetta	
				Nortrel	
				Nylia	
	Norgestimate 0.25 mg	Ortho Cyclen	Estarlylla	21 active pills; 7 inert pills	
			Femynor		
			Mili		
			Mono-Linyah		
			Previfem		
			Sprintec		
VyLibra					

Subclass	Estrogen	Progestin	Reference Drugs*	Example Products**	Regimen
Triphasic pills	30/40/30 mcg EE	Levonorgestrel 0.05/0.075/0.125 mg	Triphasil	Enpresse	21 active pills; 7 inert pills
				Levonest	
				Trivora	
	35 mcg EE	Norethindrone 0.5/0.75/1 mg	Ortho Novum 7/7/7	Alyacen 7/7/7	21 active pills; 7 inert pills
				Dasetta 7/7/7	
				Nortrel 7/7/7	
				Nylia 7/7/7	
	35 mcg EE	Norgestimate 0.18/0.215/0.25 mg	Ortho Tri-Cyclen	Tri-Estarylla	21 active pills; 7 inert pills
				Tri-Femynor	
Tri-Linyah					
Tri-Mili					
Tri-Sprintec					
Tri-VyLibra					
Extended cycle pill	30 mcg EE	Levonorgestrel 0.15 mg	Seasonale	Iclevia	84 active pills; 7 inert pills
				Introvale	
				Jolessa	
				Setlakin	
Progestin-only pill	--	Norethindrone 0.35 mg	Micronor	Camila	Active pill daily continuously; no inert pills
				Errin	
				Heather	
				Incassia	
				Jencycla	
				Nor-QD	
Vaginal ring	15 mcg EE/day	Etonogestrel	Nuvaring	Eluryng	1 ring inserted for 3 wks, 1 wk off (DISPOSABLE)
				Haloette	
Transdermal patch	35 mcg EE/day	Norelgestromin 150 mcg/day	Ortho Evra	Xulane	1 patch weekly for 3 wks, 1 wk off
				Zafemy	
Injection	--	Medroxyprogesterone acetate 150 mg IM	Depo-Provera	Multiple generics available	1 injection Q3 mos (13 wks)
	--	Medroxyprogesterone acetate 104 mg SQ	Depo-subQ Provera	n/a	1 injection Q3 mos (12 to 14 wks)
Emergency Contraception	--	Levonorgestrel 1.5 mg	Plan B One-Step	Aftera	1 pill x1
				My Choice	
				My Way	
				Next Choice	
				Opcicon One-Step	
				Take Action	
	--	Ulipristal 30 mg	ella	n/a	1 pill x1

EE=ethinyl estradiol; equiv=equivalent; IM=intramuscular; OC=oral contraceptive; SQ=subcutaneous.

*Product may be discontinued

**List is not comprehensive. Product availability varies. All products listed may not be designated as AB rated per FDA Orange Book. <https://www.fda.gov/drugs/drug-approvals-and-databases/approved-drug-products-therapeutic-equivalence-evaluations-orange-book>.

Notes:

- **Non-hormonal contraceptive products available on VA National Formulary:** condoms (male or female), diaphragm
- **Additional Contraceptive Agents Available to Women Veterans in VA:** The etonogestrel implant, levonorgestrel-bearing intrauterine devices (IUD), and copper IUD are available through Prosthetics services. Since the products are not procured through Pharmacy, they are not listed on the VA National Formulary.
- **12-month dispensing of contraceptives:** Women Veterans may be offered the option to receive a full year supply of their birth control medication in a single prescription. Results from a 2019 VA study suggested that 12-month dispensing of contraceptives would support patient autonomy, reduce unintended pregnancy, and produce cost savings for the VA. Feasibility, acceptability, and effectiveness of 12-month dispensing was further evaluated and supported by a quality improvement project conducted at two VA pilot sites. PBM Guidance for Prescribing/Processing/Dispensing 12-months of contraceptives may be found on the PBM Formulary Management Sharepoint: (link to page: [Oral Contraceptives - 12 month rx guidance September 2022](#)). Prerequisites: 1) Stable on product for at least 3 mos; 2) Contraceptive is on Consolidated Mail Outpatient Pharmacy (CMOP) greater than 90-day supply list; and 3) Patient accepts copay burden, if applicable.
- **Self-administration of SQ Depot Medroxyprogesterone Acetate (DMPA):** The package label states that the product is intended for administration by a healthcare professional. However, self-administration of DMPA-SQ has been evaluated and shown to be a safe and effective alternative means of administration. In 2021, Centers for Disease Control (CDC) updated the U.S. Selected Practice Recommendations for Contraceptive Use recommending that self-administration of DMPA-SC be made available as an additional option to deliver injectable contraception. The self-administration of DMPA-SC may be offered in the context of shared decision making. PBM guidance on off-label prescribing can be found at: [PBM Formulary Management - Formulary Guidance - All Documents \(sharepoint.com\)](#).

References:

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5. Kennedy CE, Yeh PT, Gaffield ML, et al. Self-administration of injectable contraception: a systematic review and meta-analysis. BNJ Glob Health. 2019;4(2):3001350.
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