

State of Tennessee Drug List

The **State of Tennessee Drug List** is a list of preferred drugs for your prescription benefit. This list includes Generics and Preferred Brand drugs.

- **Generic** drugs are in lowercase *italics*. Not all covered generics are listed. Those listed are examples of what may be prescribed.
- **Preferred Brand** drugs are in CAPS. These are the most cost-effective brand-name drugs for you.
- **Non-preferred Brand** drugs are not listed. Most of these brand-name drugs are covered but will cost you the most.

Generics should be considered the first line of prescribing. If there is no generic available, there may be more than one brand-name drug to treat a condition.

PLAN MEMBER

Ask your doctor to consider prescribing a generic drug or a preferred brand-name drug from this list, if medically appropriate. Take this list along when you see your doctor.

Please note:

- If you have questions about your prescription coverage or copays¹ you can:
 - Visit www.caremark.com, or
 - Contact a CVS Caremark Customer Care representative toll-free at **1-877-522-TNRX (8679)**.
- For mail service, CVS Caremark may contact your doctor after getting your prescription. They may ask your doctor to consider a preferred brand drug or a generic. Your doctor may choose, when medically appropriate, to prescribe a different brand-name drug or generic in place of your original prescription.
- Any brand-name 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 all-inclusive and does not guarantee coverage.
- 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	<i>levofloxacin</i>	EPZICOM	§ NUCLEOSIDE REVERSE	ANTIVIRALS
VISCOSUPPLEMENTS	AVELOX	TRIZIVIR	TRANSCRIPTASE	§ CYTOMEGALOVIRUS
SYNVISC (PA)	CIPRO SUSPENSION	TRUVADA	INHIBITORS	AGENTS
SYNVISC-ONE (PA)	§ PENICILLINS	CHEMOKINE RECEPTOR	<i>didanosine delayed-rel</i>	VALCYTE
ANTI-INFECTIVES	<i>amoxicillin</i>	ANTAGONISTS	EMTRIVA	§ HEPATITIS AGENTS
ANTIBACTERIALS	<i>amoxicillin-clavulanate</i>	SELZENTRY	EPIVIR	BARACLUDE
§ CEPHALOSPORINS	<i>dicloxacillin</i>	FUSION INHIBITORS	VIDEX SOLUTION	EPIVIR-HBV
<i>cefactor</i>	<i>penicillin VK</i>	FUZEON (PA)	ZIAGEN	HEPSERA
<i>cefdinir</i>	§ TETRACYCLINES	INTEGRASE INHIBITORS	NUCLEOTIDE REVERSE	REBETOL SOLUTION (PA)
<i>cephalexin</i>	<i>doxycycline hyclate</i>	ISENTRESS	TRANSCRIPTASE	TYZEKA
SUPRAX	<i>minocycline</i>	NON-NUCLEOSIDE	INHIBITORS	§ HERPES AGENTS
§ ERYTHROMYCINS /	<i>tetracycline</i>	REVERSE TRANSCRIPTASE	VIREAD	<i>acyclovir</i>
MACROLIDES	§ ANTIFUNGALS	INHIBITORS	PROTEASE INHIBITORS	<i>valacyclovir</i>
<i>azithromycin</i>	<i>fluconazole</i>	INTELENCE	APTIVUS	§ INFLUENZA AGENTS
<i>clarithromycin</i>	<i>itraconazole (PA)</i>	RESCRIPTOR	CRIXIVAN	<i>amantadine</i>
<i>clarithromycin ext-rel</i>	<i>terbinafine tablet (PA)</i>	SUSTIVA	INVIRASE	<i>rimantadine</i>
<i>erythromycins</i>	ANTIRETROVIRALS	VIRAMUNE	KALETRA	RELENZA (QL)
§ FLUOROQUINOLONES	ANTIRETROVIRAL	VIRAMUNE XR	LEXIVA	TAMIFLU (QL)
<i>ciprofloxacin ext-rel</i>	COMBINATIONS		NORVIR	§ MISCELLANEOUS
<i>ciprofloxacin tablet</i>	ATRIPLA		PREZISTA	<i>clindamycin</i>
	COMBIVIR		REYATAZ	<i>metronidazole</i>
			VIRACEPT	

nitrofurantoin
sulfamethoxazole-
trimethoprim

ANTINEOPLASTIC AGENTS

§ ALKYLATING AGENTS

ALKERAN
CEENU
HEXALEN
LEUKERAN
MYLERAN
TEMODAR (PA)

§ ANTIMETABOLITES

thioguanine
OFORTA (PA)
XELODA (PA)

HORMONAL ANTINEOPLASTIC AGENTS

§ ANTIESTROGENS

FARESTON
FASLODEX

§ AROMATASE INHIBITORS

anastrozole

§ LUTEINIZING HORMONE- RELEASING HORMONE (LHRH) AGONISTS

LUPRON DEPOT (PA)
TRELSTAR (PA)
ZOLADEX (PA)

KINASE INHIBITORS

AFINITOR (PA)
GLEEVEC (PA)
NEXAVAR (PA)
SPRYCEL (PA)
SUTENT (PA)
TARCEVA (PA)
TASIGNA (PA)
TYKERB (PA)
VOTRIENT (PA)

§ MISCELLANEOUS

LYSODREN
MATULANE
TARGRETIN CAPSULE
ZOLINZA (PA)

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 / CALCIUM CHANNEL BLOCKER / DIURETIC COMBINATIONS

TRIBENZOR

ANGIOTENSIN II RECEPTOR
ANTAGONIST / DIRECT
RENIN INHIBITOR
COMBINATIONS
VALTURNA

§ ANTIARRHYTHMICS

MULTAQ
RYTHMOL SR
TIKOSYN (PA)

ANTILIPEMICS

§ 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 / ANTILIPEMIC 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*
toremide
*triamterene-
hydrochlorothiazide*

PULMONARY ARTERIAL HYPERTENSION

ENDOTHELIN RECEPTOR
ANTAGONISTS
LETAIRIS (PA)
TRACLEER (PA)

PHOSPHODIESTERASE INHIBITORS

ADCIRCA (PA)
REVATIO (PA)

§ PROSTAGLANDIN VASODILATORS

REMODULIN (PA)
TYVASO (PA)
VENTAVIS (PA)

CENTRAL NERVOUS SYSTEM

§ ANTICONVULSANTS

levetiracetam
BANZEL
GABITRIL
LAMICTAL ODT
LAMICTAL XR
LYRICA
SABRIL (PA)
VIMPAT

§ ANTIDEMENTIA

donepezil
rivastigmine
EXELON PATCH
NAMENDA

ANTIDEPRESSANTS

§ MONOAMINE OXIDASE
INHIBITORS (MAOIs)
MARPLAN

§ 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

§ ANTIPARKINSONIAN AGENTS

AZILECT
COMTAN
REQUIP XL
STALEVO

§ ANTIPSYCHOTICS, ATYPICALS

ABILIFY
ABILIFY INJECTION
FANAPT
GEODON
INVEGA
INVEGA SUSTENNA
RISPERDAL CONSTA
SAPHRIS
SEROQUEL
SEROQUEL XR
ZYPREXA

§ ATTENTION DEFICIT HYPERACTIVITY DISORDER

DAYTRANA
FOCALIN XR
INTUNIV
METADATE CD
RITALIN LA
STRATTERA
VYVANSE

§ HYPNOTICS, NONBENZODIAZEPINES

zolpidem (QL)
zolpidem ext-rel (QL)

MIGRAINE

§ SELECTIVE SEROTONIN AGONISTS

naratriptan (QL)
sumatriptan (QL)
MAXALT (QL)
ZOMIG (QL)

SELECTIVE SEROTONIN AGONIST / NONSTEROIDAL ANTI-INFLAMMATORY DRUG (NSAID) COMBINATIONS

TREXIMET (QL)

MULTIPLE SCLEROSIS
AGENTS

AVONEX (PA)
BETASERON (PA)
COPAXONE (PA)

NARCOLEPSY / CATAPLEXY

NUVIGIL (PA)

ENDOCRINE AND METABOLIC

ANDROGENS

ANDRODERM (PA)
ANDROGEL (PA)

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
KITS³
BD INSULIN SYRINGES
AND NEEDLES
ONETOUCH STRIPS AND
KITS³

CALCIUM REGULATORS
§ BISPHOSPHONATES
alendronate
ACTONEL
BONIVA

§ CALCITONINS
calcitonin-salmon

PARATHYROID HORMONES
FORTEO (PA)

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

HUMAN GROWTH
HORMONES
NORDITROPIN (PA)

§ PROGESTINS, ORAL
medroxyprogesterone
PROMETRIUM

SELECTIVE ESTROGEN
RECEPTOR MODULATORS
EVISTA

§ THYROID SUPPLEMENTS
levothyroxine
SYNTHROID

GASTROINTESTINAL

§ H₂ RECEPTOR
ANTAGONISTS
ranitidine

INFLAMMATORY BOWEL
DISEASE
§ ORAL AGENTS
ASACOL
ASACOL HD
LIALDA
PENTASA

§ RECTAL AGENTS
CANASA
CORTIFOAM

PANCREATIC ENZYMES
CREON
ZENPEP

§ PROTON PUMP
INHIBITORS
lansoprazole
omeprazole

*omeprazole-sodium
bicarbonate capsule*
pantoprazole
DEXILANT (ST)
NEXIUM (ST)

GENITOURINARY

§ BENIGN PROSTATIC
HYPERPLASIA
doxazosin
finasteride
tamsulosin
terazosin
AVODART
RAPAFLO

§ URINARY
ANTISPASMODICS
oxybutynin
oxybutynin ext-rel
tropium
DETROL
DETROL LA
ENABLEX
GELNIQUE
VESICARE

HEMATOLOGIC

§ ANTICOAGULANTS
warfarin
COUMADIN
PRADAXA
XARELTO

§ PLATELET AGGREGATION
INHIBITORS
AGGRENOX
EFFIENT
PLAVIX

**IMMUNOLOGIC
AGENTS**

BIOLOGIC DISEASE-
MODIFYING AGENTS
ENBREL (PA)
HUMIRA (PA)

IMMUNOMODULATORS
INTERFERONS
INTRON A (PA)
PEGASYS (PA)
PEGINTRON (PA)
SYLATRON (PA)

IMMUNOSUPPRESSANTS
§ ANTIMETABOLITES
AZASAN
MYFORTIC

§ CALCINEURIN INHIBITORS
cyclosporine, modified
SANDIMMUNE

RAPAMYCIN DERIVATIVES
RAPAMUNE

RESPIRATORY

ANAPHYLAXIS TREATMENT
AGENTS
EIPEN
EIPEN 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 (PA2)
clindamycin solution
clindamycin-benzoyl
peroxide
erythromycin solution
erythromycin-benzoyl
peroxide
tretinoin (PA2)
ACANYA
DIFFERIN (PA2)
DUAC
EPIDUO
RETIN-A MICRO (PA2)
VELTIN (PA2)

§ ACTINIC KERATOSIS
CARAC

§ ANTIPSORIATICS,
TOPICAL
TAZORAC (PA)

IMMUNOMODULATORS
ELIDEL (ST)
PROTOPIC (ST)

§ LOCAL ANALGESICS
LIDODERM

§ MISCELLANEOUS SKIN
AND MUCOUS MEMBRANE
imiquimod

OPHTHALMIC
§ BETA-BLOCKERS,
NONSELECTIVE
timolol maleate solution
BETIMOL

BETA-BLOCKERS,
SELECTIVE
BETOPTIC S

§ CARBONIC ANHYDRASE
INHIBITORS, TOPICAL
AZOPT

§ PROSTAGLANDINS
latanoprost
LUMIGAN
TRAVATAN Z

§ SYMPATHOMIMETICS
brimonidine 0.2%
ALPHAGAN P

QUICK REFERENCE DRUG LIST

A

ABILIFY
 ABILIFY INJECTION
 ACANYA
 ACCU-CHEK STRIPS AND
 KITS ³
 ACTONEL
 ACTOPLUS MET
 ACTOS
acyclovir
adapalene (PA2)
 ADCIRCA (PA)
 ADVAIR
 AFINITOR (PA)
 AGGRENOL
albuterol
alendronate
 ALKERAN
 ALPHAGAN P
amantadine
amlodipine
amoxicillin
amoxicillin-clavulanate
 AMTURNIDE
anastrozole
 ANDRODERM (PA)
 ANDROGEL (PA)
 APIDRA
 APTIVUS
 ASACOL
 ASACOL HD
 ASMANEX
 ASTEPRO
atenolol
 ATRIPLA
 AVELOX
 AVODART
 AVONEX (PA)
 AZASAN
azelastine
 AZILECT
azithromycin
 AZOPT

B

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

C

CADUET
calcitonin-salmon
 CANASA
 CARAC
carvedilol
 CEENU
cefaclor
cefdinir
cephalexin
cholestyramine
 CIPRO SUSPENSION
ciprofloxacin ext-rel
ciprofloxacin tablet
citalopram
clarithromycin
clarithromycin ext-rel
clindamycin
clindamycin solution
clindamycin-benzoyl
peroxide
 COMBIVENT
 COMBIVIR
 COMTAN
 COPAXONE (PA)
 COREG CR
 CORTIFOAM
 COUMADIN
 CREON
 CRESTOR
 CRIVAN
cyclosporine, modified
 CYMBALTA

D

DAYTRANA
 DETROL
 DETROL LA
 DEXILANT (ST)
dicloxacillin
didanosine delayed-rel
 DIFFERIN (PA2)
digoxin
diltiazem ext-rel
 DIOVAN
 DIOVAN HCT
donepezil
doxazosin
doxycycline hyclate
 DUAC
 DUETACT
 DULERA

E

EFFIENT
 ELIDEL (ST)
 EMTRIVA
 ENABLEX
 ENBREL (PA)
 ENJUVIA
 EPIDUO
 EPIPEN
 EPIPEN JR
 EPIVIR

EPIVIR-HBV
 EPZICOM
erythromycin solution
erythromycin-benzoyl
peroxide
erythromycins
estradiol
estradiol-norethindrone
estropipate
ethinyl estradiol-
drospirenone
ethinyl estradiol-
levonorgestrel
ethinyl estradiol-
norgestimate
 EVAMIST
 EVISTA
 EXELON PATCH

F

FANAPT
 FARESTON
 FASLODEX
fenofibrate
finasteride
 FLOVENT
fluconazole
flunisolide
fluoxetine
fluticasone
 FOCALIN XR
 FORADIL
 FORTEO (PA)
fosinopril
fosinopril-
hydrochlorothiazide
furosemide
 FUZEON (PA)

G

GABITRIL
 GELNIQUE
 GEODON
 GLEEVEC (PA)
glimepiride
glipizide
glipizide ext-rel
glipizide-metformin

H

HEPSERA
 HEXALEN
 HUMIRA (PA)
 HUMULIN R U-500
hydrochlorothiazide

I

imiquimod
 INTELENCE
 INTRON A (PA)
 INTUNIV
 INVEGA
 INVEGA SUSTENNA
 INVIRASE

ipratropium-albuterol
inhalation solution
 ISENTRESS
itraconazole (PA)

J

JANUMET
 JANUVIA

K

KALETRA
 KOMBIGLYZE XR

L

LAMICTAL ODT
 LAMICTAL XR
lansoprazole
 LANTUS
latanoprost
 LETAIRIS (PA)
 LEUKERAN
 LEVEMIR
levetiracetam
levofloxacin
levothyroxine
 LEXAPRO
 LEXIVA
 LIALDA
 LIDODERM
 LIPITOR
lisinopril
lisinopril-
hydrochlorothiazide
 LO LOESTRIN FE
 LOESTRIN 24 FE
losartan
losartan-
hydrochlorothiazide
 LOSEASONIQUE
 LUMIGAN
 LUPRON DEPOT (PA)
 LYRICA
 LYSODREN

M

MARPLAN
 MATULANE
 MAXALT (QL)
medroxyprogesterone
 METADATE CD
metformin
metformin ext-rel
metolazone
metoprolol
metoprolol succinate ext-rel
metronidazole
 MICARDIS
 MICARDIS HCT
minocycline
mirtazapine
 MULTAQ
 MYFORTIC
 MYLERAN

N

nadolol
 NAMENDA
naratriptan (QL)
 NASONEX
 NATAZIA
nateglinide
 NEXAVAR (PA)
 NEXIUM (ST)
 NIASPAN
nifedipine ext-rel
nitrofurantoin
 NORDITROPIN (PA)
 NORVIR
 NOVOLIN
 NOVOLOG
 NUVARING
 NUVIGIL (PA)

O

OFORTA (PA)
omeprazole
omeprazole-sodium
bicarbonate capsule
 ONETOUCH STRIPS AND
 KITS ³
 ONGLYZA
 ORTHO EVRA
 ORTHO TRI-CYCLEN LO
oxybutynin
oxybutynin ext-rel

P

pantoprazole
paroxetine
paroxetine ext-rel
 PEGASYS (PA)
 PEGINTRON (PA)
penicillin VK
 PENTASA
 PLAVIX
 PRADAXA
 PRANDIN
pravastatin
 PREMARIN
 PREMPHASE
 PREMPRO
 PREZISTA
 PRISTIQ
 PROAIR HFA
 PROMETRIUM
propranolol
 PROTOPIC (ST)
 PROVENTIL HFA
 PULMICORT FLEXHALER

Q

quinapril
quinapril-
hydrochlorothiazide
 QVAR

R <i>ramipril</i> <i>ranitidine</i> RAPAFLO RAPAMUNE REBETOL SOLUTION (PA) RELENZA (QL) REMODULIN (PA) REQUIP XL RESCRIPTOR RETIN-A MICRO (PA2) REVATIO (PA) REYATAZ <i>rimantadine</i> RISPERDAL CONSTA RITALIN LA <i>rivastigmine</i> RYTHMOL SR	SEROQUEL SEROQUEL XR <i>sertraline</i> SIMCOR <i>simvastatin</i> SINGULAIR SPIRIVA <i>spironolactone-hydrochlorothiazide</i> SPRYCEL (PA) STALEVO STRATTERA <i>sulfamethoxazole-trimethoprim</i> <i>sumatriptan</i> (QL) SUPRAX SUSTIVA SUTENT (PA) SYLATRON (PA) SYMBICORT SYNTHROID SYNVISC (PA) SYNVISC-ONE (PA)	T TAMIFLU (QL) <i>tamsulosin</i>	TARCEVA (PA) TARGRETIN CAPSULE TASIGNA (PA) TAZORAC (PA) TEKAMLO TEKTURNA TEKTURNA HCT TEMODAR (PA) <i>terazosin</i> <i>terbinafine tablet</i> (PA) <i>tetracycline</i> <i>thioguanine</i> TIKOSYN (PA) <i>timolol maleate solution</i> <i>torseamide</i> TRACLEER (PA) TRAVATAN Z TRELSTAR (PA) <i>tretinoin</i> (PA2) TREXIMET (QL) <i>triamcinolone triamterene-hydrochlorothiazide</i> TRIBENZOR TRICOR TRILIPIX TRIZIVIR	<i>trosipium</i> TRUVADA TYKERB (PA) TYVASO (PA) TYZEKA	V <i>valacyclovir</i> VALCYTE VALTURNA VELTIN (PA2) <i>venlafaxine</i> <i>venlafaxine ext-rel</i> VENTAVIS (PA) VENTOLIN HFA VERAMYST <i>verapamil ext-rel</i> VESICARE VICTOZA VIDEX SOLUTION VIIBRYD VIMPAT VIRACEPT VIRAMUNE VIRAMUNE XR VIREAD VIVELLE-DOT	VOTRIENT (PA) VYVANSE	W <i>warfarin</i> WELCHOL	X XARELTO XELODA (PA)	Z <i>zafirlukast</i> ZENPEP ZETIA ZIAGEN ZOLADEX (PA) ZOLINZA (PA) <i>zolpidem</i> (QL) <i>zolpidem ext-rel</i> (QL) ZOMIG (QL) ZYPREXA
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- § 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 free blood glucose meter, call toll-free: 1-800-588-4456.** Members must have CVS Caremark Mail Service Pharmacy benefits to qualify.
- (PA) Prior Authorization required.
- (PA2) Prior Authorization required for 36 years of age and older.
- (QL) Quantity Limits apply.
- (ST) Step Therapy required.

Your privacy is important to us. Our employees are trained regarding the appropriate way to handle your private health information. This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber.