

Performance Drug List

The **CVS Caremark Performance Drug List** is a guide within select therapeutic categories for clients, plan members and health care providers. **Generics should be considered the first line of prescribing.** If there is no generic available, there may be more than one brand-name medicine to treat a condition. These preferred brand-name medicines are listed to help identify products that are clinically appropriate and cost-effective. Generics listed in therapeutic categories are for representational purposes only. This is not an all-inclusive list. This list represents brand products in CAPS and generic products in lowercase *italics*.

PLAN MEMBER

Your benefit plan provides you with a prescription benefit program administered by CVS Caremark. Ask your doctor to consider prescribing, when medically appropriate, a preferred medicine from this list. Take this list along when you or a covered family member sees a doctor.

Please note:

- Your specific prescription benefit plan design may not cover certain categories, regardless of their appearance in this document.
- For specific information regarding your prescription benefit coverage and copay¹ information, please visit www.caremark.com or contact a CVS Caremark Customer Care representative.
- CVS Caremark may contact your doctor after receiving your prescription to request consideration of a drug list product or generic equivalent. This may result in your doctor prescribing, when medically appropriate, a different brand-name product or generic equivalent in place of your original prescription.
- Any brand drug for which a generic product becomes available may be designated as a non-preferred product.

HEALTH CARE PROVIDER

Your patient is covered under a prescription benefit plan administered by CVS Caremark. As a way to help manage health care costs, authorize generic substitution whenever possible. If you believe a brand-name product is necessary, consider prescribing a brand name on this list.

Please note:

- Generics should be considered the first line of prescribing.
- This drug list represents a summary of prescription coverage. It is not inclusive and does not guarantee coverage.
- The member's prescription benefit plan may have a different copay for specific products on the list.
- Unless specifically indicated, drug list products will include all dosage forms.
- Log in to www.caremark.com to check coverage and copay information for a specific medicine.

ANALGESICS

VISCOSUPPLEMENTS

SYNVISC
SYNVISC-ONE

ANTI-INFECTIVES

ANTIBACTERIALS

§ CEPHALOSPORINS

cefaclor
cefdinir
cephalexin
SUPRAX

§ ERYTHROMYCINS / MACROLIDES

azithromycin
clarithromycin
clarithromycin ext-rel
erythromycins

§ FLUOROQUINOLONES

ciprofloxacin ext-rel
ciprofloxacin tablet
levofloxacin
AVELOX
CIPRO SUSPENSION

§ PENICILLINS

amoxicillin
amoxicillin-clavulanate
dicloxacillin
penicillin VK

§ TETRACYCLINES

doxycycline hyclate
minocycline
tetracycline

§ ANTIFUNGALS

fluconazole
itraconazole
terbinafine tablet

ANTIVIRALS

§ HERPES AGENTS

acyclovir
valacyclovir

§ INFLUENZA AGENTS

amantadine
rimantadine
RELENZA
TAMIFLU

§ MISCELLANEOUS

clindamycin
metronidazole
nitrofurantoin
sulfamethoxazole-
trimethoprim

CARDIOVASCULAR

§ ACE INHIBITORS

fosinopril
lisinopril
quinapril
ramipril

§ ACE INHIBITOR / DIURETIC COMBINATIONS

fosinopril-
hydrochlorothiazide
lisinopril-
hydrochlorothiazide
quinapril-
hydrochlorothiazide

§ ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS

losartan / losartan-
hydrochlorothiazide

BENICAR / BENICAR HCT
DIOVAN / DIOVAN HCT
MICARDIS /
MICARDIS HCT

ANGIOTENSIN II RECEPTOR ANTAGONIST / DIRECT RENIN INHIBITOR COMBINATIONS

VALTURNA

ANTIPEMICS

§ BILE ACID RESINS

cholestyramine
WELCHOL

CHOLESTEROL ABSORPTION INHIBITORS

ZETIA

§ FIBRATES

fenofibrate
TRICOR
TRILIPIX

§ HMG-CoA REDUCTASE INHIBITORS

pravastatin
simvastatin

CRESTOR
LIPITOR

NIACINS / COMBINATIONS

NIASPAN
SIMCOR

§ BETA-BLOCKERS

atenolol
carvedilol
metoprolol
metoprolol succinate ext-rel
nadolol
propranolol
BYSTOLIC
COREG CR

§ CALCIUM CHANNEL BLOCKERS

amlodipine
diltiazem ext-rel
nifedipine ext-rel
verapamil ext-rel

CALCIUM CHANNEL BLOCKER / ANTIPEMIC COMBINATIONS

CADUET

§ DIGITALIS GLYCOSIDES*digoxin***DIRECT RENIN INHIBITORS /
DIURETIC COMBINATIONS**TEKTURNA /
TEKTURNA HCT**DIRECT RENIN INHIBITOR /
CALCIUM CHANNEL
BLOCKER COMBINATIONS**

TEKAMLO

**DIRECT RENIN INHIBITOR /
CALCIUM CHANNEL
BLOCKER / DIURETIC
COMBINATIONS**

AMTURNIDE

§ DIURETICS*furosemide*
hydrochlorothiazide
metolazone
spironolactone-
hydrochlorothiazide
torsemide
triamterene-
*hydrochlorothiazide***CENTRAL NERVOUS
SYSTEM****ANTIDEPRESSANTS****§ SELECTIVE SEROTONIN
REUPTAKE INHIBITORS
(SSRIs)***citalopram*
fluoxetine
paroxetine
paroxetine ext-rel
sertraline
LEXAPRO
VIIBRYD**§ SEROTONIN
NOREPINEPHRINE
REUPTAKE INHIBITORS
(SNRIs)²***venlafaxine*
venlafaxine ext-rel
CYMBALTA
PRISTIQ**§ MISCELLANEOUS
AGENTS***bupropion*
bupropion ext-rel
*mirtazapine***§ HYPNOTICS,
NONBENZODIAZEPINES***zolpidem*
*zolpidem ext-rel***MIGRAINE****§ SELECTIVE SEROTONIN
AGONISTS***naratriptan**sumatriptan*
MAXALT
ZOMIG**SELECTIVE SEROTONIN
AGONIST / NONSTEROIDAL
ANTI-INFLAMMATORY
DRUG (NSAID)
COMBINATIONS**

TREXIMET

**MULTIPLE SCLEROSIS
AGENTS**AVONEX
BETASERON
COPAXONE**ENDOCRINE AND
METABOLIC****ANDROGENS**ANDRODERM
ANDROGEL**ANTIDIABETICS****§ BIGUANIDES***metformin*
*metformin ext-rel***§ BIGUANIDE /
SULFONYLUREA
COMBINATIONS***glipizide-metformin***DIPEPTIDYL PEPTIDASE-4
(DPP-4) INHIBITORS**JANUVIA
ONGLYZA**DIPEPTIDYL PEPTIDASE-4
(DPP-4) INHIBITOR /
BIGUANIDE COMBINATIONS**JANUMET
KOMBIGLYZE XR**INCRETIN MIMETIC AGENTS**BYETTA
VICTOZA**INSULINS**APIDRA
HUMULIN R U-500
LANTUS
LEVEMIR
NOVOLIN
NOVOLOG**INSULIN SENSITIZERS**

ACTOS

**INSULIN SENSITIZER /
BIGUANIDE COMBINATIONS**

ACTOPLUS MET

**INSULIN SENSITIZER /
SULFONYLUREA
COMBINATIONS**

DUETACT

§ MEGLITINIDES*nateglinide*
PRANDIN**§ SULFONYLUREAS***glimepiride*
glipizide
*glipizide ext-rel***SUPPLIES**ACCU-CHEK STRIPS AND
KITS³BD INSULIN SYRINGES
AND NEEDLES
ONETOUCH STRIPS AND
KITS³**CALCIUM REGULATORS****§ BISPHOSPHONATES***alendronate*
ACTONEL
BONIVA**§ CALCITONINS***calcitonin-salmon***PARATHYROID HORMONES**

FORTEO

CONTRACEPTIVES**§ MONOPHASIC***ethinyl estradiol-*
drospirenone
BEYAZ
LO LOESTRIN FE
LOESTRIN 24 FE**§ TRIPHASIC***ethinyl estradiol-*
norgestimate
ORTHO TRI-CYCLEN LO**FOUR PHASE**

NATAZIA

§ EXTENDED CYCLE*ethinyl estradiol-*
levonorgestrel
LOSEASONIQUE**TRANSDERMAL**

ORTHO EVRA

VAGINAL

NUVARING

ESTROGENS**§ ORAL***estradiol*
estropipate
ENJUVIA
PREMARIN**§ TRANSDERMAL***estradiol*
EVAMIST
VIVELLE-DOT**§ ESTROGEN /
PROGESTINS, ORAL***estradiol-norethindrone*
PREMPHASE
PREMPRO**FERTILITY REGULATORS**OVULATION STIMULANTS,
GONADOTROPINS

BRAVELLE

FOLLISTIM AQ

**HUMAN GROWTH
HORMONES**

NORDITROPIN

§ PROGESTINS, ORAL*medroxyprogesterone*

PROMETRIUM

**SELECTIVE ESTROGEN
RECEPTOR MODULATORS**

EVISTA

§ THYROID SUPPLEMENTS*levothyroxine*
SYNTHROID**GASTROINTESTINAL****§ H₂ RECEPTOR
ANTAGONISTS***ranitidine***§ PROTON PUMP
INHIBITORS***lansoprazole*
omeprazole
omeprazole-sodium
bicarbonate capsule
pantoprazole
DEXILANT
NEXIUM**GENITOURINARY****§ BENIGN PROSTATIC
HYPERPLASIA***doxazosin*
finasteride
tamsulosin
terazosin
AVODART
RAPAFLO**§ URINARY
ANTISPASMODICS***oxybutynin*
oxybutynin ext-rel
trospium
DETROL
DETROL LA
ENABLEX
GELNIQUE
VESICARE**HEMATOLOGIC****§ ANTICOAGULANTS***warfarin*
COUMADIN
PRADAXA
XARELTO**IMMUNOLOGIC
AGENTS****BIOLOGIC DISEASE-
MODIFYING AGENTS**ENBREL
HUMIRA**RESPIRATORY****ANAPHYLAXIS TREATMENT
AGENTS**EPIPEN
EPIPEN JR**§ ANTICHOLINERGICS**

SPIRIVA

**§ ANTICHOLINERGIC / BETA
AGONIST COMBINATIONS***ipratropium-albuterol*
inhalation solution
COMBIVENT**BETA AGONISTS,
INHALANTS****§ SHORT ACTING***albuterol*
PROAIR HFA
PROVENTIL HFA
VENTOLIN HFA**LONG ACTING**FORADIL
SEREVENT**§ LEUKOTRIENE RECEPTOR
ANTAGONISTS***zafirlukast*
SINGULAIR**§ NASAL ANTIHISTAMINES***azelastine*
ASTEPRO**§ NASAL STEROIDS***flunisolide*
fluticasone
triamcinolone
NASONEX
VERAMYST**STEROID / BETA AGONIST
COMBINATIONS**ADVAIR
DULERA
SYMBICORT**§ STEROID INHALANTS***budesonide inhalation*
suspension

ASMANEX
FLOVENT
PULMICORT FLEXHALER
QVAR

TOPICAL

DERMATOLOGY

§ ACNE

adapalene

clindamycin solution
clindamycin-benzoyl
peroxide
erythromycin solution
erythromycin-benzoyl
peroxide
tretinoin
ACANYA
DIFFERIN
DUAC

EPIDUO
RETIN-A MICRO
VELTIN

OPHTHALMIC

§ BETA-BLOCKERS,
NONSELECTIVE
timolol maleate solution
BETIMOL

BETA-BLOCKERS,
SELECTIVE
BETOPTIC S

§ PROSTAGLANDINS

latanoprost
LUMIGAN
TRAVATAN Z

§ SYMPATHOMIMETICS
brimonidine 0.2%
ALPHAGAN P

QUICK REFERENCE DRUG LIST

A

ACANYA
ACCU-CHEK STRIPS AND
KITS³
ACTONEL
ACTOPLUS MET
ACTOS
acyclovir
adapalene
ADVAIR
albuterol
alendronate
ALPHAGAN P
amantadine
amlodipine
amoxicillin
amoxicillin-clavulanate
AMTURNIDE
ANDRODERM
ANDROGEL
APIDRA
ASMANEX
ASTEPRO
atenolol
AVELOX
AVODART
AVONEX
azelastine
azithromycin

B

BD INSULIN SYRINGES
AND NEEDLES
BENICAR
BENICAR HCT
BETASERON
BETIMOL
BETOPTIC S
BEYAZ
BONIVA
BRAVELLE
brimonidine 0.2%
budesonide inhalation
suspension
bupropion
bupropion ext-rel
BYETTA
BYSTOLIC

C

CADUET
calcitonin-salmon
carvedilol

cefactor
cefdinir
cephalexin
cholestyramine
CIPRO SUSPENSION
ciprofloxacin ext-rel
ciprofloxacin tablet
citalopram
clarithromycin
clarithromycin ext-rel
clindamycin
clindamycin solution
clindamycin-benzoyl
peroxide
COMBIVENT
COPAXONE
COREG CR
COUMADIN
CRESTOR
CYMBALTA

D

DETROL
DETROL LA
DEXILANT
dicloxacillin
DIFFERIN
digoxin
diltiazem ext-rel
DIOVAN
DIOVAN HCT
doxazosin
doxycycline hyclate
DUAC
DUETACT
DULERA

E

ENABLEX
ENBREL
ENJUVIA
EPIDUO
EPIPEN
EPIPEN JR
erythromycin solution
erythromycin-benzoyl
peroxide
erythromycins
estradiol
estradiol-norethindrone
estropipate
ethinyl estradiol-
drospirenone

ethinyl estradiol-
levonorgestrel
ethinyl estradiol-
norgestimate
EVAMIST
EVISTA

F

fenofibrate
finasteride
FLOVENT
fluconazole
flunisolide
fluooxetine
fluticasone
FOLLISTIM AQ
FORADIL
FORTEO
fosinopril
fosinopril-
hydrochlorothiazide
furosemide

G

GELNIQUE
glimepiride
glipizide
glipizide ext-rel
glipizide-metformin

H

HUMIRA
HUMULIN R U-500
hydrochlorothiazide

I

ipratropium-albuterol
inhalation solution
itraconazole

J

JANUMET
JANUVIA

K

KOMBIGLYZE XR

L

lansoprazole
LANTUS
latanoprost
LEVEMIR
levofloxacin

levothyroxine
LEXAPRO
LIPITOR
lisinopril
lisinopril-
hydrochlorothiazide
LO LOESTRIN FE
LOESTRIN 24 FE
losartan
losartan-
hydrochlorothiazide
LOSEASONIQUE
LUMIGAN

M

MAXALT
medroxyprogesterone
metformin
metformin ext-rel
metolazone
metoprolol
metoprolol succinate ext-rel
metronidazole
MICARDIS
MICARDIS HCT
minocycline
mirtazapine

N

nadolol
naratriptan
NASONEX
NATAZIA
nateglinide
NEXIUM
NIASPAN
nifedipine ext-rel
nitrofurantoin
NORDITROPIN
NOVOLIN
NOVOLOG
NUVARING

O

omeprazole
omeprazole-sodium
bicarbonate capsule
ONETOUCH STRIPS AND
KITS³
ONGLYZA
ORTHO EVRA
ORTHO TRI-CYCLEN LO
oxybutynin

oxybutynin ext-rel

P

pantoprazole
paroxetine
paroxetine ext-rel
penicillin VK
PRADAXA
PRANDIN
pravastatin
PREMARIN
PREMPHASE
PREMPRO
PRISTIQ
PROAIR HFA
PROMETRIUM
propranolol
PROVENTIL HFA
PULMICORT FLEXHALER

Q

quinapril
quinapril-
hydrochlorothiazide
QVAR

R

ramipril
ranitidine
RAPAFLO
RELENZA
RETIN-A MICRO
rimantadine

S

SEREVENT
sertraline
SIMCOR
simvastatin
SINGULAIR
SPIRIVA
spironolactone-
hydrochlorothiazide
sulfamethoxazole-
trimethoprim
sumatriptan
SUPRAX
SYMBICORT
SYNTHROID
SYNVISC
SYNVISC-ONE

T	<i>torsemide</i>	V	VICTOZA	Z
TAMIFLU	TRAVATAN Z	<i>valacyclovir</i>	VIIBRYD	<i>zafirlukast</i>
<i>tamsulosin</i>	<i>tretinoin</i>	VALTURN	VIVELLE-DOT	ZETIA
TEKAMLO	TREXIMET	VELTIN		<i>zolpidem</i>
TEKTURN	<i>triamcinolone</i>	<i>venlafaxine</i>	W	<i>zolpidem ext-rel</i>
TEKTURN HCT	<i>triamterene-</i>	<i>venlafaxine ext-rel</i>	<i>warfarin</i>	ZOMIG
<i>terazosin</i>	<i>hydrochlorothiazide</i>	VENTOLIN HFA	WELCHOL	
<i>terbinafine tablet</i>	TRICOR	VERAMYST		
<i>tetracycline</i>	TRILIPX	<i>verapamil ext-rel</i>	X	
<i>timolol maleate solution</i>	<i>tropium</i>	VESICARE	XARELTO	

PREFERRED ALTERNATIVES LIST

DRUG NAME(S)	PREFERRED ALTERNATIVE(S)*	DRUG NAME(S)	PREFERRED ALTERNATIVE(S)*
ACIPHEX	<i>lansoprazole, omeprazole, omeprazole-sodium bicarbonate capsule, pantoprazole</i>	DORAL	<i>zolpidem, zolpidem ext-rel</i>
ADVICOR	SIMCOR	DYNACIRC CR	<i>amlodipine, nifedipine ext-rel</i>
ALORA	<i>estradiol, EVAMIST, VIVELLE-DOT</i>	EDARBI	<i>losartan, BENICAR, DIOVAN, MICARDIS</i>
ALTOPREV	<i>pravastatin</i>	EDLUAR	<i>zolpidem</i>
ALVESCO	ASMANEX, FLOVENT, PULMICORT FLEXHALER, QVAR	ESTRASORB	<i>estradiol, EVAMIST, VIVELLE-DOT</i>
ANGELIQ	<i>estradiol-norethindrone, PREMPHASE, PREMPRO</i>	ESTROGEL	<i>estradiol, EVAMIST, VIVELLE-DOT</i>
ARMOUR THYROID	<i>levothyroxine, SYNTHROID</i>	FEMTRACE	<i>estradiol, estropipate, ENJUVIA, PREMARIN</i>
ASCENSIA STRIPS AND KITS	ACCU-CHEK STRIPS AND KITS ³ , ONETOUCH STRIPS AND KITS ³	FENOGLIDE	<i>fenofibrate, TRICOR, TRILIPX</i>
ATACAND, ATACAND HCT	<i>losartan, losartan-hydrochlorothiazide, BENICAR, BENICAR HCT, DIOVAN, DIOVAN HCT, MICARDIS, MICARDIS HCT</i>	FIRST TESTOSTERONE	ANDRODERM, ANDROGEL
ATELVIA	<i>alendronate 70 mg</i>	FORTAMET	<i>metformin ext-rel</i>
ATROVENT HFA	SPIRIVA	FORTESTA	ANDRODERM, ANDROGEL
AVAPRO, AVALIDE	<i>losartan, losartan-hydrochlorothiazide</i>	FOSAMAX PLUS D	<i>alendronate</i>
AXERT	<i>naratriptan, sumatriptan, MAXALT, ZOMIG</i>	FREESTYLE STRIPS AND KITS ⁴	ACCU-CHEK STRIPS AND KITS ³ , ONETOUCH STRIPS AND KITS ³
AXIRON	ANDRODERM, ANDROGEL	FROVA	<i>sumatriptan</i>
AZELEX	<i>erythromycin solution</i>	GLUMETZA	<i>metformin ext-rel</i>
BECONASE AQ	<i>flunisolide, fluticasone</i>	HUMALOG	NOVOLOG
BENZAC AC, BENZAC W	<i>adapalene, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, ACANYA, DIFFERIN, DUAC, EPIDUO, RETIN-A MICRO, VELTIN</i>	HUMALOG MIX 50/50	NOVOLOG MIX 70/30
BENZAGEL	<i>adapalene, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, ACANYA, DIFFERIN, DUAC, EPIDUO, RETIN-A MICRO, VELTIN</i>	HUMALOG MIX 75/25	NOVOLOG MIX 70/30
BENZIQ	<i>adapalene, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, ACANYA, DIFFERIN, DUAC, EPIDUO, RETIN-A MICRO, VELTIN</i>	HUMULIN	NOVOLIN
CARDURA XL	<i>doxazosin, tamsulosin, terazosin, RAPAFLO</i>	INNOPRAN XL	<i>atenolol, propranolol ext-rel</i>
CENESTIN	<i>estradiol, estropipate, ENJUVIA, PREMARIN</i>	ISTALOL	<i>timolol maleate solution, BETIMOL</i>
CLINDAGEL	<i>erythromycin solution</i>	LIVALO	<i>pravastatin, simvastatin, CRESTOR, LIPITOR</i>
DESQUAM E, DESQUAM X	<i>adapalene, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, ACANYA, DIFFERIN, DUAC, EPIDUO, RETIN-A MICRO, VELTIN</i>	LUNESTA	<i>zolpidem</i>
		MAXAIR	PROAIR HFA, PROVENTIL HFA, VENTOLIN HFA
		MENEST	<i>estradiol, estropipate, ENJUVIA, PREMARIN</i>
		MENOSTAR	<i>estradiol, EVAMIST, VIVELLE-DOT</i>
		OMNARIS	<i>flunisolide, fluticasone</i>
		OXYTROL ⁴	<i>oxybutynin ext-rel, tropium, DETROL, DETROL LA, ENABLEX, GELNIQUE, VESICARE</i>
		PATANASE	<i>azelastine, ASTEPRO</i>
		PEXEVA	<i>citalopram, fluoxetine, paroxetine, paroxetine ext-rel, sertraline, LEXAPRO, VIIBRYD</i>
		PRECISION XTRA STRIPS AND KITS	ACCU-CHEK STRIPS AND KITS ³ , ONETOUCH STRIPS AND KITS ³
		PREFEST	<i>estradiol-norethindrone, PREMPHASE, PREMPRO</i>
		RELION INSULIN	NOVOLIN INSULIN

DRUG NAME(S)	PREFERRED ALTERNATIVE(S)*	DRUG NAME(S)	PREFERRED ALTERNATIVE(S)*
RELPAZ	<i>naratriptan, sumatriptan, MAXALT, ZOMIG</i>	TRADJENTA	JANUVIA, ONGLYZA
RHINOCORT AQUA	<i>flunisolide, fluticasone</i>	TRIAZ	<i>adapalene, clindamycin solution, clindamycin-benzoyl peroxide, erythromycin solution, erythromycin-benzoyl peroxide, tretinoin, ACANYA, DIFFERIN, DUAC, EPIDUO, RETIN-A MICRO, VELTIN</i>
RIOMET	<i>metformin ext-rel</i>		
ROZEREM	<i>zolpidem</i>		
SANCTURA XR ⁴	<i>oxybutynin ext-rel, trospium, DETROL, DETROL LA, ENABLEX, GELNIQUE, VESICARE</i>	TRIGLIDE	<i>fenofibrate, TRICOR, TRILIPIX</i>
SKELID	<i>alendronate, ACTONEL</i>	TRUE CARE STRIPS AND KITS, TRUETEST STRIPS AND KITS, TRUETRACK STRIPS AND KITS	ACCU-CHEK STRIPS AND KITS ³ , ONETOUCH STRIPS AND KITS ³
STRIANT	ANDRODERM, ANDROGEL		
SUMAVEL DOSEPRO	<i>naratriptan, sumatriptan, MAXALT, ZOMIG</i>	TWINJECT	EPIPEN, EPIPEN JR
SURE-TEST STRIPS AND KITS	ACCU-CHEK STRIPS AND KITS ³ , ONETOUCH STRIPS AND KITS ³	VANOS	<i>clobetasol</i>
TESTIM	ANDROGEL	VYTORIN	<i>pravastatin, simvastatin, CRESTOR, LIPITOR</i>
TEVETEN, TEVETEN HCT	<i>losartan, losartan-hydrochlorothiazide</i>	XOPENEX HFA	PROAIR HFA, PROVENTIL HFA, VENTOLIN HFA
TOVIAZ	<i>oxybutynin ext-rel</i>	ZYFLO, ZYFLO CR	<i>zafirlukast, SINGULAIR</i>

FOR YOUR INFORMATION: Generics should be considered the first line of prescribing. This drug list represents a summary of prescription coverage. It is not inclusive and does not guarantee coverage. Any brand drug for which a generic product becomes available may be designated as a non-preferred product. Specific prescription benefit plan design may not cover certain categories, regardless of their appearance in this document. The member's prescription benefit plan may have a different copay for specific products on the list. Unless specifically indicated, drug list products will include all dosage forms. This list represents brand products in CAPS and generic products in lowercase *italics*. Generics listed in therapeutic categories are for representational purposes only. This is not an all-inclusive list. Listed products may be available generically in certain strengths or dosage forms. Dosage forms on this list will be consistent with the category and use where listed. Log in to www.caremark.com to check coverage and copay information for a specific medicine.

* The preferred alternative products in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.

§ Generics are available in this class and should be considered the first line of prescribing.

¹ Copayment, copay or coinsurance means the amount a member is required to pay for a prescription in accordance with a Plan, which may be a deductible, a percentage of the prescription price, a fixed amount or other charge, with the balance, if any, paid by a Plan.

² Indicates the proposed mechanism of action, based on the American Psychiatric Association Summary of Treatment Recommendations.

³ An Accu-Chek or OneTouch blood glucose meter will be provided at no charge by the manufacturer to those individuals currently using a meter other than Accu-Chek or OneTouch. For more information on how to obtain a blood glucose meter, call toll-free: 1-800-588-4456. Members must have CVS Caremark Mail Service Pharmacy benefits to qualify.

⁴ A medical exception process is in place for specific clinical circumstances that may require continued coverage for one of these specific drugs: Freestyle diabetic test strips, Oxytrol and Sanctura XR. If your physician believes you have a specific clinical need for one of these drugs, he or she should fax a medical exception request to 1-866-443-1172.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information.

CVS Caremark may receive rebates, discounts and service fees from pharmaceutical manufacturers for certain listed products. This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers not affiliated with CVS Caremark. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber.

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