

State of Florida Preferred Drug List

The **State of Florida Preferred Drug List** is a guide for plan members and health care providers. Not all Tier 1 (generic) and Tier 2 (preferred brand) drugs are represented on this list. **Generics should always 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. Some preferred brand-name medicines are listed to help identify certain products that are clinically appropriate and cost-effective. Some generic drugs are listed in therapeutic categories for representational purposes only. This is not an all-inclusive list of generic or preferred brand drugs or an all-inclusive list of all therapeutic categories. This list represents some preferred brand products in CAPS and some 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 generic or preferred brand medicine.

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, please visit www.caremark.com, log in, and select Check Drug Cost. You may also contact a CVS Caremark Customer Care representative toll-free at 1-800-378-4408, or refer to your State Employees' PPO Plan Group Health Insurance Plan Booklet and Benefit Document.
- 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.

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 preferred brand medicine.

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.

The State of Florida Preferred Drug List does not contain all therapeutic categories, all preferred brand drugs, or all generic drugs. Not all Tier 1 (generic) and Tier 2 (preferred brand) drugs are included in this list. Please visit www.caremark.com if you have a question about a drug not on this list. Log in with your user ID and password. Select Check Drug Cost on the menu on the left hand side of the screen to determine if your drug requires a Tier 1 (generic), Tier 2 (preferred brand), or Tier 3 (non-preferred brand) copay. You may also contact a CVS Caremark Customer Care representative toll-free at 1-800-378-4408.

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

ANTI-LIPEMICS

§ 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

TEKURNA /
TEKURNA 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*

CENTRAL NERVOUS SYSTEM

ANTIDEPRESSANTS

§ SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIs)

citalopram

fluoxetine
paroxetine
paroxetine ext-rel
sertraline
LEXAPRO

§ 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

MULTIPLE SCLEROSIS AGENTS

AVONEX
COPAXONE
REBIF

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
HUMALOG
HUMULIN
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

§ BIPHOSPHONATES

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
SEASONIQUE

TRANSDERMAL

ORTHO EVRA

VAGINAL

NUVARING

ESTROGENS

§ ORAL

estradiol
estropipate
ENJUVIA
PREMARIN

§ TRANSDERMAL

estradiol
ESTRADERM
EVAMIST
VIVELLE-DOT

§ ESTROGEN / PROGESTINS, ORAL

estradiol-norethindrone
PREMPHASE
PREMPRO

HUMAN GROWTH HORMONES

GENOTROPIN
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
tropium
DETROL
DETROL LA
ENABLEX
GELNIQUE
OXYTROL
SANCTURA XR
VESICARE

HEMATOLOGIC

§ ANTICOAGULANTS

warfarin
COUMADIN
PRADAXA

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
NASACORT AQ
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

The State of Florida Preferred Drug List does not contain all therapeutic categories, all preferred brand drugs, or all generic drugs. Not all Tier 1 (generic) and Tier 2 (preferred brand) drugs are included in this list. Please visit www.caremark.com if you have a question about a drug not on this list. Log in with your user ID and password. Select Check Drug Cost on the menu on the left hand side of the screen to determine if your drug requires a Tier 1 (generic), Tier 2 (preferred brand), or Tier 3 (non-preferred brand) copay. You may also contact a CVS Caremark Customer Care representative toll-free at 1-800-378-4408.

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
BETIMOL
BETOPTIC S
BEYAZ
BONIVA
brimonidine 0.2%
budesonide inhalation suspension
bupropion
bupropion ext-rel

BYETTA
BYSTOLIC

C

CADUET
calcitonin-salmon
carvedilol
cefaclor
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
ENJUVA
EPIDUO
EPIPEN
EPIPEN JR
erythromycin solution
erythromycin-benzoyl peroxide
erythromycins
ESTRADERM
estradiol
estradiol-norethindrone
estropipate
ethinyl estradiol-drospirenone
ethinyl estradiol-levonorgestrel
ethinyl estradiol-norgestimate
EVAMIST
EVISTA

F

fenofibrate
finasteride
FLOVENT
fluconazole
flunisolide
fluoxetine
fluticasone
FORADIL
FORTEO
fosinopril
fosinopril-hydrochlorothiazide
furosemide

G

GELNIQUE
GENOTROPIN
glimepiride
glipizide

glipizide ext-rel
glipizide-metformin

H

HUMALOG
HUMIRA
HUMULIN
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
natriptan
NASACORT AQ
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
OXYTROL

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
REBIF
RELENZA
RETIN-A MICRO
rimantadine

S

SANCTURA XR
SEASONIQUE
SEREVENT
sertraline
SIMCOR
simvastatin
SINGULAIR
SPIRIVA

spironolactone-
hydrochlorothiazide
sulfamethoxazole-
trimethoprim
sumatriptan
SUPRAX
SYMBICORT
SYNTHROID
SYNVISC
SYNVISC-ONE

T

TAMIFLU
tamsulosin
TEKAMLO
TEKTURNA
TEKTURNA HCT
terazosin
terbinafine tablet

tetracycline
timolol maleate solution
torsemide
TRAVATAN Z
tretinoin
TREXIMET
triamcinolone
triamterene-
hydrochlorothiazide
TRICOR
TRILIPIX
trospium

V

valacyclovir
VALTURNA
VELTIN
venlafaxine
venlafaxine ext-rel

VENTOLIN HFA
VERAMYST
verapamil ext-rel
VESICARE
VICTOZA
VIVELLE-DOT

W

warfarin
WELCHOL

Z

zafirlukast
ZETIA
zolpidem
zolpidem ext-rel
ZOMIG

PREFERRED ALTERNATIVES LIST

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

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

PRESCRIPTION DRUG SAFETY TIPS:

- Keep the written information about the medicine for as long as you are taking the drug. It contains information about possible side effects.
- Call your doctor as soon as possible when you experience unusual or severe side effects.
- Tell your doctor about other drugs you are taking, including non-prescription or over-the-counter products, allergies you have, and whether you are pregnant or are breast feeding.
- Ask about generics. The Food and Drug Administration (FDA) requires that generic drugs have the same active ingredients as brand-name drugs. Because they do not involve the same research and development costs as the original products, they cost less.
- Never borrow medicine from friends or relatives who appear to have had similar symptoms.
- Don't change or stop taking your medicine without consulting your doctor.
- Discard medicine after the expiration date.
- Store drugs in closed containers in cool, dry places, out of direct sunlight.

Check with your doctor or pharmacist for more information on prescription drug safety.

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. 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 represent some generic and preferred brand drugs of available treatment options within some therapeutic categories 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.

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.