

Caremark Preferred Choice 3-Tier Non-Formulary Drug And Formulary AlternativesList

The column that states "NON-FORMULARY" those medications are all tier 3 medications (non-preferred) while in the column that states "FORMULARY ALTERNATIVES" has all brand name medications in all CAPS (all tier 2 medications -- preferred) and all generics are in lower case italics (tier 1 medications).

Preferred Choice 3-Tier Non-Formulary Drug And Formulary Alternatives List

For the most up-to-date drug list visit www.caremark.com

The **Caremark Preferred Choice 3-Tier Non-Formulary Drug And Formulary Alternatives List**, formerly the *PharmaCare Preferred Choice 3-Tier Non-Formulary Drug And Formulary Alternatives List*, is a guide for clients, plan participants 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. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*.

PLAN PARTICIPANT

Your benefit plan provides you with a prescription benefit program administered by 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 products, regardless of their appearance in this document.
- For specific information regarding your prescription benefit coverage and copay¹ information, please visit our Web site at www.caremark.com or contact a Caremark Customer Care representative.
- 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 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 plan participant's specific 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.

NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
ACCOLATE	SINGULAIR
ACCUPRIL	<i>quinapril</i>
ACCURETIC	<i>quinapril-hydrochlorothiazide</i>
ACCUTANE	<i>isotretinoin</i>
ACEON	<i>fosinopril, lisinopril, quinapril, ramipril</i>
ACIPHEX	NEXIUM, <i>omeprazole, pantoprazole, PREVACID</i>
ADALAT CC	<i>nifedipine ext-rel</i>
ADDERALL	<i>amphetamine-dextroamphetamine</i>
ADOXA, ADOXA PAK	<i>doxycycline</i>
ADVANCE	ACCU-CHEK products, ONETOUCH products
AEROBID, AEROBID M	ASMANEX, FLOVENT, FLOVENT HFA, PULMICORT, QVAR
ALAMAST	ALOCRIL, ALOMIDE, <i>cromolyn, ketotifen, OPTIVAR, PATANOL</i>
ALDACTAZIDE 25/25 mg	<i>spironolactone-hydrochlorothiazide</i>
ALDACTONE	<i>spironolactone</i>
ALLEGRA	<i>fexofenadine</i>
ALORA	CLIMARA, ESTRADERM, <i>estradiol, VIVELLE-DOT</i>
ALTACE	<i>ramipril</i>
ALTOPREV	ADVICOR, LIPITOR, <i>pravastatin, SIMCOR, simvastatin, VYTORIN</i>

NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
ALUPENT	PROAIR HFA, PROVENTIL HFA, XOPENEX HFA
AMARYL	<i>glimepiride</i>
AMBIEN	LUNESTA, <i>zolpidem</i>
AMERGE	IMITREX, MAXALT, ZOMIG
AMITIZA	<i>lactulose</i>
ANAPROX, ANAPROX DS	<i>naproxen sodium</i>
ANASPAZ	<i>hyoscyamine</i>
ANGELIQ	ACTIVELLA, PREFEST, PREMPHASE, PREMPRO
ARMOUR THYROID	<i>levothyroxine, Levoxyol, SYNTHROID</i>
ARTHROTEC	<i>diclofenac, misoprostol</i>
ASCENSIA	ACCU-CHEK products, ONETOUCH products
ATROVENT HFA	SPIRIVA
AUGMENTIN, AUGMENTIN ES 600	<i>amoxicillin-clavulanate</i>
AVAR GEL	<i>sulfacetamide-sulfur</i>
AXERT	IMITREX, MAXALT, ZOMIG
AYGESTIN	<i>norethindrone acetate</i>
AZMACORT	ASMANEX, FLOVENT, FLOVENT HFA, PULMICORT, QVAR
BECONASE AQ	<i>fluticasone, NASACORT AQ, NASONEX, RHINOCORT AQUA, VERAMYST</i>
BENZAMYCIN, BENZAMYCIN PAK	BENZACLIN, <i>erythromycin-benzoyl peroxide</i>

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

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NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
BENIQ, BENIQ LS	<i>sulfacetamide-sulfur</i>
BETAPACE, BETAPACE AF	<i>sotalol, sotalol AF</i>
BLEPH-10	<i>sulfacetamide</i>
BONIVA	<i>ACTONEL, alendronate</i>
BRAVELLE	<i>GONAL-F, GONAL-F RFF</i>
BREVICON	<i>Necon, Nortrel</i>
BUSPAR	<i>bupirone</i>
CALAN SR	<i>verapamil ext-rel</i>
CANTIL	<i>dicyclomine, hyoscyamine</i>
CARDIZEM CD	<i>diltiazem ext-rel</i>
CARDURA	<i>doxazosin</i>
CARDURA XL	<i>AVODART, doxazosin, finasteride, FLOMAX, terazosin</i>
CATAPRES	<i>clonidine</i>
CEDAX	<i>cefdinir</i>
CEFTIN	<i>cefuroxime</i>
CEFZIL	<i>cefprozil</i>
CELEXA	<i>citalopram</i>
CENESTIN	<i>ENJUVA, estradiol, estropipate, PREMARIN</i>
CENOGEN ULTRA	<i>PRENATE ELITE</i>
CILOXAN	<i>ciprofloxacin, VIGAMOX</i>
CIPRO, CIPRO XR	<i>ciprofloxacin, ciprofloxacin ext-rel</i>
CLARINEX	<i>fezofenadine</i>
CLARINEX D	<i>ALLEGRA-D</i>
CLEOCIN capsule 150 mg, CLEOCIN capsule 300 mg	<i>clindamycin</i>
CLEOCIN-T	<i>clindamycin</i>
CLINDAGEL	<i>METROGEL, metronidazole, sulfacetamide-sulfur</i>
CLOMID	<i>clomiphene</i>
COGNEX	<i>ARICEPT, EXELON, NAMENDA, RAZADYNE, RAZADYNE ER</i>
COLAZAL	<i>balsalazide</i>
COLY-MYCIN S	<i>CIPRODEX, neomycin-polymyxin B-hydrocortisone otic, ofloxacin otic</i>
CORTANE-B OTIC	<i>CIPRODEX, neomycin-polymyxin B-hydrocortisone otic, ofloxacin otic</i>
CORTISPORIN oint	<i>bacitracin-polymyxin B-neomycin-hydrocortisone</i>
CORTISPORIN OTIC	<i>neomycin-polymyxin B-hydrocortisone otic</i>
COZAAR	<i>ATACAND², AVAPRO, BENICAR, MICARDIS</i>
CRESTOR	<i>ADVICOR, LIPITOR, pravastatin, SIMCOR, simvastatin, VYTORIN</i>
CUTIVATE	<i>fluticasone propionate</i>
CYCLESSA	<i>Velivet</i>
CYTOTEC	<i>misoprostol</i>
D.H.E. 45	<i>dihydroergotamine inj</i>
DAYPRO	<i>oxaprozin</i>
DEMADEX	<i>toremide</i>
DEMULEN	<i>Zovia</i>
DESOGEN	<i>Apri</i>
DESOWEN	<i>desonide</i>
DIDRONEL	<i>ACTONEL, alendronate, etidronate</i>
DIFLUCAN	<i>fluconazole</i>
DILACOR XR	<i>diltiazem ext-rel</i>
DILAUDID	<i>hydromorphone</i>

NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
DIOVAN, DIOVAN HCT	<i>ATACAND², ATACAND HCT, AVALIDE, AVAPRO, BENICAR, BENICAR HCT, MICARDIS, MICARDIS HCT</i>
DIPENTUM	<i>ASACOL, mesalamine, PENTASA, sulfasalazine, sulfasalazine delayed-rel</i>
DITROPAN, DITROPAN XL	<i>DETROL, DETROL LA, ENABLEX, oxybutynin, oxybutynin ext-rel, OXYTROL, VESICARE</i>
DORAL	<i>LUNESTA, zolpidem</i>
DORYX	<i>doxycycline hydrate, tetracycline</i>
DURAGESIC	<i>fentanyl</i>
DYNACIN	<i>minocycline</i>
DYNACIRC CR	<i>amlodipine, nifedipine ext-rel</i>
EC-NAPROSYN	<i>naproxen</i>
ECONOPRED PLUS	<i>prednisolone acetate</i>
EFFEXOR	<i>venlafaxine</i>
ELDEPRYL	<i>selegiline</i>
ELESTAT	<i>ALOCRI, ALOMIDE, ketotifen, OPTIVAR, PATANOL</i>
ELOCON	<i>mometasone</i>
EMADINE	<i>ALOCRI, ALOMIDE, cromolyn, ketotifen, OPTIVAR, PATANOL</i>
EMSAM	<i>selegiline</i>
EPOGEN	<i>ARANESP, PROCRIT</i>
ERTACZO	<i>ciclopirox, econazole, ketoconazole topical, OXISTAT</i>
ESGIC, ESGIC-PLUS	<i>butalbital-acetaminophen-caffeine</i>
ESTRACE tablet	<i>ENJUVA, estradiol, estropipate, PREMARIN</i>
ESTRASORB	<i>CLIMARA, ESTRADERM, estradiol, VIVELLE-DOT</i>
ESTROGEL	<i>CLIMARA, ESTRADERM, estradiol, VIVELLE-DOT</i>
ESTROSTEP FE	<i>Tilia FE, Tri-Legeste FE</i>
EXACTECH, EXACTECH RSG	<i>ACCU-CHEK products, ONETOUCH products</i>
FACTIVE	<i>AVELOX, ciprofloxacin, ciprofloxacin ext-rel, LEVAQUIN</i>
FELDENE	<i>piroxicam</i>
FEMHRT	<i>ACTIVELLA, PREFEST, PREMPHASE, PREMPRO</i>
FEMTRACE	<i>estradiol</i>
FENTORA	<i>fentanyl</i>
FIORICET	<i>butalbital-acetaminophen-caffeine</i>
FIORINAL	<i>butalbital-aspirin-caffeine</i>
FIRST-PROGESTERONE VGS	<i>CRINONE, PROCHIEVE, PROMETRIUM</i>
FIRST-TESTOSTERONE MC	<i>ANDRODERM, ANDROGEL</i>
FLAGYL	<i>metronidazole</i>
FLONASE	<i>fluticasone, NASACORT AQ, NASONEX, RHINOCORT AQUA, VERAMYST</i>
FLUOROPLEX	<i>CARAC, fluorouracil</i>
FML LIQUIFILM	<i>fluorometholone</i>
FOCALIN	<i>dexmethylphenidate</i>
FOLLISTIM AQ	<i>GONAL-F, GONAL-F RFF</i>
FORTAMET	<i>metformin ext-rel</i>
FREESTYLE	<i>ACCU-CHEK products, ONETOUCH products</i>
GLUCOMETER DEX, GLUCOMETER ELITE, GLUCOMETER ENCORE	<i>ACCU-CHEK products, ONETOUCH products</i>
GLUCOPHAGE, GLUCOPHAGE XR	<i>metformin, metformin ext-rel</i>
GLUCOSOURCE lancets	<i>ONETOUCH, SOFT TOUCH, SOFTCLIX</i>
GLUCOTROL, GLUCOTROL XL	<i>glipizide, glipizide ext-rel</i>
GLUCOVANCE	<i>glyburide-metformin</i>
GLUMETZA	<i>metformin ext-rel</i>

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NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
GLYNASE PRESTAB	<i>glyburide micronized</i>
GLYSET	PRECOSE
GYNAZOLE-1	<i>terconazole</i>
HYCET	<i>hydrocodone-acetaminophen</i>
HYTRIN	<i>terazosin</i>
HYZAAR	ATACAND HCT, AVALIDE, BENICAR HCT, MICARDIS HCT
INNOPRAN XL	<i>propranolol ext-rel</i>
INTAL SOLUTION	<i>cromolyn soln</i>
IOPIDINE 0.5%	ALPHAGAN P, <i>brimonidine</i>
ISOPTIN SR	<i>verapamil ext-rel</i>
ISORDIL	<i>isosorbide</i>
KENALOG	<i>triamcinolone</i>
KETEK, KETEK PAK	<i>azithromycin, clarithromycin, clarithromycin ext-rel, erythromycin</i>
KLONOPIN WAFERS	<i>clonazepam ODT</i>
KUTRASE	CREON, ULTRASE, ULTRASE MT, VIOKASE
KU-ZYME, KU-ZYME HP	CREON, ULTRASE, ULTRASE MT, VIOKASE
LAC-HYDRIN	<i>ammonium lactate</i>
LAMISIL tablet	<i>terbinafine tablet</i>
LASIX	<i>furosemide</i>
LESCOL, LESCOL XL	ADVICOR, LIPITOR, <i>pravastatin</i> , SIMCOR, <i>simvastatin</i> , VYTORIN
LEVBID	<i>hyoscyamine</i>
LEVITRA	CIALIS, VIAGRA
LEVLEN	<i>Levora, Portia</i>
LEVLITE	<i>Aviane, Lessina</i>
LEVSIN, LEVSIN SL	<i>hyoscyamine</i>
LEVSINEX	<i>hyoscyamine</i>
LEXEL	<i>amlodipine-benazepril</i> , TARKA
LIDEX	<i>fluocinonide</i>
LOESTRIN	<i>Junel, Microgestin</i>
LOESTRIN FE	<i>Junel FE, Microgestin FE</i>
LOFIBRA	<i>fenofibrate</i> , TRICOR
LOMOTIL	<i>diphenoxylate-atropine</i>
LO/OVRAL	<i>Cryselle, Low-Ogestrel</i>
LOPRESSOR, LOPRESSOR HCT	<i>metoprolol, metoprolol-hydrochlorothiazide</i>
LORCET, LORCET PLUS	<i>hydrocodone-acetaminophen</i>
LORTAB	<i>hydrocodone-acetaminophen</i>
MAVIK	<i>trandolapril</i>
MAXAIR	PROAIR HFA, PROVENTIL HFA, XOPENEX HFA
MAXIDONE	<i>hydrocodone-acetaminophen</i>
MAXITROL	<i>neomycin-polymyxin B-dexamethasone</i>
MAXZIDE	<i>triamterene-hydrochlorothiazide</i>
MEGACE	<i>megestrol acetate</i>
MENEST	ENJUVIA, <i>estradiol, estropipate</i> , PREMARIN
MENOPUR	GONAL-F, GONAL-F RFF
MENOSTAR	CLIMARA, ESTRADERM, <i>estradiol</i> , VIVELLE-DOT
METAGLIP	<i>glipizide-metformin</i>
METROCREAM	<i>metronidazole cream</i>
METROGEL VAG	<i>metronidazole vag gel</i>
METROLOTION	<i>metronidazole lotion</i>
MICRONASE	<i>glyburide</i>

NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
MICROZIDE	<i>hydrochlorothiazide</i>
MIMYX	<i>ammonium lactate</i>
MINOCIN	<i>minocycline</i>
MIRCETTE	<i>Kariva</i>
MOBIC	<i>meloxicam</i>
MODICON	<i>Necon, Nortrel</i>
MONOPRIL	<i>fosinopril</i>
MONOPRIL-HCT	<i>fosinopril-hydrochlorothiazide</i>
MOTRIN	<i>ibuprofen</i>
MS CONTIN	<i>morphine ext-rel</i>
MUSE	CIALIS, EDEX, VIAGRA
MYFORTIC	CELLCEPT
NAPRELAN	<i>naproxen sodium</i>
NAPROSYN	<i>naproxen</i>
NASAREL	<i>flunisolide, fluticasone</i> , NASACORT AQ, NASONEX, RHINOCORT AQUA, VERAMYST
NASCOBAL NASAL SPRAY	<i>cyanocobalamin</i>
NECON 10/11	<i>Kariva</i> , ORTHO TRI-CYCLEN LO, YASMIN, YAZ
NEURONTIN	<i>gabapentin</i>
NEVANAC	ACULAR LS, ACULAR PF, <i>diclofenac sodium ophth</i> , XIBROM
NEXGEN	ACCU-CHEK products, ONETOUCH products
NIRAVAM	<i>alprazolam</i>
NITROSTAT	<i>nitroglycerin sublingual</i>
NORCO	<i>hydrocodone-acetaminophen</i>
NORDETTE	<i>Levora, Portia</i>
NORINYL	<i>Necon, Nortrel</i>
NOROXIN	AVELOX, <i>ciprofloxacin, ciprofloxacin ext-rel</i> , LEVAQUIN
NORPRAMIN	<i>desipramine</i>
NORITATE	METROGEL, <i>metronidazole</i>
NORVASC	<i>amlodipine</i>
NOVACORT	<i>hydrocortisone valerate</i>
NOVASAL	<i>diflunisal, salsalate</i>
NUMOISYN	EVOXAC
OCUFLOX	<i>ofloxacin</i>
OGEN	ENJUVIA, <i>estradiol, estropipate</i> , PREMARIN
OPANA	<i>morphine</i>
ORTHO MICRONOR	<i>Jolivette</i>
ORTHO TRI-CYCLEN	<i>Trinessa, Tri-Previfem, Tri-Sprintec</i>
ORTHO-CEPT	<i>Apri</i>
ORTHO-CYCLEN	<i>Mononessa, Previfem, Sprintec</i>
ORTHO-NOVUM	<i>Necon, Nortrel</i>
OVCON	<i>Necon, Nortrel</i>
PANCREASE, PANCREASE MT	CREON, ULTRASE, ULTRASE MT, VIOKASE
PANLOR DC, PANLOR SS	<i>hydrocodone-acetaminophen</i>
PARAFON FORTE DSC	<i>chlorzoxazone</i>
PAXIL	<i>paroxetine</i>
PCE	<i>erythromycin</i>
PEDIAPRED	<i>prednisolone</i>
PEDIOTIC	CIPRODEX, <i>neomycin-polymyxin B-hydrocortisone otic</i> , <i>ofloxacin otic</i>
PEPCID, PEPCID RPD	<i>famotidine</i>

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NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
PERSANTINE	<i>dipyridamole</i>
PEXEVA	<i>paroxetine, PAXIL CR</i>
PLAQUENIL	<i>hydroxychloroquine</i>
PLEXION, PLEXION SCT	<i>BENZACLIN, DIFFERIN, RETIN-A MICRO, sulfacetamide-sulfur, TAZORAC, tretinoin</i>
POLYSPORIN	<i>polymyxin B-bacitracin</i>
POLYTRIM	<i>polymyxin B-trimethoprim</i>
PONSTEL	<i>mefenamic acid</i>
PRAVACHOL	<i>ADVICOR, LIPITOR, pravastatin, SIMCOR, simvastatin, VYTORIN</i>
PRECISION, PRECISION QID, PRECISION XTRA	<i>ACCU-CHEK products, ONETOUCH products</i>
PRED FORTE	<i>prednisolone acetate</i>
PRELONE	<i>prednisolone</i>
PRESTIGE	<i>ACCU-CHEK products, ONETOUCH products</i>
PRIOSEC	<i>NEXIUM, omeprazole, pantoprazole, PREVACID</i>
PRIMACARE	<i>PRENATE ELITE</i>
PRINIVIL	<i>lisinopril</i>
PRINZIDE	<i>lisinopril-hydrochlorothiazide</i>
PROCARDIA XL	<i>nifedipine ext-rel</i>
PROFASI, PROFASI HP	<i>chorionic gonadotropin</i>
PROQUIN XR	<i>AVELOX, ciprofloxacin, ciprofloxacin ext-rel, LEVAQUIN</i>
PROSCAR	<i>finasteride</i>
PROTONIX	<i>NEXIUM, omeprazole, pantoprazole, PREVACID</i>
PROVERA	<i>medroxyprogesterone</i>
PROZAC	<i>fluoxetine</i>
PROZAC WEEKLY	<i>citalopram, fluoxetine, LEXAPRO, paroxetine, PAXIL CR, sertraline</i>
PSORCON E	<i>diflorasone diacetate</i>
QUESTRAN, QUESTRAN LIGHT	<i>cholestyramine, cholestyramine light, WELCHOL</i>
RANICLOR	<i>cefaclor</i>
RAPIFLUX	<i>fluoxetine</i>
RELION INSULIN	<i>HUMULIN INSULIN, NOVOLIN INSULIN</i>
RELPAZ	<i>IMITREX, MAXALT, ZOMIG</i>
REMERON, REMERON SOLTAB	<i>mirtazapine, mirtazapine ODT</i>
REPREXAIN	<i>hydrocodone-acetaminophen</i>
REPRONEX	<i>GONAL-F, GONAL-F RFF</i>
RIFADIN	<i>rifampin</i>
RIOMET	<i>metformin, metformin ext-rel</i>
RITALIN, RITALIN-SR	<i>methylphenidate, methylphenidate ext-rel</i>
ROZEREM	<i>LUNESTA, zolpidem</i>
ROZEX	<i>METROGEL, metronidazole lotion</i>
RYTHMOL	<i>propafenone</i>
SANCTURA	<i>DETROL, DETROL LA, ENABLEX, oxybutynin, oxybutynin ext-rel, OXYTROL, VESICARE</i>
SEASONALE	<i>Quasense</i>
SEASONIQUE	<i>ORTHO TRI-CYCLEN LO, Quasense, YASMIN, YAZ</i>
SEB-PREV	<i>sulfacetamide-sulfur</i>
SELSEB	<i>selenium sulfide shampoo</i>
SELSUN RX	<i>selenium sulfide shampoo</i>
SILVADENE	<i>silver sulfadiazine</i>
SINEMET, SINEMET CR	<i>carbidopa-levodopa, carbidopa-levodopa ext-rel</i>

NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
SKELID	<i>ACTONEL, alendronate</i>
SOLARAZE	<i>CARAC, fluorouracil</i>
SONATA	<i>LUNESTA, zolpidem</i>
SPECTRACEF	<i>cefdinir</i>
STARLIX	<i>PRANDIN</i>
STRIANT	<i>ANDRODERM, ANDROGEL</i>
SULFACET-R	<i>sulfacetamide-sulfur</i>
SYMAX DUOTAB	<i>hyoscyamine</i>
SYMBYAX	<i>fluoxetine, ZYPREXA</i>
SYNALGOS DC	<i>hydrocodone-acetaminophen</i>
TALADINE	<i>ranitidine</i>
TAMBOCOR	<i>flecainide</i>
TAPAZOLE	<i>methimazole</i>
TASMAR	<i>COMTAN, STALEVO</i>
TEMOVATE, TEMOVATE E	<i>clobetasol propionate, clobetasol propionate emollient</i>
TERAZOL	<i>terconazole</i>
TESTIM	<i>ANDRODERM, ANDROGEL</i>
TEVETEN, TEVETEN HCT	<i>ATACAND², ATACAND HCT, AVALIDE, AVAPRO, BENICAR, BENICAR HCT, MICARDIS, MICARDIS HCT</i>
TRETIN-X	<i>DIFFERIN, RETIN-A MICRO, TAZORAC, tretinoin</i>
TRIGLIDE	<i>fenofibrate, TRICOR</i>
TRI-LEVLIN	<i>Enpresse, Trivora</i>
TRI-NORINYL	<i>Aranelle</i>
TRIPHASIL	<i>Enpresse, Trivora</i>
TRUE CARE	<i>ACCU-CHEK products, ONETOUCH products</i>
TRUETRACK	<i>ACCU-CHEK products, ONETOUCH products</i>
TWINJECT	<i>EPIPEN, EPIPEN JR</i>
ULTIMA	<i>ACCU-CHEK products, ONETOUCH products</i>
ULTRAM	<i>tramadol</i>
UNISTIK 3	<i>ACCU-CHEK products, ONETOUCH products</i>
UNIVASC	<i>moexipril</i>
URISPAS	<i>flavoxate</i>
UROCIT-K	<i>potassium citrate</i>
UROXATRAL	<i>AVODART, doxazosin, finasteride, FLOMAX, terazosin</i>
VANSPAR	<i>bupirone</i>
VANTIN	<i>cefepodoxime</i>
VASERETIC	<i>enalapril-hydrochlorothiazide</i>
VASOTEC	<i>enalapril</i>
VENTOLIN HFA	<i>PROAIR HFA, PROVENTIL HFA, XOPENEX HFA</i>
VIBRAMYCIN capsule	<i>doxycycline hyclate</i>
VICODIN, VICODIN ES	<i>hydrocodone-acetaminophen</i>
VOLTAREN, VOLTAREN XR	<i>diclofenac sodium, diclofenac sodium ext-rel</i>
WELLBUTRIN, WELLBUTRIN SR	<i>bupropion, bupropion ext-rel</i>
WESTCORT	<i>hydrocortisone valerate</i>
XANAX, XANAX XR	<i>alprazolam, alprazolam ext-rel</i>
XODOL	<i>hydrocodone-acetaminophen</i>
XOLEGEL	<i>ketoconazole topical</i>
Z-CLINZ	<i>BENZACLIN</i>
ZACLIR	<i>erythromycin-benzoyl peroxide</i>
ZANAFLEX	<i>tizanidine</i>
ZEGERID	<i>NEXIUM, omeprazole, pantoprazole, PREVACID</i>
ZELAPAR	<i>AZILECT, selegiline</i>

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

Your specific prescription benefit plan design may not cover certain products, regardless of their appearance in this document. For specific information, visit our Web site at www.caremark.com or contact a Caremark Customer Care representative. Page 4 of 5

NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
ZESTORETIC	<i>lisinopril-hydrochlorothiazide</i>
ZESTRIL	<i>lisinopril</i>
ZETACET	<i>sulfacetamide-sulfur</i>
ZIAC	<i>bisoprolol-hydrochlorothiazide</i>
ZITHROMAX, Z-PAK	<i>azithromycin</i>
ZMAX	<i>azithromycin</i>
ZOCOR	ADVICOR, LIPITOR, <i>pravastatin</i> , SIMCOR, <i>simvastatin</i> , VYTORIN

NON-FORMULARY DRUGS	FORMULARY ALTERNATIVE(S)*
ZODERM	BENZACLIN, <i>erythromycin-benzoyl peroxide</i>
ZOLOFT	<i>sertraline</i>
ZOVIRAX oral	<i>acyclovir</i>
ZYDONE	<i>hydrocodone-acetaminophen</i>
ZYFLO CR	SINGULAIR
ZYLOPRIM	<i>allopurinol</i>

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FOR YOUR INFORMATION: Generics should be considered the first line of prescribing. This Non-Formulary Drug And Formulary Alternatives 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 products, regardless of their appearance in this document. The plan participant's prescription benefit plan may have a different copay for specific products on the list. Unless otherwise indicated, drug list products will include all dosage forms. This list represents brand products in CAPS, branded generics in upper- and lowercase *Italics*, and generic products in lowercase *italics*. 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. This is not a complete list of all formulary products. Any brand-name drug for which a generic product becomes available may be designated as a non-formulary product. Log in to www.caremark.com to check coverage and copay information for a specific medicine.

- ¹ Copayment, copay or coinsurance means the amount a plan participant 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 Atacand should be reserved for patients who meet CHARM (Candesartan in Heart Failure - Assessment of Reduction in Mortality and Morbidity) trial criteria.

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

Caremark may receive rebates, discounts and service fees from pharmaceutical manufacturers for certain listed products.

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