

CAREMARK

PRIMARY DRUG LIST

JANUARY 2002



CAREMARK

A Better Way to Health

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CF17

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Primary

INFORMATION FOR THE PLAN PARTICIPANT:

Your Benefit Plan provides you with a prescription drug benefit program that is administered by Caremark Inc. Caremark's goal is to cost effectively provide the highest quality pharmaceutical care.

Effective ways to manage costs include using generic drugs and a drug list. Ask your doctor to authorize generic substitution whenever possible to the extent it is medically appropriate.

When there is no generic available, there may be more than one brand name drug to treat your condition. That is why we developed a drug list. The brand name drugs listed in this brochure are a preferred list of drugs that are selected based on their ability to cost effectively meet individual needs.

Ask your doctor to consider prescribing, when medically appropriate, a brand name on this list when there is no generic or more than one brand name drug is available. Have this list available when you or a covered family member sees a doctor.

FOR YOUR INFORMATION:

- Your specific prescription benefit plan design may not cover certain categories, regardless of their appearance in this document, for example:

birth control pills	diabetic supplies
vitamins	fertility products
- For specific information regarding your prescription coverage, please consult a Caremark customer service representative or refer to your benefit plan summary.
- 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.

INFORMATION FOR THE HEALTHCARE PROVIDER:

Your patient is covered under a prescription benefit plan covered by Caremark Inc.

As a means to manage healthcare costs, authorize generic substitution whenever possible. If you believe a brand name product is necessary, please consider prescribing a brand listed in this brochure.

1st choice—a generic drug

2nd choice—a brand name drug from Caremark's drug list

Healthcare Providers may direct questions about the list to a Caremark Pharmacist on our Resource Line at 1-800-282-2229.

Thank you for your professional cooperation in providing cost-effective quality healthcare.

FOR YOUR INFORMATION:

- The drug list is not inclusive nor does it guarantee coverage, but represents a summary of prescription drug coverage.
- Unless specifically indicated, drug list products will include all dosage forms.
- Generics should be considered the first line of prescribing.**

CAREMARK PRIMARY DRUG LIST

ALLERGY—ASTHMA

**ANTICHOLINERGIC,
INHALED ORAL**
ATROVENT INHALER

**ANTICHOLINERGIC/
BETA AGONIST, INHALED ORAL**
COMBIVENT

ANTIHISTAMINE, INHALED NASAL
ASTELIN

**ANTIHISTAMINES,
NON-SEDATING**
CLARITIN
CLARITIN REDITAB

**ANTIHISTAMINE,
NON-SEDATING/
DECONGESTANTS**
CLARITIN-D 12 HOUR
CLARITIN-D 24 HOUR

ANTIHISTAMINE, LOW SEDATING
ZYRTEC

**ANTIHISTAMINE,
LOW SEDATING/DECONGESTANT**
ZYRTEC-D 12 HOUR

**ANTIHISTAMINE/
DECONGESTANTS**
BROMFED CAPSULE
BROMFED-PD
RYNA-12 S
RYNATAN
SEMPREX-D

**ANTI-INFLAMMATORY,
INHALED NASAL**
NASACORT
NASACORT AQ
NASONEX

**ANTI-INFLAMMATORY,
INHALED ORAL**
AZMACORT
PULMICORT

**ANTI-INFLAMMATORY,
INHALED ORAL/LONG ACTING
BETA AGONIST COMBINATION**
ADVAIR

**ANTITUSSIVE/
ANTIHISTAMINE**
TUSSIONEX

**ANTITUSSIVE/
ANTIHISTAMINE/
DECONGESTANTS**
RYNATUSS
TUSSI-12

**ANTITUSSIVE/
DECONGESTANT/
EXPECTORANT**
DURATUSS HD

**ANTITUSSIVE/
EXPECTORANTS**
DURATUSS DM
TUSSI-ORGANIDIN DM
TUSSI-ORGANIDIN NR

**BETA AGONISTS,
INHALED ORAL**
FORADIL
MAXAIR
PROVENTIL HFA
SEREVENT

BETA AGONIST, ORAL
VOLMAX

**DECONGESTANT/
EXPECTORANTS**
DURATUSS
DURATUSS GP
ENTEX PSE
GUAIFED CAPSULE
GUAIFED-PD

EXPECTORANTS
DURATUSS G
HUMIBID LA
ORGANIDIN NR

**LEUKOTRIENE
MODULATORS**
ACCOLATE
SINGULAIR

THEOPHYLLINE
THEO-24

ANALGESIC

ANTIRHEUMATIC
PLAQUENIL

COX-2 INHIBITORS
CELEBREX
VIOXX

**MIGRAINE
COMBINATION AGENT**
MIDRIN
ERGOTAMINE DERIVATIVE
MIGRANAL NASAL SPRAY
**SELECTIVE SEROTONIN
AGONISTS**
AMERGE
IMITREX
ZOMIG

**MIXED OPIOID
AGONIST-ANTAGONISTS**
TALACEN
TALWIN NX

MUSCLE RELAXANTS
SKELAXIN
ZANAFLEX

NARCOTIC ANALGESICS
LORTAB
MAXIDONE
NORCO

NARCOTIC ANALGESICS, (CII)
DURAGESIC
MS CONTIN
MSIR
OXYCONTIN
OXYFAST
OXYIR
PERCOCET

NON-NARCOTIC ANALGESICS
PHRENILIN
PHRENILIN FORTE

NSAIDS
MOBIC
NAPRELAN
RELAFEN

NSAID/PROTECTANT
ARTHROTEC

SALICYLATE
TRILISATE

ANTI-INFECTIVE

ANTIFUNGALS
MYCELEX TROCHE
SPORANOX CAPSULE

ANTIMALARIAL
PLAQUENIL

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ANTIVIRALS

FAMVIR
TAMIFLU
VALTREX

CEPHALOSPORINS

CEDAX
OMNICEF

ERYTHROMYCINS/MACROLIDES

BIAXIN
BIAXIN XL
ZITHROMAX

INTERFERON

INTRON A
PEG-INTRON
REBETRON

PENICILLIN

AUGMENTIN

QUINOLONES

AVELOX
CIPRO
LEVAQUIN

TETRACYCLINES

DYNACIN
MONODOX
PERIOSTAT

CARDIOVASCULAR

ACE INHIBITORS

ACCUPRIL
MONOPRIL
ZESTRIL

**ACE INHIBITOR/
DIURETIC COMBINATIONS**

ACCURETIC
MONOPRIL HCT
ZESTORETIC

**ACE INHIBITOR/
CALCIUM CHANNEL BLOCKER**

LOTREL

ADRENOLYTIC, CENTRAL
CATAPRES-TTS

**ANGIOTENSIN II
RECEPTOR ANTAGONISTS**

AVAPRO
DIOVAN

CAREMARK PRIMARY DRUG LIST

ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS
 AVALIDE
 DIOVAN HCT

ANTICOAGULANT
 COUMADIN

ANTILIPEMICS
BILE ACID RESIN
 WELCHOL
FIBRATES
 TRICOR
HMG-CoA INHIBITORS
 LIPITOR
 PRAVACHOL
NIACIN
 NIASPAN

BETA-BLOCKERS (B1)
 TOPROL-XL
 ZEBETA

BETA-BLOCKER/DIURETIC COMBINATION (B1)
 ZIAC

BETA-BLOCKER (B1, B2)
 COREG

CALCIUM CHANNEL BLOCKERS
 COVERA-HS
 NORVASC
 TIAZAC

DIGITALIS GLYCOSIDES
 LANOXICAPS
 LANOXIN

DIURETICS
 DEMADEx
 DYAZIDE
 MICROZIDE

NITRATES
TRANSDERMAL
 NITREK
 NITRO-DUR

ORTHOSTATIC HYPOTENSION
 PROAMATINE

PLATELET AGGREGATION INHIBITORS
 AGGRENOX
 PLAVIX
 PLETAL

PLATELET INHIBITOR, ANTIMETABOLITE
 AGRYLIN

POTASSIUM SUPPLEMENT
 K-DUR

CENTRAL NERVOUS SYSTEM

ALZHEIMER'S
 ARICEPT
 EXELON
 REMINYL

ANTICONSULSANTS
 CARBATROL
 DEPAKOTE
 DILANTIN
 GABITRIL
 KEPPRA
 LAMICTAL
 NEURONTIN
 TEGRETOL XR
 TOPAMAX
 TRILEPTAL
 ZONEGRAN

ANTIDEPRESSANTS
 CELEXA
 EFFEXOR
 EFFEXOR XR
 REMERON
 REMERON SOLTAB
 SERZONE
 WELLBUTRIN SR
 ZOLOFT

ANTIPARKINSON'S
 COMTAN
 MIRAPEX
 PERMAX
 SINEMET CR

ANTIPSYCHOTICS
 RISPERDAL

ATTENTION DEFICIT DISORDER/NARCOLEPSY
 ADDERALL
 CONCERTA
 DEXTROSTAT
 METADATE CD
 PROVIGIL

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MOOD STABILIZER
 LITHOBID

SEDATIVE HYPNOTICS
 AMBIEN
 DORAL
 SONATA

DERMATOLOGY

ANTIACNE
 BENZAC
 BENZAMYCIN
 PLEXION
 RETIN-A
 RETIN-A MICRO
 TRIAZ

ANTIBIOTICS
 BACTROBAN
 BACTROBAN NASAL

ANTIFUNGALS
 LOPROX
 MENTAX

ANTIHYPERPIGMENTATION AGENT
 LUSTRA

ANTIPSORIATIC
 DOVONEX

ONYCHOMYCOSIS
 SPORANOX CAPSULE

ROSACEA
 METROCREAM
 METROGEL
 METROLOTION
 NORITATE

STEROIDS
 CORDRAN
 CORMAX
 DESOWEN
 DIPROLENE AF
 PROCTOCREAM-HC
 PROCTOFOAM-HC
 ULTRAVATE

MISCELLANEOUS SKIN AND MUCOUS MEMBRANE
 CONDYLOX

ENDOCRINE AND METABOLIC

ANDROGENS
 ANDRODERM
 TESTODERM

ANTIANDROGENS
 CASODEX
 EULEXIN

ANTIIDIABETICS
ALPHA-GLUCOSIDASE INHIBITOR
 GLYSET
 PRECOSE
BIGUANIDE
 GLUCOPHAGE
 GLUCOPHAGE XR
BIGUANIDE/SULFONYLUREA COMBINATION
 GLUCOVANCE
INSULIN
 HUMALOG
 HUMULIN
INSULIN SENSITIZER
 ACTOS
 AVANDIA
MEGLITINIDE
 PRANDIN
 STARLIX
SULFONYLUREA
 GLUCOTROL XL
SUPPLIES
 ACCU-CHEK EASY TEST STRIP*
 ADVANTAGE TEST STRIP*
 BD INSULIN SYRINGES
 CHEMSTRIP BG II TEST STRIP*
 COMFORT CURVE TEST STRIP*
 INSTANT TEST STRIP*
 SIMPLICITY TEST STRIP*

CARNITINE
 CARNITOR

* Accu-Chek Advantage blood glucose monitor will be provided to those individuals currently using a meter other than Accu-Chek, Accu-Chek Easy or Accu-Chek Instant.
 For information on how to obtain a glucose monitor, call: 1-800-588-4456.

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CONTRACEPTIVES, ORAL

LOW ESTROGEN
 LEVLITE
 MIRCETTE
MONOPHASIC
 MODICON
 ORTHO-CEPT
 ORTHO-CYCLEN
 ORTHO-NOVUM 1/35, 1/50
BIPHASIC
 ORTHO-NOVUM 10/11
TRIPHASIC
 ORTHO-NOVUM 7/7/7
 ORTHO TRI-CYCLEN
PROGESTIN ONLY
 MICRONOR

ERECTILE DYSFUNCTION

EDEX
 MUSE
 VIAGRA

ESTROGENS

ORAL
 ESTRATEST
 PREMARIN
TRANSDERMAL, ESTROGEN
 ESTRADERM
 VIVELLE
ORAL ESTROGEN/PROGESTIN
 FEMHRT
 ORTHO-PREFEST
 PREMPHASE
 PREMPRO
VAGINAL
 ESTRACE VAGINAL CREAM

GLUCOCORTICOIDS

ORAPRED
 PEDIAPRED

HUMAN GROWTH HORMONE

HUMATROPE
 NUTROPIN
 NUTROPIN AQ
 NUTROPIN DEPOT
 PROTROPIN

IMMUNOSUPPRESSANT

PROGRAF

METABOLIC BONE DISORDERS

DIDRONEL
 FOSAMAX
 MIACALCIN NASAL SPRAY

OVULATION STIMULANTS

CETROTIDE
 FERTINEX
 GONAL-F
 OVIDREL
 PERGONAL
 PROFASI

PROGESTIN

PROMETRIUM

SELECTIVE ESTROGEN RECEPTOR MODULATOR

EVISTA

THYROID SUPPLEMENT

SYNTHROID
 UNITHROID

GASTROINTESTINAL

ANTIEMETIC
 KYTRIL ORAL

ANTIOBESITY – FAT ABSORPTION DECREASING AGENT

XENICAL

ANTISPASMODIC

NULEV

CHOLELITHOLYTIC

URSO

H2 ANTAGONIST

AXID

H. PYLORI

BIAXIN
 HELIDAC
 NEXIUM
 PREVACID
 PREVPAC

LAXATIVE

DUPHALAC
 KRISTALOSE

PANCREATIC ENZYME

CREON
 ULTRASE
 ULTRASE MT

PROTON PUMP INHIBITORS

NEXIUM
 PREVACID

SALIVA STIMULANT

EVOXAC

ULCERATIVE COLITIS

ASACOL
 CORTENEMA
 CORTIFOAM
 PENTASA
 ROWASA

GENITOURINARY

BPH

FLOMAX
 PROSCAR

INTERSTITIAL CYSTITIS

ELMIRON

URINARY ANTI-INFECTIVES

CINOBAC
 MACROBID
 PRIMSOL

URINARY ANTISPASMODICS

DETROL
 DETROL LA
 DITROPAN XL
 URISPAS

OPHTHALMIC

ANTIALLERGICS

ALOCRIAL
 ALEX
 LIVOSTIN
 OPTIVAR
 PATANOL
 ZADITOR

ANTI-INFECTIVES

CILOXAN
 OCUFLOX

ANTI-INFLAMMATORY, STEROIDAL

LOTEMAX

ANTI-INFLAMMATORY, NONSTEROIDAL

ACULAR
 VOLTAREN

BETA-ADRENERGICS

SELECTIVE
 BETOPTIC S

CARBONIC ANHYDRASE INHIBITORS

AZOPT
 TRUSOPT

CARBONIC ANHYDRASE INHIBITOR/BETA ADRENERGIC

COSOPT

PROSTAGLANDIN

XALATAN

SYMPATHOMIMETIC

ALPHAGAN

OTIC

ANTI-INFECTIVE

FLOXIN OTIC

ANTI-INFECTIVE/ ANTI-INFLAMMATORY

CIPRO HC

VITAMIN

PRENATAL VITAMIN

PRENATE ADVANCE

IRON CONTAINING

CHROMAGEN
 CHROMAGEN FA
 CHROMAGEN FORTE

Physician questions about this drug list may be answered by a Caremark pharmacist on our resource line at 1-800-282-2229.

QUICK REFERENCE BRAND PRIMARY DRUG LIST

Generics should be considered the first line of prescribing.

A	C	DIDRONEL	GLUCOTROL XL
ACCOLATE	CARBATROL	DILANTIN	GLUCOVANCE
ACCU-CHEK EASY	CARNITOR	DIOVAN	GLYSET
TEST STRIP	CASODEX	DIOVAN HCT	GONAL-F
ACCUPRIL	CATAPRES-TTS	DIPROLENE AF	GUAIFED CAPSULE
ACCURETIC	CEDAX	DITROPAN XL	GUAIFED-PD
ACTOS	CELEBREX	DORAL	
ACULAR	CELEXA	DOVONEX	H
ADDERALL	CETROTIDE	DUPHALAC	HELIDAC
ADVAIR	CHEMSTRIP BG II	DURAGESIC	HUMALOG
ADVANTAGE	TEST STRIP	DURATUSS	HUMATROPE
TEST STRIP	CHROMAGEN	DURATUSS DM	HUMBID LA
AGGRENEX	CHROMAGEN FA	DURATUSS G	HUMULIN
AGRYLIN	CHROMAGEN FORTE	DURATUSS GP	
ALOCRIL	CILOXAN	DURATUSS HD	I
ALPHAGAN	CINOBAC	DYAZIDE	IMITREX
ALREX	CIPRO	DYNACIN	INSTANT TEST STRIP
AMBIEN	CIPRO HC		INTRON A
AMERGE	CLARITIN	E	
ANDRODERM	CLARITIN REDITAB	EDEX	K
ARICEPT	CLARITIN-D 12 HOUR	EFFEXOR	K-DUR
ARTHROTEC	CLARITIN-D 24 HOUR	EFFEXOR XR	KEPPRA
ASACOL	COMBIVENT	ELMIRON	KRISTALOSE
ASTELIN	COMFORT CURVE	ENTEX PSE	KYTRIL ORAL
ATROVENT INHALER	TEST STRIP	ESTRACE	
AUGMENTIN	COMTAN	VAGINAL CREAM	L
AVALIDE	CONCERTA	ESTRADERM	LAMICTAL
AVANDIA	CONDYLOX	ESTRATEST	LANOXICAPS
AVAPRO	CORDRAN	EULEXIN	LANOXIN
AVELOX	COREG	EVISTA	LEVAQUIN
AXID	CORMAX	EVOXAC	LEVITE
AZMACORT	CORTENEMA	EXELON	LIPITOR
AZOPT	CORTIFOAM		LITHOBID
	COSOPT	F	LIVOSTIN
B	COUMADIN	FAMVIR	LOPROX
BACTROBAN	COVERA-HS	FEMHRT	LORTAB
BACTROBAN NASAL	CREON	FERTINEX	LOTEMAX
BD INSULIN SYRINGES		FLOMAX	LOTREL
BENZAC	D	FLOXIN OTIC	LUSTRA
BENZAMYCIN	DEMADEX	FORADIL	
BETOPTIC S	DEPAKOTE	FOSAMAX	M
BIAXIN	DESOWEN		MACROBID
BIAXIN XL	DETROL	G	MAXAIR
BROMFED CAPSULE	DETROL LA	GABITRIL	MAXIDONE
BROMFED-PD	DEXTROSTAT	GLUCOPHAGE	MENTAX
		GLUCOPHAGE XR	METADATE CD

QUICK REFERENCE BRAND PRIMARY DRUG LIST

Generics should be considered the first line of prescribing.

METROCREAM	ORTHO-CEPT	PROMETRIUM	TRICOR
METROGEL	ORTHO-CYCLEN	PROSCAR	TRILEPTAL
METROLOTION	ORTHO-NOVUM	PROTOPIN	TRILISATE
MIACALCIN	1/35, 1/50	PROVENTIL HFA	TRUSOPT
NASAL SPRAY	ORTHO-NOVUM 7/7/7	PROVIGIL	TUSSI-12
MICRONOR	ORTHO-NOVUM 10/11	PULMICORT	TUSSI-ORGANIDIN DM
MICROZIDE	ORTHO-PREFEST		TUSSI-ORGANIDIN NR
MIDRIN	ORTHO	R	TUSSIONEX
MIGRANAL	TRI-CYCLEN	REBETRON	
NASAL SPRAY	IVIDREL	RELAFEN	U
MIRAPEX	OXYCONTIN	REMERON	ULTRASE
MIRCETTE	OXYFAST	REMERON SOLTAB	ULTRASE MT
MOBIC	OXYIR	REMINYL	ULTRAVATE
MODICON		RETIN-A	UNITHROID
MONODOX	P	RETIN-A MICRO	URISPAS
MONOPRIL	PATANOL	RISPERDAL	URSO
MONOPRIL HCT	PEDIAPRED	ROWASA	
MS CONTIN	PEG-INTRON	RYNA-12 S	V
MSIR	PENTASA	RYNATAN	VALTREX
MUSE	PERCOCET	RYNATUSS	VIAGRA
MYCELEX TROCHE	PERGONAL		VIOXX
	PERIOSTAT	S	VIVELLE
N	PERMAX	SEMPREX-D	VOLMAX
NAPRELAN	PHRENILIN	SEREVENT	VOLTAREN OPHTH
NASACORT	PHRENILIN	SERZONE	
NASACORT AQ	FORTE	SIMPLICITY	W
NASONEX	PLAQUENIL	TEST STRIP	WELCHOL
NEURONTIN	PLAVIX	SINEMET CR	WELLBUTRIN SR
NEXIUM	PLETAL	SINGULAIR	
NIASPAN	PLEXION	SKELAXIN	X
NITREK	PRANDIN	SONATA	XALATAN
NITRO-DUR	PRAVACHOL	SPORANOX CAPSULE	XENICAL
NORCO	PRECOSE	STARLIX	
NORITATE	PREMARIN	SYNTHROID	Z
NORVASC	PREMPHASE		ZADITOR
NULEV	PREMPRO	TALACEN	ZANAFLEX
NUTROPIN	PRENATE ADVANCE	TALWIN NX	ZESTORETIC
NUTROPIN AQ	PREVACID	TAMIFLU	ZESTRIL
NUTROPIN DEPOT	PREVPAC	TEGRETOL XR	ZIAC
	PRIMSOL	TESTODERM	ZITHROMAX
O	PROAMATINE	THEO-24	ZOLOFT
OCUFLOX	PROCTOCREAM-HC	TIAZAC	ZOMIG
OMNICEF	PROCTOFOAM-HC	TOPAMAX	ZONEGRAN
OPTIVAR	PROFASI	TOPROL-XL	ZYRTEC
ORAPRED	PROGRAF		ZYRTEC-D 12 HOUR
ORGANIDIN NR			

Caremark may have financial relationships with the manufacturers of the listed products.