

State of Ternessee
PARTNERS
FOR HEALTH.
CVS/caremark
2700 Milan Court
Birmingham, AL 35211

info.caremark.com/stateoftn or For a complete listing of retail pharmacies and other Caremark Services, Caremark participating visit our website at

1-877-522-8679.

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# What you'll find inside:

- The CVS/caremark Commitment to Plan Participants
- Making the Most of Your Prescription Benefit Program
- Your Prescription Benefit Plan
- Getting Your Prescription Filled
- Helpful Tips
- The CVS/caremark Difference
- Advantages of Generics
- Common Brand with Generics Available
- CVS Caremark Specialty Network for Chronic or Genetic Conditions
- State of Tennessee Drug List
- Mail Service Order Form

### Find more information online

You can always access the most up-to-date information on your prescription benefits at info.caremark.com/stateoftn . Once you've registered, you can:

- View your plan's preferred drug list
- Check drug costs
- Print extra Prescription Cards
- Request new prescriptions using FastStart®
- Refill prescriptions
- Sign up for ReadyFill at Mail<sup>™</sup> (automatic prescription refill program)
- Find prescription savings tips
- Print a claim form

Be sure to have your Prescription Card with ID number with you when you register.

For information about Plan Member Rights and Responsibilities, visit the Customer Care page at info.caremark.com/stateoftn .

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

7529-IDX-1014

# The CVS/caremark Commitment to Plan Participants

CVS/caremark is the company selected by your employer or health plan to administer your prescription drug benefits.

# CVS/caremark is committed to providing you with convenience and value:

- through our relationship with over 67,000 retail pharmacies
- by delivering prescription drugs directly to you through CVS Caremark Mail Service Pharmacy

# CVS/caremark is committed to improving your safety by:

- supporting and educating your doctors and other prescribers so they can make appropriate drug treatment decisions for you
- making sure the prescription drugs you receive are what your doctor or other prescriber agreed to after talking with a CVS/caremark pharmacist
- · seeking to identify and prevent any unintended drug interactions

# CVS/caremark is committed to helping you and your benefit plan sponsor achieve significant savings by:

- encouraging the use of medically appropriate generic and lower-cost brand-name drugs
- filling your long-term and maintenance medications through our CVS Caremark Mail Service Pharmacy or participating retail 90-day pharmacies.

# CVS/caremark is committed to giving you enhanced customer service while staying focused on your privacy by ensuring that:

- our employees follow detailed ethical standards as well as a comprehensive Code of Conduct
- our pharmacists follow a professional Code of Ethics

All of our communications about your benefit plan, our online tools, and our health management and clinical programs are designed to help you improve your health, become a better informed health care consumer, and save you money on your prescription drugs. We look forward to supporting your health care needs.

# You can find out more about CVS/caremark and our services at info.caremark.com/stateoftn.

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

# **Making the Most of Your Prescription Benefit Program**

Many people use their prescription benefit more often than any other part of their health coverage. It's such an important part of your health care that it pays to take a few minutes to review the material included in this booklet.

Here you'll find all the information you need to fill your prescriptions at a reasonable cost. For more detailed information on your personal prescription history and benefit as well as general health information, visit **info.caremark.com/stateoftn**.

# The CVS/caremark commitment to you includes:

- Helping you get the appropriate prescription for any medical condition covered under your plan
- Supporting your overall health and well-being goals
- Making your health care experience comfortable and convenient

### Go Generic to Make the Most of Your Benefit

Many medications are available in both brand-name and generic versions. The U.S. Food and Drug Administration (FDA) reviews all generic medications to ensure that they have the same active ingredient, strength, dosage form, effectiveness and quality as the brand-name equivalent. To save money on your medications, always ask your doctor or other prescriber to approve a generic substitution when you get a prescription.

# **Getting Your Prescription Filled**

Under your prescription benefit program, you can get your prescriptions filled at a participating retail pharmacy or through the CVS Caremark Mail Service Pharmacy.

# **For New Prescriptions**

# Retail pharmacy

To find a participating pharmacy near you, go to **info.caremark.com/stateoftn** or call your Customer Care number.

- 1. If given the choice, always ask for generics.
- 2. At the pharmacy, present your prescription along with your Prescription Card.
- 3. Make sure that the pharmacist has accurate information about you and your covered dependents, including dates of birth and gender.
- 4. The pharmacist will look up your benefit information on the computer to verify coverage and dispense the prescription.
- 5. Certain retail pharmacies participate in the special Retail 90 network where you can receive up to a 90 day supply of your medication if your doctor prescribes such a quantity. Go to info.caremark.com/stateoftn, log in, and click on the red flag that is located near "Important Message". Once there, click "Visit Your Forms for Print" and scroll down for the links under the "Additional Information" section.

# **CVS Caremark Mail Service Pharmacy**

The CVS Caremark Mail Service Pharmacy provides a convenient and cost-effective way for you to order long-term medications. Follow these steps to make sure you have a continuous supply:

- 1. Let your doctor or other prescriber know you would prefer a generic prescription medication, when appropriate.
- Ask for two prescriptions: one for a long-term supply as defined by your coverage and the other for immediate use. Have the short-term prescription filled at a participating retail pharmacy.

- 3. Complete a mail service order form and send it to CVS/caremark along with your original long-term prescription.
- 4. Please allow 7-10 days for delivery from the time your order is placed. You will receive a new mail service order form and preaddressed envelope with each shipment.
- If your plan requires payment, please provide payment information when you place your order. Acceptable forms of payment include personal check, money order, Visa, Mastercard, American Express, or Discover.

### **For Refills**

# **Participating Retail Pharmacy**

If your doctor or other prescriber has ordered refills, let your pharmacist know when you are ready to reorder.

# **CVS Caremark Mail Service Pharmacy**

You can order refills by Internet, phone or mail. The information included with your last order will show the date you can request a refill and the number of refills you have left.

- Online at info.caremark.com/stateoftn. This is the most convenient way to order refills and inquire about the status of your order any time of the day or night. You will need to register and log in to access service.
- **By phone**. Call your Customer Care toll-free number for fully automated refill service. Have your ID number ready.
- **By mail**. Simply fill in the ovals for the prescriptions you want to refill. If you need to refill a medication that is not listed, write the prescription number(s) in the space provided. Enclose payment with your order, if your plan requires a payment. Acceptable forms of payment include personal check, money order, Visa, Mastercard, American Express, or Discover.

# **Helpful Tips**

### When you visit your doctor or other prescriber:

- Let your doctor or other prescriber know that you are interested in using prescription medications that are appropriate for you and cost-effective.
- If you need a prescription, ask for a generic and ask your doctor or other prescriber to authorize generic substitution when medically appropriate (find out more about generic prescription medication at the end of this booklet).
- In case no generic is available, take this booklet along and share the current State of Tennessee Drug List of preferred brand products (always available online) with your doctor or other prescriber. This can save you money.
- Make sure your doctor or other prescriber indicates the number of refills on the prescription, if appropriate.
- If your doctor or other prescriber tells you that you will be taking a certain medication for a long time, ask for both a short-term and a long-term prescription. This will allow you to fill a 30 day script at your local pharmacy immediately and a 90 day script later via either mail order or certain Retail 90 pharmacies.

# If you have questions about your prescription medication:

For information about your prescribed medication, log on to **info.caremark.com/stateoftn** at any time, day or night. You can also talk to a pharmacist or nurse by calling your Customer Care number. Important information on common medication uses, specific instructions and possible side effects is typically included with your prescription.

# If you have prescriptions at a non-participating pharmacy:

You may be able to save by having your prescription transferred to a participating retail pharmacy. To do this, contact a participating retail pharmacy and tell the pharmacist where your prescription is currently on file. If possible, have your prescription bottle with you when you make the call so you can answer any questions. The pharmacist will contact the non-participating pharmacy and make the transfer for you. When you pick up the prescription, bring along your prescription card so that the pharmacist can verify coverage.

# The CVS/caremark Difference

As your prescription benefit manager, CVS/caremark is dedicated to helping you get the medication you have been prescribed. In addition to this service, we are committed to supporting your overall health goals and making your health care experience as convenient and comfortable as possible.

Here are some of the extra services we provide.

## **Keeping you informed:**

If you have questions about medication you've been prescribed or about your health condition, you can contact a pharmacist by calling your Customer Care number. You can also learn more by logging on to **info.caremark.com/stateoftn**.

# Making cost-effective prescription choices:

If there is a less expensive alternative to a medication you have been prescribed, CVS/caremark may contact your doctor or other prescriber and ask whether it might be appropriate to substitute another product. In most cases, these alternatives are generic equivalents or brand-name medications included on our drug list. It is our policy never to make such a substitution without your doctor or other prescriber's approval.

# **Compound medications:**

Certain retail pharmacies in the CVS/caremark network may be able to provide you with a compound medication if your doctor prescribes such a medication. Please call Customer Care at 1-877-522-8679 to locate a pharmacy.

# **Providing Specialty Pharmacy Services:**

Certain chronic and/or genetic conditions require special pharmacy products, often in the form of injected or infused medications. CVS/caremark provides these products directly to plan participants along with special support, including regular phone calls to answer questions about using the medication. Every plan participant is also provided with a pharmacist-led CareTeam for ongoing support and counseling.

# **CVS Caremark Specialty Pharmacy for Chronic or Genetic Conditions**

Certain chronic or genetic conditions require special pharmacy products, typically in the form of an injected or infused medication. If you or a covered dependent require(s) these types of medications, CVS Caremark Specialty Pharmacy will provide convenient delivery of these products along with supplies, equipment and personal support and counseling, or you may be able to utilize the services of other specialty pharmacies in the CVS/caremark Specialty network. Call 1-877-522-8679 for assistance in locating one.

# **Professional Pharmacy Care and Counseling**

- Assistance in securing coverage for new drugs and therapies, processing insurance paperwork, coordinating benefits and obtaining all necessary authorizations
- Pharmacist- or nurse-led Customer CareTeam available to address your questions and concerns
- Counseling services to provide personal support and tips on managing your condition

# **Personal Support**

- Educational materials and support, including telephone training, written materials, videos, websites and patient support groups
- Assessments of the progress of your therapy, benefit coverage issues, and other health or medication concerns
- Pharmacists available 24 hours a day for emergency consultations

### **Convenient Service**

- Enjoy fast and confidential delivery to the location of your choice (home, office, doctor's office, vacation destination)
- Timely refill reminders with personal calls from the pharmacy staff of the CVS Caremark Specialty Pharmacy

# **Easy Enrollment**

To enroll in the benefits and services of CVS Caremark Specialty Pharmacy, please call Specialty Customer Care toll-free at 1-800-237-2767 or visit info.caremark.com/stateoftn.

# CVS Caremark Specialty Pharmacy services are available for\*:

Allergic asthma

Crohn's disease

Growth hormone and related disorders

Hematopoietics

Hemophilia, von Willebrand disease and related bleeding disorders

Hepatitis C

Hormonal therapies

Immune deficiencies and related disorders

Infertility

Lysosomal storage disorders

Macular degeneration

Multiple sclerosis

Oncology

Osteoarthritis

Osteoporosis

**Psoriasis** 

Pulmonary arterial hypertension

Pulmonary disease

Renal disease

Respiratory syncytial

Rheumatoid arthritis

Virus prevention

<sup>\*</sup>Products distributed by CVS Caremark Specialty Pharmacy and therapies covered by CVS/caremark may change or expand from time to time. Call the CVS Caremark Specialty Pharmacy toll-free at 1-800-237-2767 to check on desired medications or therapy areas not listed here.

# **Advantages of Generics**

# "I've never considered generics. Should I?"

Choosing generics is one of the best ways to save money on prescription medications. In fact, consumers overall save an estimated \$8 billion to \$10 billion a year when choosing a generic instead of a brand-name medication.\* Here are some other things to know:

- A generic medication is one that has been approved by the U.S. Food and Drug Administration (FDA) and found to be as safe and effective as the equivalent brand-name medication
- Companies that make generics must meet FDA manufacturing and quality standards
- Even though a generic medication may be a different shape or color than the brand-name medication, it is the same in strength (number of milligrams), dosage form (pill, liquid, cream), quality, active ingredient, and effectiveness
- Generics are available for some of the most commonly prescribed medications such as Ambien<sup>®</sup>, Prilosec, Imitrex<sup>®</sup>, Glucophage<sup>®</sup>, Norvasc<sup>®</sup>, Prozac<sup>®</sup>, Ritalin<sup>®</sup>, and Zocor<sup>®</sup>. To find out if one of your prescriptions has a generic available, visit info.caremark.com/stateoftn or call Customer Care toll-free at 1-877-522-8679.

**Savings tip:** The first chance you have to save money is when your doctor or other prescriber writes your prescription. Ask if there is a generic available first. If not, ask for your doctor or other prescriber to write a prescription for one of the medications on your plan's State of Tennessee Drug List. You will usually end up paying more for a brand-name medication not on the preferred list.

\*Congressional Budget Office

# **Common Brand-Names with Generics Available**

The drugs listed here include some of the most commonly prescribed brand-name medications that have FDA-approved generic equivalents. If you are taking one of these medications, you may be able to save money by taking the generic equivalent. There are many more brand-name medications that have generics available.

To find out if a medication you've been prescribed has a generic available, please visit **info.caremark.com/stateoftn**, call your Customer Care number or ask your doctor or pharmacist.

BRAND-NAME	GENERIC DRUG NAME	COMMONLY USED FOR*
AMBIEN®	zolpidem	Sleep Disorder
CARDURA®	doxazosin mesylate	High Blood Pressure, Enlarged Prostate
DARVOCET-N®	propoxyphene napsylate/ acetaminophen	Pain
DITROPAN XL®	oxybutynin ext-rel	Overactive Bladder
ESTRACE®	estradiol	Hormone Replacement
GLUCOPHAGE®	metformin HCl	Diabetes
IMDUR®	isosorbide mononitrate	Angina (Chest Pain)
NORVASC®	amlodipine	High Blood Pressure
PRILOSEC®	omeprazole	Ulcer, Heartburn
PEPCID®	famotidine	Ulcer, Heartburn
PRINIVIL®/ PRINZIDE®	lisinopril lisinopril/hydrochlorothiazide	High Blood Pressure, Heart Failure
PROZAC®	fluoxetine HCl	Depression
RITALIN®	methylphenidate HCl	Attention Deficit Hyperactivity Disorder (ADHD)
ULTRAM®	tramadol HCl	Pain
VASOTEC®	enalapril maleate	High Blood Pressure, Heart Failure
ZITHROMAX®	azithromycin	Infection
ZOCOR®	simvastatin	Heart Disease - Cholesterol Lowering
ZOLOFT®	sertraline .	Depression

<sup>\*</sup> This list indicates common uses for which the medication is prescribed. Some medications are prescribed for more than one condition. Please discuss all treatments with your doctor or other prescriber.

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# **State of Tennessee Drug List with** Advanced Control Specialty Formulary™

The State of Tennessee Drug List with Advanced Control Specialty Formulary™ 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 are available in drug classes marked with § and 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 copays 1 you can:
  - Visit www.caremark.com, or
  - Contact a CVS Caremark<sup>®</sup> Customer Care representative 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.
- In most instances, a brand-name drug for which a generic product becomes available will be designated as a nonpreferred option upon release of the generic product to the market.

### **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 1 information for a specific medicine.

### **ANALGESICS**

### 8 NSAIDs

diclofenac sodium meloxicam nanroxen

### § NSAIDs, COMBINATIONS

diclofenac sodiummisoprostol

### § NSAIDs, TOPICAL

diclofenac sodium solution **VOLTAREN GEL** 

### § COX-2 INHIBITORS

celecoxib

### § GOUT

allopurinol colchicine tablet probenecid COLCRYS **ULORIC** 

### § OPIOID ANALGESICS codeine-acetaminophen

fentanyl transdermal fentanyl transmucosal lozenge (PA) hydrocodone-acetaminophen hydromorphone hydromorphone ext-rel methadone morphine morphine ext-rel (QL) morphine suppository oxycodone

oxycodone-acetaminophen tramadol MACROLIDES tramadol ext-rel azithromycin **BUTRANS** 

FENTORA (PA) HYSINGLA ER (QL) NUCYNTA (QL) NUCYNTA ER (QL) OPANA ER (QL) OXYCONTIN (QL) SUBSYS (PA)

### ANTI-INFECTIVES

### **ANTIBACTERIALS**

§ CEPHALOSPORINS cefdinir cefnrozil

cefuroxime axetil cephalexin SÚPRAX

§ ERYTHROMYCINS /

clarithromycin clarithromycin ext-rel erythromycins DIFICID

# § FLUOROQUINOLONES

ciprofloxacin ciprofloxacin ext-rel levofloxacin moxifloxacin

### **§ PENICILLINS**

amoxicillin amoxicillin-clavulanate dicloxacillin penicillin VK

### § TETRACYCLINES doxycycline hyclate minocycline

tetracycline

§ ANTIFUNGALS

fluconazole itraconazole (PA) terbinafine tablet (PA)

### **ANTIVIRALS**

§ CYTOMEGALOVIRUS AGENTS valganciclovir

§ HERPES AGENTS acyclovir

valacyclovir

**INFLUENZA AGENTS** RELENZA (QL)

### § MISCELLANEOUS

clindamycin ivermectin

TAMIFLU (QL)



metronidazole nitrofurantoin sulfamethoxazoletrimethoprim ALBENZA **SIVEXTRO** XIFAXAN 550 MG

### ANTINEOPLASTIC **AGENTS**

### § ALKYLATING AGENTS

ALKERAN CYCLOPHOSPHAMIDE **CAPSULE** HEXALEN LEUKERAN **MYLERAN** 

### § ANTIMETABOLITES

**TABLOID** 

### HORMONAL ANTINEOPLASTIC AGENTS

§ ANTIANDROGENS bicalutamide

### § MISCELLANEOUS

LYSODREN MATULANE VISTOGARD

### CARDIOVASCULAR

### § ACE INHIBITORS

fosinopril lisinopril quinapril ramipril

### § ACE INHIBITOR / DIURETIC COMBINATIONS

fosinopril-hydrochlorothiazide lisinopril-hydrochlorothiazide quinapril-hydrochlorothiazide

### § ANGIOTENSIN II **RECEPTOR ANTAGONISTS /** DIURETIC COMBINATIONS

candesartan / candesartanhydrochlorothiazide eprosartan irbesartan / irbesartanhydrochlorothiazide losartan / losartanhydrochlorothiazide telmisartan / telmisartanhydrochlorothiazide valsartan / valsartanhydrochlorothiazide BENICAR / BENICAR HCT

### § ANGIOTENSIN II **RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER COMBINATIONS**

amlodipine-telmisartan amlodipine-valsartan AZOR

### **§ ANGIOTENSIN II RECEPTOR ANTAGONIST / CALCIUM CHANNEL BLOCKER / DIURETIC** COMBINATIONS

amlodinine-valsartanhydrochlorothiazide TRIBENZOR

### **ANTILIPEMICS**

**§ BILE ACID RESINS** cholestyramine WELCHOL

CHOLESTEROL **ABSORPTION INHIBITORS** ZETIA

### § FIBRATES

fenofibrate fenofibric acid

### § HMG-CoA REDUCTASE INHIBITORS / **COMBINATIONS**

atorvastatin fluvastatin lovastatin pravastatin rosuvastatin simvastatin VYTORIN

### § NIACINS niacin ext-rel

VASCEPA

§ OMEGA-3 FATTY ACIDS omega-3 acid ethyl esters

### § BETA-BLOCKERS

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

### **§ CALCIUM CHANNEL BLOCKERS**

amlodipine diltiazem ext-rel<sup>2</sup> nifedipine ext-rel verapamil ext-rel

### § CALCIUM CHANNEL **BLOCKER / ANTILIPEMIC COMBINATIONS**

amlodipine-atorvastatin

### § DIGITALIS GLYCOSIDES digoxin

**DIRECT RENIN INHIBITORS / DIURETIC COMBINATIONS** 

TEKTURNA / TEKTURNA HCT

### **§ DIURETICS**

furosemide hydrochlorothiazide metolazone spironolactonehydrochlorothiazide torsemide triamterenehydrochlorothiazide

### NEPRILYSIN INHIBITOR / ANGIOTENSIN II RECEPTOR ANTAGONIST **COMBINATIONS**

ENTRESTO (PA)

### § NITRATES

nitroglycerin lingual spray NITROLINGUAL **NITROSTAT** 

### NITRATE / VASODILATOR **COMBINATIONS**

### RANEXA

§ MISCELLANEOUS

# **CENTRAL NERVOUS**

### SYSTEM

§ ANTICONVULSANTS carbamazepine carbamazepine ext-rel diazepam rectal gel divalproex sodium divalproex sodium ext-rel ethosuximide gabapentin lamotrigine lamotrigine ext-rel levetiracetam levetiracetam ext-rel oxcarbazepine phenobarbital

phenytoin phenytoin sodium extended primidone tiagabine topiramate valproic acid zonisamide **FYCOMPA** OXTELLAR XR QUDEXY XR TROKENDI XR VIMPAT

### § ANTIDEMENTIA

donepezil galantamine galantamine ext-rel memantine rivastigmine rivastigmine transdermal NAMENDA XR

### **ANTIDEPRESSANTS**

§ SELECTIVE SEROTONIN **REUPTAKE INHIBITORS** (SSRIs) citalopram escitalopram . fluoxetine paroxetine paroxetine ext-rel . sertraline FLUOXETINE 60 MG TRINTELLIX VIIBRYD

### **§ SEROTONIN** NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIs)

duloxetine venlafaxine venlafaxine ext-rel capsule **PRISTIQ** 

### § MISCELLANEOUS **AGENTS**

bupropion bupropion ext-rel mirtazapine trazodone

### § ANTIPARKINSONIAN AGENTS

amantadine carbidopa-levodopa carbidopa-levodopa ext-rel carbidopa-levodopaentacapone entacapone pramipexole ropinirole ropinirole ext-rel selegiline AZILECT MIRAPEX ER **NEUPRO** 

**ANTIPSYCHOTICS** § ATYPICALS aripiprazole clozapine olanzapine quetiapine risperidone ziprasidone ARISTADA LATUDA RISPERDAL CONSTA SEROQUEL XR

### § ATTENTION DEFICIT HYPERACTIVITY DISORDER

amphetaminedextroamphetamine mixed salts amphetaminedextroamphetamine mixed salts ext-rel

quanfacine ext-rel

methylphenidate methylphenidate ext-rel APTENSIO XR QUILLIVANT XR STRATTERA

### **FIBROMYALGIA**

**LYRICA** SAVELLA

**VYVANSE** 

### **HYPNOTICS**

§ NONBENZODIAZEPINES eszopiclone (QL) zolpidem (QL) zolpidem ext-rel (QL)

**TRICYCLICS SILENOR** 

### MIGRAINE

§ SELECTIVE SEROTONIN AGONISTS

naratriptan (QL) rizatriptan (QL) sumatriptan (QL) zolmitriptan (QL) RELPAX (QL) ZOMIG NASAL SPRAY (QL)

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

### § MUSCULOSKELETAL THERAPY AGENTS

cyclobenzaprine

**NARCOLEPSY** NUVIGIL (PA)

POSTHERPETIC **NEURALGIA GRALISE** 

### PSYCHOTHERAPEUTIC -**MISCELLANEOUS**

§ OPIOID ANTAGONISTS naloxone injection NARCAN NASAL SPRAY

§ PARTIAL OPIOID AGONIST / OPIOID ANTAGONIST COMBINATIONS buprenorphine-naloxone sublingual tablet

VASOMOTOR SYMPTOM **AGENTS** BRISDELLE

SUBOXONE FILM



### **ENDOCRINE AND** METABOLIC

§ ANDROGENS

ANDRODERM (PA) AXIRON (PA)

**ANTIDIABETICS** 

**AMYLIN ANALOGS** SYMLINPEN

§ BIGUANIDES metformin

metformin ext-rel § BIGUANIDE /

SULFONYLUREA COMBINATIONS

glipizide-metformin

**DIPEPTIDYL PEPTIDASE-4** (DPP-4) INHIBITORS

JANUVIA **TRADJENTA** 

**DIPEPTIDYL PEPTIDASE-4** (DPP-4) INHIBITOR / **BIGUANIDE COMBINATIONS** 

JANUMET JANUMET XR **JENTADUETO** JENTADUETO XR

**INCRETIN MIMETIC AGENTS** 

TRULICITY VICTOZA

**INSULINS** 

BASAGLAR † HUMULIN R U-500 LEVEMIR NOVOLIN 70/30 NOVOLIN N NOVOLIN R

NOVOLOG NOVOLOG MIX 70/30 **TRESIBA** 

§ INSULIN SENSITIZERS pioglitazone

§ INSULIN SENSITIZER / **BIGUANIDE COMBINATIONS** 

pioglitazone-metformin

§ INSULIN SENSITIZER / SULFONYLUREA **COMBINATIONS** 

pioglitazone-glimepiride

§ MEGLITINIDES

nateglinide repaglinide SODIUM-GLUCOSE

**CO-TRANSPORTER 2** (SGLT2) INHIBITORS **FARXIGA JARDIANCE** 

SODIUM-GLUCOSE **CO-TRANSPORTER 2** (SGLT2) INHIBITOR / **BIGUANIDE COMBINATIONS** XIGDUO XR

§ SULFONYLUREAS glimepiride alipizide

glipizide ext-rel SUPPLIES

**BD ULTRAFINE INSULIN** SYRINGES AND **NEEDLES** ONETOUCH ULTRA STRIPS AND KITS 3 **ONETOUCH VERIO STRIPS** 

AND KITS 3 **ANTIOBESITY** 

INJECTABLE SAXENDA (PA)

**ORAL** BELVIQ (PA) CONTRAVE (PA)

**CALCIUM REGULATORS** 

§ BISPHOSPHONATES alendronate ibandronate risedronate ATELVIA

§ CALCITONINS calcitonin-salmon

§ CARNITINE DEFICIENCY AGENTS

levocarnitine

CONTRACEPTIVES

§ MONOPHASIC ethinyl estradioldrospirenone ethinyl estradiolnorethindrone acetate

**BEYAZ** LO LOESTRIN FE MINASTRIN 24 FE

SAFYRAL § TRIPHASIC

ethinyl estradiol-norgestimate ORTHO TRI-CYCLEN LO

FOUR PHASE NATAZIA

§ EXTENDED CYCLE ethinyl estradiol-

levonorgestrel § TRANSDERMAL ethinyl estradiolnorelgestromin

VAGINAL **NUVARING** 

**ESTROGENS** 

§ ORAL estradiol estropipate PREMARIN.

§ TRANSDERMAL

estradiol **DIVIGEL EVAMIST** MINIVELLE

VAGINAL

ESTRACE CREAM PREMARIN CREAM VAGIFEM

**ESTROGEN / PROGESTINS** 

**§ ORAL** 

estradiol-norethindrone **PREMPHASE PREMPRO** 

TRANSDERMAL COMBIPATCH

ESTROGEN / SELECTIVE ESTROGEN RECEPTOR MODULATOR **COMBINATIONS** 

DUAVEE

§ GLUCOCORTICOIDS

dexamethasone methylprednisolone prednisone

**GLUCOSE ELEVATING AGENTS** 

**GLUCAGEN HYPOKIT** GLUCAGON EMERGENCY KIT

§ PHOSPHATE BINDER **AGENTS** 

calcium acetate **PHOSLYRA** RENVELA **VELPHORO** 

**PROGESTINS** 

§ ORAL

medroxyprogesterone progesterone, micronized MEGACE ES

VAGINAL CRINONE

§ SELECTIVE ESTROGEN **RECEPTOR MODULATORS** 

raloxifene **OSPHENA**  § THYROID SUPPLEMENTS

levothyroxine SYNTHROID

GASTROINTESTINAL

§ ANTIEMETICS

dronabinol (QL) granisetron (QL) meclizine metoclopramide ondansetron (QL) prochlorperazine promethazine trimethobenzamide **DICLEGIS** SANCUSO (QL)

VARUBI (QL) § H<sub>2</sub> RECEPTOR ANTAGONISTS

**INFLAMMATORY BOWEL** DISEASE

§ ORAL AGENTS

balsalazide budesonide capsule sulfasalazine sulfasalazine delayed-rel **APRISO** LIALDA **PENTASA** 

§ RECTAL AGENTS

**UCERIS** 

hydrocortisone enema mesalamine rectal suspension CANASA CORTIFOAM

**§ IRRITABLE BOWEL** SYNDROME

AMITIZA (PA) LINZESS (PA) LOTRONÈX (PA) VIBERZI (PA)

§ LAXATIVES

lactulose peg 3350-electrolytes MÖVIPREP SUPREP

OPIOID-INDUCED CONSTIPATION MOVANTIK

**PANCREATIC ENZYMES** 

**CREON** VIOKACE ZENPEP

§ PROTON PUMP **INHIBITORS** 

esomeprazole lansoprazole omeprazole

pantoprazole DEXILANT (ST)

§ STEROIDS, RECTAL PROCTOFOAM-HC

§ ULCER THERAPY COMBINATIONS

**PYI FRA** 

GENITOURINARY

§ BENIGN PROSTATIC **HYPERPLASIA** 

alfuzosin ext-rel doxazosin dutasteride finasteride tamsulosin terazosin CARDURA XL **RAPAFLO** 

**ERECTILE DYSFUNCTION** 

ALPROSTADIL AGENTS MUSE (QL)

PHOSPHODIESTERASE **INHIBITORS** 

§ URINARY ANTISPASMODICS

CIALIS (QL)

oxybutynin oxybutynin ext-rel tolterodine tolterodine ext-rel trospium trospium ext-rel **MYRBETRIQ TOVIAZ** 

HEMATOLOGIC

§ ANTICOAGULANTS

warfarin **ELIQUIS XARELTO** 

**VESICARE** 

§ PLATELET AGGREGATION INHIBITORS

clopidogrel dipyridamole ext-rel-aspirin BRILINTA **EFFIENT** 

> **IMMUNOLOGIC AGENTS**

**ALLERGENIC EXTRACTS** 

GRASTEK (PA) RAGWITEK (PA)

**IMMUNOSUPPRESSANTS** 

§ ANTIMETABOLITES **AZASAN** 



### NUTRITIONAL / SUPPLEMENTS

§ ELECTROLYTES

potassium chloride liquid

**VITAMINS AND MINERALS** 

§ PRENATAL VITAMINS
prenatal vitamins

CITRANATAL

### RESPIRATORY

ANAPHYLAXIS TREATMENT AGENTS

EPIPEN EPIPEN JR

§ ANTICHOLINERGICS SPIRIVA

ANTICHOLINERGIC / BETA AGONIST COMBINATIONS

§ SHORT ACTING ipratropium-albuterol inhalation solution COMBIVENT RESPIMAT

LONG ACTING ANORO ELLIPTA BEVESPI AEROSPHERE

# BETA AGONISTS, INHALANTS

§ SHORT ACTING albuterol inhalation solution PROAIR HFA PROAIR RESPICLICK

LONG ACTING

Hand-held Active Inhalation

ARCAPTA SEREVENT

Nebulized Passive Inhalation
PERFOROMIST

§ LEUKOTRIENE RECEPTOR ANTAGONISTS

montelukast zafirlukast § NASAL ANTIHISTAMINES

azelastine olopatadine

§ NASAL STEROIDS / COMBINATIONS

flunisolide fluticasone mometasone triamcinolone DYMISTA

PHOSPHODIESTERASE-4 INHIBITORS

DALIRESP

STEROID / BETA AGONIST COMBINATIONS

ADVAIR BREO ELLIPTA DULERA

§ STEROID INHALANTS

budesonide inhalation suspension ASMANEX FLOVENT DISKUS FLOVENT HFA PULMICORT FLEXHALER OVAR

### TOPICAL

### DERMATOLOGY

§ ACNE
adapalene (PA2)
benzoyl peroxide
clindamycin solution
clindamycin-benzoyl
peroxide
erythromycin solution
erythromycin-benzoyl
peroxide
tretinoin (PA2)
ACANYA
ATRALIN (PA2)
BENZACLIN
DIFFERIN (PA2)

RETIN-A MICRO (PA2)

TAZORAC (PA)

**EPIDUO** 

§ ACTINIC KERATOSIS

fluorouracil cream 5% fluorouracil solution imiquimod PICATO ZYCLARA

§ ANTIFUNGALS

ciclopirox clotrimazole econazole ketoconazole nystatin JUBLIA (PA) LUZU NAFTIN

§ ANTIPSORIATICS

acitretin calcipotriene methoxsalen

CORTICOSTEROIDS

§ Low Potency desonide hydrocortisone

§ Medium Potency

hydrocortisone butyrate mometasone triamcinolone CLODERM LOCOID LOTION

§ High Potency

desoximetasone fluocinonide

§ Very High Potency

clobetasol cream, foam, gel, lotion, ointment, shampoo

§ IMMUNOMODULATORS tacrolimus (ST) ELIDEL (ST)

§ ROSACEA metronidazole FINACEA ORACEA SOOLANTRA MOUTH / THROAT / DENTAL AGENTS

PROTECTANTS FPISII

OPHTHALMIC § ANTIALLERGICS

azelastine cromolyn sodium olopatadine PATADAY PAZEO

§ ANTI-INFECTIVES

ciprofloxacin erythromycin gentamicin levofloxacin ofloxacin sulfacetamide tobramycin BESIVANCE MOXEZA VIGAMOX

§ ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS

neomycin-polymyxin Bbacitracin-hydrocortisone neomycin-polymyxin Bdexamethasone tobramycin-dexamethasone TOBRADEX OINTMENT TOBRADEX ST ZYLET

**ANTI-INFLAMMATORIES** 

§ Nonsteroidal bromfenac diclofenac ketorolac PROLENSA

§ Steroidal dexamethasone ALREX DUREZOL LOTEMAX BETA-BLOCKERS § Nonselective

timolol maleate solution BETIMOL

Selective BETOPTIC S

COSOPT PF

SIMBRINZA

§ CARBONIC ANHYDRASE INHIBITORS dorzolamide AZOPT

§ CARBONIC ANHYDRASE INHIBITOR / BETA-BLOCKER COMBINATIONS dorzolamide-timolol

CARBONIC ANHYDRASE INHIBITOR / SYMPATHOMIMETIC COMBINATIONS

DRY EYE DISEASE RESTASIS XIIDRA

§ PROSTAGLANDINS latanoprost travoprost TRAVATAN Z ZIOPTAN

§ SYMPATHOMIMETICS brimonidine ALPHAGAN P

SYMPATHOMIMETIC / BETA-BLOCKER COMBINATIONS COMBIGAN

OTIC

§ ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS CIPRODEX

### QUICK REFERENCE DRUG LIST

ACANYA
acitretin
acyclovir
adapalene (PA2)
ADVAIR
ALBENZA
albuterol inhalation solution
alendronate
alfuzosin ext-rel
ALKERAN
allopurinol
ALPHAGAN P

ALREX amantadine
AMITIZA (PA) amlodipine
amlodipine-telmisartan amlodipine-valsartan amlodipine-valsartan amlodipine-valsartan amoxicillin amoxicillin amoxicillin-clavulanate amphetamine-dextroamphetamine

mixed salts

amphetaminedextroamphetamine
mixed salts ext-rel
ANDRODERM (PA)
ANORO ELLIPTA
APRISO
APTENSIO XR
ARCAPTA
aripiprazole
ARISTADA
ASMANEX
ATELVIA
atenolol
atorvastatin

ATRALIN (PA2) AXIRON (PA) AZASAN azelastine AZILECT azithromycin AZOPT AZOR

B balsalazide BASAGLAR † BD ULTRAFINE INSULIN SYRINGES AND NEEDLES BELVIQ (PA) BENICAR BENICAR HCT BENZACLIN benzoyl peroxide BESIVANCE BETIMOL BETOPTIC S BEVESPI AEROSPHERE BEYAZ



bicalutamide **BIDIL BREO ELLIPTA** BRILINTA brimonidine BRISDELLE bromfenac budesonide capsule budesonide inhalation suspension buprenorphine-naloxone sublingual tablet bupropion bupropion ext-rel BÚTRANS **BYSTOLIC** 

**C** calcipotriene

calcitonin-salmon calcium acetate CANASA candesartan candesartanhydrochlorothiazide carbamazepine carbamazepine ext-rel carbidopa-levodopa carbidopa-levodopa ext-rel carbidopa-levodopaentacapone CARDURA XL carvedilol cefdinir cefprozil cefuroxime axetil celecoxib cephalexin *cholestyramine* CIALIS (QL) ciclopirox **CIPRODEX** ciprofloxacin ciprofloxacin ext-rel citalopram CITRANATAL clarithromycin clarithromycin ext-rel clindamycin clindamycin solution clindamycin-benzoyl peroxide

clobetasol cream, foam, gel,

codeine-acetaminophen

COMBIVENT RESPIMAT

CLODERM

clopidogrel

clozapine

COLCRYS

COMBIGAN

COREG CR

CORTIFOAM

COSOPT PF

**COMBIPATCH** 

CONTRAVE (PA)

clotrimazole

colchicine tablet

lotion, ointment, shampoo

CREON
CRINONE
cromolyn sodium
cyclobenzaprine
CYCLOPHOSPHAMIDE
CAPSULE

D DALIRESP desonide desoximetasone dexamethasone DEXILANT (ST) diazepam rectal gel DICLEGIS diclofenac diclofenac sodium diclofenac sodium solution diclofenac sodiummisoprostol dicloxacillin DIFFERIN (PA2) **DIFICID** digoxin diltiazem ext-rel 2 dipyridamole ext-rel-aspirin divalproex sodium divalproex sodium ext-rel DIVIGEL donepezil dorzolamide dorzolamide-timolol doxazosin doxycycline hyclate dronabinol (QL) **DUAVEE** DULERA duloxetine

econazole **EFFIENT** ELIDEL (ST) ELIQUIS entacapone ENTRÉSTO (PA) **EPIDUO EPIPEN** EPIPEN JR **EPISIL** eprosartan erythromycin erythromycin solution erythromycin-benzoyl peroxide erythromycins escitalopram esomeprazole ESTRACE CREAM estradiol estradiol-norethindrone estropipate eszopiclone (QL) ethinyl estradiol-

 ${\it drospire none}$ 

**DUREZOL** 

dutasteride

**DYMISTA** 

E

ethinyl estradiollevonorgestrel ethinyl estradiolnorelgestromin ethinyl estradiolnorethindrone acetate ethinyl estradiol-norgestimate ethosuximide EVAMIST

F **FARXIGA** fenofibrate fenofibric acid fentanyl transdermal fentanyl transmucosal lozenge (PA) FENTORA (PA) **FINACEA** finasteride FLOVENT DISKUS FLOVENT HFA fluconazole flunisolide fluocinonide fluorouracil cream 5% fluorouracil solution fluoxetine FLUOXETINE 60 MG fluticasone fluvastatin fosinopril fosinopril-hydrochlorothiazide furosemide **FYCOMPA** G

gabapentin
galantamine
galantamine ext-rel
gentamicin
glimepiride
glipizide
glipizide ext-rel
glipizide-metformin
GLUCAGEN HYPOKIT
GLUCAGON EMERGENCY
KIT
GRALISE
granisetron (QL)
GRASTEK (PA)
guanfacine ext-rel

H
HEXALEN
HUMULIN R U-500
hydrochlorothiazide
hydrocodone-acetaminophen
hydrocortisone butyrate
hydrocortisone enema
hydromorphone
hydromorphone ext-rel
HYSINGLA ER (QL)

\*
ibandronate
imiquimod

ipratropium-albuterol inhalation solution irbesartan irbesartanhydrochlorothiazide itraconazole (PA) ivermectin

JANUMET JANUMET XR JANUVIA JARDIANCE JENTADUETO JENTADUETO XR JUBLIA (PA)

J

**K** ketoconazole ketorolac

lactulose lamotrigine lamotrigine ext-rel lansoprazole latanoprost LATUDA LEUKERAN **LEVEMIR** levetiracetam levetiracetam ext-rel levocarnitine levofloxacin levothyroxine LIALDA LINZESS (PA) lisinopril

lisinopril-hydrochlorothiazide
LO LOESTRIN FE
LOCOID LOTION
losartan
losartan-hydrochlorothiazide
LOTEMAX
LOTRONEX (PA)
lovastatin
LUZU
LYRICA

LYSODREN

M

**MATULANE** meclizine medroxyprogesterone MEGACE ES meloxicam memantine mesalamine rectal suspension metformin metformin ext-rel methadone methoxsalen methylphenidate methylphenidate ext-rel methylprednisolone metoclopramide metolazone

metoprolol succinate ext-rel metoprolol tartrate metronidazole MINASTRIN 24 FE MINIVELLE minocycline MIRAPEX ER mirtazapine mometasone montelukast morphine morphine ext-rel (QL) morphine suppository MOVANTIK MOVIPREP MOXEZA moxifloxacin MUSE (QL) MYLERAN **MYRBETRIQ** 

N nadolol NAFTIN naloxone injection NAMENDA XR naproxen naratriptan (QL) NARCAN NASAL SPRAY NATAZIA nateglinide neomycin-polymyxin B-bacitracin-hydrocortisone neomycin-polymyxin Bdexamethasone **NEUPRO** niacin ext-rel nifedipine ext-rel nitrofurantoin nitroglycerin lingual spray NITROLINGUAL NITROSTAT NOVOLIN 70/30 NOVOLIN N NOVOLIN R NOVOLOG NOVOLOG MIX 70/30 NUCYNTA (QL) NUCYNTA ER (QL) NUVARING NUVIGIL (PA) nystatin

O ofloxacin olanzapine olopatadine omega-3 acid ethyl esters omeprazole ondansetron (QL) ONETOUCH ULTRA STRIPS AND KITS 3 ONETOUCH VERIO STRIPS AND KITS 3 OPANA ER (QL) ORACEA ORTHO TRI-CYCLEN LO OSPHENA



oxcarbazepine
OXTELLAR XR
oxybutynin
oxybutynin ext-rel
oxycodone
oxycodone-acetaminophen
OXYCONTIN (QL)

Р

pantoprazole paroxetine paroxetine ext-rel . PATADAY PAZEO peg 3350-electrolytes penicillin VK PENTASA PERFOROMIST phenobarbital phenytoin phenytoin sodium extended , PHOSLYRA PICATO pioglitazone pioglitazone-glimepiride pioglitazone-metformin potassium chloride liquid pramipexole pravastatin prednisone PREMARIN PREMARIN CREAM PREMPHASE PREMPRO prenatal vitamins primidone PRISTIQ PROAIR HFA PROAIR RESPICLICK probenecid prochlorperazine PROCTOFOAM-HC progesterone, micronized

PROLENSA promethazine propranolol propranolol ext-rel PULMICORT FLEXHALER PYLERA

Q

QUDEXY XR quetiapine QUILLIVANT XR quinapril quinapril-hydrochlorothiazide QVAR

R

RAGWITEK (PA)
raloxifene
ramipril
RANEXA
ranitidine
RAPAFLO
RELENZA (QL)
RELPAX (QL)
RENVELA
repaglinide
RESTASIS
RETIN-A MICRO (PA2)
risedronate

risedronate
RISPERDAL CONSTA
risperidone
rivastigmine
rivastigmine transdermal
rizatriptan (QL)
ropinirole

S

SAFYRAL SANCUSO (QL) SAVELLA

ropinirole ext-rel

rosuvastatin

SAXENDA (PA) selegiline SEREVENT SEROQUEL XR sertraline SILENOR SIMBRINZA simvastatin **SIVEXTRO** SOOLANTRA SPIRIVA spironolactonehydrochlorothiazide STRATTERA SUBOXONE FILM SUBSYS (PA) sulfacetamide sulfamethoxazoletrimethoprim sulfasalazine sulfasalazine delayed-rel sumatriptan (QL) SUPRAX SUPREP SYMLINPEN **SYNTHROID** 

TABLOID
tacrolimus (ST)
TAMIFLU (QL)
tamsulosin
TAZORAC (PA)
TEKTURNA
TEKTURNA HCT
telmisartan

telmisartanhydrochlorothiazide terazosin terbinafine tablet (PA) tetracycline tiagabine timolol maleate solution TOBRADEX OINTMENT **TOBRADEX ST** tobramycin tobramycin-dexamethasone tolterodine tolterodine ext-rel topiramate torsemide TOVIAZ **TRADJENTA** tramadol tramadol ext-rel TRAVATAN Z travoprost trazodone TRESIBA tretinoin (PA2)

TREXIMÉT (QL)
triamcinolone
triamterenehydrochlorothiazide
TRIBENZOR
trimethobenzamide
TRINTELLIX
TROKENDI XR
trospium
trospium ext-rel
TRULICITY

U

UCERIS ULORIC

V
VAGIFEM
valacyclovir
valganciclovir
valproic acid
valsartan
valsartan-hydroch

valsartan-hydrochlorothiazide VARUBI (QL) VASCEPA VELPHORO
venlafaxine
venlafaxine ext-rel capsule
verapamil ext-rel
VESICARE
VIBERZI (PA)
VICTOZA
VIGAMOX
VIIBRYD
VIMPAT
VIOKACE
VISTOGARD
VOLTAREN GEL
VYTORIN
VYVANSE

W warfarin WELCHOL

X XARELTO XIFAXAN 550 MG XIGDUO XR XIIDRA

Z
zafirlukast
ZENPEP
ZETIA
ZIOPTAN
ziprasidone
zolmitriptan (QL)
zolpidem (QL)
ZONIG NASAL SPRAY (QL)
zonisamide
ZYCLARA
ZYLET



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- § Generics are available in this class and should be considered the first line of prescribing.
- † Expected Availability 12/15/16
- 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.
- Listing does not include generic CARDIZEM LA.
- 3 A ONETOUCH blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ONETOUCH. For more information on how to obtain a free blood glucose meter, call: 1-800-588-4456.
- (PA) Prior Authorization required.
- (PA2) Prior Authorization required for 36 years of age and older.
- (QL) Quantity Limits apply.
- (ST) Step Therapy required.

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5)6)	1)2)	B Refills. To order mail service refills, enter your prescription number(s) here	Daytime Phone #:	City	Street Address	Last Name	A Shipping Address. To ship to ar	Refills - Order by Web, phone, or write in Rx number(s) below.  Number of Receive Your order Sooner, request refills or new prescriptions online at info.caremark.com/stateoftn or call toll-free 1-877-522-8679.	New Prescriptions - Mail your new prescriptions with this form.	Instructions: Please use blue or black ink, capital letters, and fill in both sides of this form	Prescription Plan Sponsor or Company Name	123456789  Member ID # (if not shown or if different from above)	PM 7529 GROUP JOHN Q SAMPLE 9501 E. Shea Blvd SCOTTSDALE, AZ 85260	
7)	3)	ills, enter your prescription numbe	Evening Phone #:	State	Ap	First Name	າ address different from the one p	rite in Rx number(s) below.  NER, request refills or new presc toll-free 1-877-522-8679.	prescriptions with this form.	tal letters, and fill in both sides	any Name			Mail this form to:
8)	4)	er(s) here.	ne #	zip Code	Apt./Suite # Use shipping address for this order only.	MI Suffix (JR, SR)	Shipping Address. To ship to an address different from the one printed above, please make changes here.	Number of <b>Refill</b> prescriptions: riptions online at	Number of <b>New</b> prescriptions:	of this form.		PALATINE, IL 60094-4467		ıto:

All claims for prescriptions submitted to CVS Caremark Mail Service Pharmacy using this form will be submitted to your prescription benefit plan for payment. If you do not want them submitted to your plan, do not use this form. You may call Customer Care to make alternate arrangements for submission of your order and payment.

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**State of Tennessee** PARTNERS FOR HEALTH.

0000

ID NAME 123456789 **JOHN Q SAMPLE** 

# **CAREMARK**

## **Prescription Card**

**RxBIN RxPCN RxGRP** Issuer (80840)

004336 **State of Tennessee** ADV RX7529 FOR HEALTH. 9151014609

0000

NAME

123456789

DepFirstname1 DepLastname1

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**Prescription Card** 

**RxBIN RxPCN RxGRP** Issuer (80840)

004336 **State of Tennessee PARTNERS ADV** RX7529 FOR HEALTH. 9151014609

0000

o f

2

ID NAME

123456789

DepFirstname2 DepLastname2

# **CAREMARK**

**Prescription Card** 

**RxBIN RxPCN RxGRP** Issuer (80840) 004336 **State of Tennessee** ADV RX7529 FOR HEALTH. 9151014609



NAME

123456789

**DepFirstname3 DepLastname3** 

prescription at a pharmacy for the firs

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# **Prescription Card**

004336 **RxBIN RxPCN ADV RxGRP** RX7529 Issuer (80840) 9151014609

**State of Tennessee** PARTNERS FOR HEALTH.

ID

123456789 NAME

DepFirstname4 DepLastname4

0000

# **CAREMARK**

## **Prescription Card**

**RxBIN RxPCN RxGRP** Issuer (80840) 004336 **State of Tennessee** ADV RX7529 FOR HEALTH. 9151014609

0000

NAME

123456789

DepFirstname5 DepLastname5

www.caremark.com to order refills, check prescription at a pharmacy for the firs time. Use it to register at

CVS/caremark

1604123

Present this Prescription Card to fill your prescription at any participating retail pharmacy.

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