



NALC HEALTH BENEFIT PLAN

2013 PRESCRIPTION BENEFITS OVERVIEW



This booklet is a summary of some of the features of the NALC Health Benefit Plan. Detailed information on the benefits for the 2013 NALC Health Benefit Plan can be found in the official brochure. Before making a final decision, please read the Plan's officially approved brochure (RI 71-009). All benefits are subject to the definitions, limitations, and exclusions set forth in the official brochure.

NALC Health Benefit Plan
20547 Waverly Court
Ashburn, VA 20149
1-888-636-NALC (6252)
www.nalc.org/depart/hbp

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Retail coinsurance amounts shown are applicable for one fill/one refill of (up to) a 30-day fill of your maintenance medication purchased at a participating pharmacy in the NALC CareSelect network.

Your 2013 Drug Cost-Share When NALC is Primary

Generic Drug*:		You Pay:
Network Retail	up to 30 day supply	20% of cost
Mail Order	up to 60 day supply	\$8
Mail Order	61-90 day supply	\$12
Formulary Brand Drug:		You Pay:
Network Retail	up to 30 day supply	30% of cost
Mail Order	up to 60 day supply	\$43
Mail Order	61-90 day supply	\$65
Non-Formulary Brand Drug:		You Pay:
Network Retail	up to 30 day supply	45% of cost
Mail Order	up to 60 day supply	\$58
Mail Order	61-90 day supply	\$80
Specialty Drugs <small>(Available only through Caremark Specialty Pharmacy Mail Order)*</small>		You Pay:
Mail Order	up to 30 day supply	\$150
Mail Order	31-60 day supply	\$250
Mail Order	61-90 day supply	\$350

Your 2013 Drug Cost-Share When Medicare Part B is Primary

Generic Drug*:		You Pay:
Network Retail	up to 30 day supply	10% of cost
Mail Order	up to 60 day supply	\$7
Mail Order	61-90 day supply	\$10
Formulary Brand Drug:		You Pay:
Network Retail	up to 30 day supply	20% of cost
Mail Order	up to 60 day supply	\$37
Mail Order	61-90 day supply	\$55
Non-Formulary Brand Drug:		You Pay:
Network Retail	up to 30 day supply	30% of cost
Mail Order	up to 60 day supply	\$52
Mail Order	61-90 day supply	\$70
Specialty Drugs <small>(Available only through Caremark Specialty Pharmacy Mail Order)*</small>		You Pay:
Mail Order	up to 30 day supply	\$150
Mail Order	31-60 day supply	\$250
Mail Order	61-90 day supply	\$350

*Generic drug coverage shown above for those generic drugs not available at a reduced cost as listed on our NALCSelect, NALCPreferred, or NALCSenior Generic Drug Lists.

All specialty drugs require prior authorization. Specialty drugs, including biotech, biological, biopharmaceutical and oral chemotherapy drugs, are generally defined as high-cost prescription drugs that treat complex conditions and require special handling and administration and can cost thousands of dollars for a single dose.

Call Caremark Specialty Pharmacy Services at 1-800-237-2767 to obtain prior approval.

Why use Generics?

Generic drugs have the same active ingredients and are available in the same strength and dosage as the equivalent brand name drug. Before a generic can be labeled as equivalent to the brand name drug, it must meet stringent standards set by the Food and Drug Administration. Generic drugs provide the same therapeutic effects as their brand name equivalents.



Talk to your doctor or pharmacist about whether generic drugs are available for any brand name drugs you are taking. The use of generic drugs adds value to your health care dollar. Based on average ingredient cost, generics can save as much as 80% over their brand name counterparts. This means you pay less for generic drugs.

Catastrophic Out-of-Pocket Protection

Coinsurance amounts you pay for prescription drugs dispensed by an NALC Preferred or NALC CareSelect Network pharmacy, and mail order copayment amounts for specialty drugs, count toward a \$4,000 annual retail prescription out-of-pocket maximum. When you have met the \$4,000 annual retail prescription out-of-pocket maximum, retail coinsurance amounts and specialty drug mail order copayment amounts are waived for the remainder of the calendar year.

NALC Health Benefit Plan Formulary Drug List

We use a formulary. It is called the NALC Health Benefit Plan Formulary Drug List. The Plan's formulary is updated quarterly and lists commonly prescribed brand name and generic drugs. However, please keep in mind it is not an all-inclusive list and you should always call Caremark at 1-800-933-NALC (6252) to verify your cost for any drug. This list represents brand name drugs in ALL CAPS and generic products in lower case *italics*.

When there is no generic available, there may be more than one brand name medicine to treat a condition. The brand name drugs listed on the formulary identify products that are considered to be clinically appropriate and cost effective. When a brand-name drug is required, your out-of-pocket cost will be less when you use a drug on the NALC Health Benefit Plan Formulary Drug List. Please note that the drugs listed on the NALC Health Benefit Plan Formulary Drug List may change. Please call CVS Caremark at 1-800-933-NALC (6252) to verify your cost-share for any drug.

Q: What is a 4-Tier Prescription Drug Program?

A: All covered prescription drugs fall into one of four tiers. The tiers represent the level of cost you will pay.

- Tier 1 – Generic drugs. Your out-of-pocket costs are lowest when you use generics.
- Tier 2 – Formulary brand name drugs. If there is no generic medication available that is clinically appropriate for your treatment, ask your physician to prescribe a brand name medication on our Formulary Drug List. Your out-of-pocket costs are lower for brand name drugs that appear on our formulary.
- Tier 3 – Non-formulary brand name drugs. Your out-of-pocket costs are higher for brand name drugs that do not appear on our formulary.
- Tier 4 – Specialty drugs. Specialty drugs are generally considered high-cost injectable, infused, oral or inhaled drugs that require close supervision and monitoring. You must purchase specialty drugs, including biotech, biological, biopharmaceutical, and oral chemotherapy drugs, through the Caremark Specialty Pharmacy Services.

Q: Why isn't my brand name drug on the NALC Health Benefit Plan Formulary Drug List?

A: The NALC Health Benefit Plan Formulary is a list of commonly prescribed drugs identified by the CVS Caremark team of physicians and pharmacists (Pharmacy and Therapeutics Committee) to be the best overall value based on quality, safety, effectiveness, and cost. Drugs determined to be of equal therapeutic value and similar safety and efficacy are then evaluated on the basis of cost. Using lower cost formulary brand drugs provides you with a high quality, cost-effective prescription drug benefit.

Q: Does the NALC Health Benefit Plan Formulary list all brand drugs available for the Tier 2 benefit level?

A: No, our formulary is a list of commonly prescribed brand name drugs and is updated quarterly. It is not an all-inclusive list and you should always call Caremark at 1-800-933-NALC (6252) to verify your cost-share for any drug.

Q: Does the NALC Health Benefit Plan Formulary ever change?

A: Yes, our formulary is subject to review and modifications throughout the year. Brand drugs may be added to, or removed from, the formulary for many reasons, such as:

- Many brand name medications lose their patents and generic versions become available.
- The FDA approves many new drugs throughout the year. These brand name drugs may be added to our formulary and may replace other medications currently listed.
- Medications may be withdrawn from the market or become available without a prescription.

NALC Specialty Pharmacy Drug List

Specialty drugs are generally considered high-cost injectable, infused, oral or inhaled drugs that require close supervision and monitoring. You must purchase specialty drugs, including biotech, biological, biopharmaceutical, and oral chemotherapy drugs, through the Caremark Specialty Pharmacy Services.

All specialty drugs require prior approval to ensure appropriate treatment therapies for chronic complex conditions. Call CVS Caremark toll-free at 1-800-237-2767 for specific medications available through CVS Caremark Specialty Pharmacy, or to obtain prior approval. Specialty drugs available through CVS Caremark Specialty Pharmacy are subject to change.

ACROMEGALY

octreotide acetate
(SANDOSTATIN)^{1†}
Sandostatin LAR[†]
Somatuline Depot^{**†}
Somavert^{**†}

ALCOHOL DEPENDENCY

Vivitrol[†]

ALLERGIC ASTHMA

Xolair^{**†}

ALPHA-1 ANTITRYPSIN DEFICIENCY

Aralast^{2*†}
Glassia^{**†}

ANEMIA

Aranesp²
Epogen
Procrit

BOTULINUM TOXINS

Botox[†]
Dysport[†]
Myobloc[†]
Xeomin^{**†}

CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES

Arcalyst^{**†}
Ilaris^{**†}

CYSTIC FIBROSIS

Kalydeco^{**†}
Pulmozyme
TOBI

DUPUYTREN'S CONTRACTURE

Xiaflex^{**†}

GASTROINTESTINAL-OTHER

Solesta^{**†}

GOUT

Krystexxa^{**†}

GROWTH HORMONE & RELATED DISORDERS

Growth Hormone Disorders
Genotropin²
Humatrope
Norditropin²
Nutropin²
Omnitrope
Saizen²

Serostim^{**†}

Tev-Tropin
Zorbtive
IGF-1 Deficiency
Increlex^{**†}

HEMATOPOIETICS

Mozobil^{**†}
Neumega

HEMOPHILIA, VON WILLEBRAND DISEASE & RELATED BLEEDING DISORDERS[†]

Advate
Alphanate
AlphaNine SD
Bebulin²
BeneFIX
Corifact^{*}
Feiba VH
Feiba NF
Helixate FS
Hemofil M
Humate-P
Koate-DVI
Kogenate FS
Monarc M
Monoclate-P
Mononine
NovoSeven²
Profilnine SD
Proplex T
Recombinate
Refacto
RiaSTAP
Stimate
Wilate
Xyntha

HEPATITIS C

Incivek
Infergen
Pegasys²
PegIntron²
Rebetol Solution
RibaPak
Ribasphere
RibaTab
ribavirin caps
(REBETOL)¹
ribavirin tabs
(COPEGUS)¹
Victrelis

HEREDITARY ANGIOEDEMA[†]

Berinert^{*}
Cinryze^{*}
Firazyr^{*}

HIV MEDICATIONS

Fuzeon

HORMONAL THERAPIES

Eligard
Firmagon[†]
H.P. Acthar Gel^{**†}
leuprolide acetate
(LUPRON)¹
Lupron Depot^{2†}
Supprelin LA^{**†}
Trelstar^{2†}
Vantas[†]
Viadur[†]
Zoladex[†]

IMMUNE DEFICIENCIES & RELATED DISORDERS[†]

Carimune NF
Cytogam
Flebogamma²
GammaSTAN S/D
Gammagard²
Gammaked
Gammalex^{*}
Gamunex
HepaGam B
Hizentra^{*}
HyperHEP B
HyperRHO S/D
MICRhoGAM²
Nabi-HB
Octagam
Polygam S/D
Privigen
RhoGAM²
Rhophylac
Vivaglobin^{*}
WinRho SDF

IMMUNE (IDIOPATHIC) THROMBOCYTOPENIC PURPURA

Nplate[†]
Promacta^{**†}

INFECTIOUS DISEASE

Actimmune^{**†}

INFLAMMATORY BOWEL DISEASE

Cimzia
Humira
Remicade†
Tysabri**

IRON OVERLOAD

deferoxamine
(DESFERAL)††
Exjade**

LYSOSOMAL STORAGE DISORDERS†

Aldurazyme*
Cerezyme*
Cystagon*
Elaprase*
Fabrazyme*
Lumizyme*
Myozyme*
Naglazyme*
VPRIV*

MACULAR DEGENERATION

Eylea**
Lucentis**
Macugen**
Visudyne**

MOVEMENT DISORDERS

Apokyn**
Xenazine**

MULTIPLE SCLEROSIS

Ampyra**
Avonex²
Betaseron
Copaxone
Extavia
Gilenya
Rebif
Tysabri**

NEUTROPENIA

Leukine
Neulasta
Neupogen

ONCOLOGY – INJECTABLE³

Thyrogen**
Xgeva†
Zometa†

ONCOLOGY–ORAL/TOPICAL

Afinitor
Erivedge**†
Gleevec
Hycamtin**
Inlyta**
Jakafi**
Nexavar**
Oforta**
Revlimid**†
Sprycel
Sutent
Tarceva
Targretin²
Tasigna
Temodar
Thalomid
Tykerb**†
Votrient**†
Xalkori**†
Xeloda
Zelboraf**†
Zolinda
Zytiga

OSTEOARTHRITIS

Euflexxa†
Hyalgan†
Orthovisc†
Supartz†
Synvisc†
Synvisc One†

OSTEOPOROSIS

Forteo
Prolia†
Reclast†

PAROXYSMAL NOCTURNAL HEMOGLOBINURIA

Soliris**†

PHENYLKETONURIA

Kuvan**†

PRE-TERM BIRTH

Makena**†

PSORIASIS

Amevive†
Enbrel
Humira
Remicade†
Stelara†

PULMONARY ARTERIAL HYPERTENSION†

Adcirca epoprostenol sodium^{1*}
Letairis*
Remodulin*
Revatio
Tracleer*
Tyvaso*
Ventavis*

RENAL DISEASE

Sensipar

RESPIRATORY SYNCYTIAL VIRUS

Synagis†

RHEUMATOID ARTHRITIS

Actemra†
Cimzia
Enbrel
Humira
Kineret†
Orencia†
Remicade†
Simponi

SEIZURE DISORDERS

H.P. Acthar Gel**†
Sabril**†

SYSTEMIC LUPUS ERYTHEMATOSUS

Benlysta†

If you are a plan member or health care provider, please contact CaremarkConnect® toll-free at 1-800-237-2767 or visit www.cvscarespecialtyrx.com.

¹ Lowercase type indicates generic name and availability; lowercase type within parentheses indicates trademark generics listed only when no brand is available; products in all capital letters within parentheses indicate brand names of generic products.

² Multiple dosage formulations and/or injectable devices are available

³ Call CVS Caremark toll-free at 1-800-237-2767 for specific medications available through CVS Caremark Specialty Pharmacy. Listing is subject to change.

* Indicates Limited Distribution products distributed by CVS Caremark Specialty Pharmacy. Limited Distribution defined as less than 15 pharmacy providers.

† Therapy class or product is part of CVS Caremark's Specialty Select offering.

Products distributed by CVS Caremark Specialty Pharmacy, may change from time to time.

Call CVS Caremark toll free at 1-800-237-2767 for specific medications available through CVS Caremark Specialty Pharmacy, or to obtain prior approval.

NALCSelect Generics

In 2013, the amount you pay for a 90-day supply of an NALCSelect generic medication purchased through our mail order program, or at a CVS Caremark Pharmacy through our Maintenance Choice Program is just \$5, or \$4 when Medicare Part B is your primary payor. Regular retail coinsurance and mail order copayment amounts apply for generic medications not on the NALCSelect Generic or NALCPreferred Generic list. Our 2013 NALCSelect Generic list includes the following:

A/C/D/Fluoride Vitamins Drop 0.25mg	Chlordiazepoxide HCL Capsule 25mg
Acetaminophen/Codeine Solution 120-12/5	Chlorhexidine Gluconate Solution 0.12%
Acetaminophen/Codeine Tablet #2	Chlorothiazide Tablet 250mg
Acetaminophen/Codeine Tablet #3	Chlorothiazide Tablet 500mg
Acetaminophen/Codeine #3 Tablet #3	Chlorpromazine HCL Tablet 10mg
Acetazolamide Tablet 125mg	Chlorthalidone Tablet 25mg
Acetylcysteine Solution 20% 10ml	Chlorthalidone Tablet 50mg
Albuterol Sulfate Syrup 2mg/5ml	Clindamycin Phosphate Solution 1%
Allopurinol Tablet 100mg	Clonidine HCL Tablet 0.1mg
Altavera Tablet 800mg	Clotrimazole Solution 1%
Altavera Tablet 500mg	Codeine Sulfate Tablet 15mg
Amiloride/Hydrochlorothia Tablet 5-50	Codeine Sulfate Tablet 30mg
Aminophylline Tablet 200mg	Colchicine Tablet 0.6mg
Amitriptyline HCL Tablet 10mg	Cortisone Acetate Tablet 500mg
Amitriptyline HCL Tablet 25mg	Corvita Tablet
Amitriptyline HCL Tablet 50mg	Corvite Free Tablet
Ammonium Lactate Cream 2X140GM	Covaryx Hs Tablet 150mg
Amos Levothyroxine Sodium Tablet 0.025mg	Cryselles-28 Tablet 150mg
Amos Levothyroxine Sodium Tablet 0.088mg	Cyanocobalamin Mdv 1000mcg
Amos Levothyroxine Sodium Tablet 0.05mg	Cyclopentolate Solution 1% OP
Amos Levothyroxine Sodium Tablet 0.075mg	Cyclopentolate HCL Solution 1% OP
Amos Levothyroxine Sodium Tablet 0.1mg	Cyproheptadine HCL Tablet 4mg
Amos Levothyroxine Sodium Tablet 0.125mg	Dexamethasone Tablet 0.75mg
Amos Levothyroxine Sodium Tablet 0.112mg	Dexamethasone Tablet 0.5mg
Amos Levothyroxine Sodium Tablet 0.137mg	Dexamethasone Tablet 500mg
Amos Levothyroxine Sodium Tablet 0.2mg	Dexamethasone Tablet 875mg
Amos Levothyroxine Sodium Tablet 0.175mg	Dexamethasone Tablet 500mg
Amoxicillin Capsule 250mg	Dexamethasone Tablet 250/5ml
Ampicillin Capsule 250mg	Dexamethasone Sodium Phos Via 500/125
Apri Tablet 250mg	Dexmethylphenidate HCL Tablet 2.5mg
Atenolol Tablet 25mg	Dextroamphetamine Sulfate Tablet 5mg
Atenolol Tablet 50mg	Dialyvit Tablet
Atropine Sulfate Solution 1% OP	Diazepam Tablet 2mg
Bacteriostatic Water For Via Benz Alc	Diazepam Tablet 5mg
Belladonna Alkaloids/Phen Tablet 16.2mg	Diazepam Solution 1mg/ml
Benzoyl Peroxide Gel AQ 5%	Diazepam Tablet 10mg
Benztropine Mesylate Tablet 0.5mg	Diclofenac Sodium Solution 0.1% OP
Benztropine Mesylate Tablet 1mg	Dicyclomine HCL Solution 10mg/5ml
Benzotropine Mesylate Tablet 2mg	Digoxin Tablet 0.25mg
Betamethasone Valerate Ointment 0.1%	Digoxin Tablet 0.125mg
Betamethasone Valerate Cream 0.1%	Diphenhydramine HCL Via 50mg/ml
Brimonidine Tartrate Solution 0.2% OP	Diphenhydramine HCL Capsule 50mg
Bupivacaine HCL Via 0.50%	Doxepin HCL Con 10mg/ml
Butalbital/Acetaminophen Tablet	Doxycycline Hyclate Capsule 50mg
Calcium Gluconate Via 10%	Enpresse-28 Tablet 5mg
Carbamazepine Chew 100mg	Epiklor Pow 20MEQ
Carteolol HCL Solution 1%	Ergocalciferol Capsule 50,000U
Chlordiazepoxide HCL Capsule 5mg	Erythromycin Solution 2%
Chlordiazepoxide HCL Capsule 10mg	Erythromycin Ointment OP

Medications eligible for the NALCPreferred Generic, NALCSelect Generic and NALCSenior Antibiotic Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

Estradiol Tablet 0.5mg
 Estradiol Tablet 1mg
 Estropipate Tablet 100mg
 Ethyl Chloride/Mist Aer
 Fabb Tablet
 Famotidine Via 20mg/2ml
 Fe C Plus Tablet
 Fenofibrate Tablet 54mg
 Ferocon Capsule
 Ferrex 150 Forte Capsule
 Ferrocite Plus Tablet
 Fexofenadine HCL Tablet 30mg
 Fludrocortisone Acetate Tablet 250mg
 Fluocinolone Acetonide Oil 0.01%
 Fluocinonide Cream 0.05%
 Fluoridex Daily Defense S Pst Sensitive
 Fluorometholone Sus 0.1% OP
 Fluoxetine HCL Liquid 20mg/5ml
 Fluphenazine HCL Tablet 2.5mg
 Flurazepam HCL Capsule 15mg
 Flurazepam HCL Capsule 30mg
 Folbee Tablet
 Folbee Plus Cz Tablet
 Folbic Tablet
 Folic Acid Tablet 1mg
 Folic Acid/Cyanocobalamin Tablet
 Folitab Tablet
 Folplex 2.2 Tablet
 Furosemide Tablet 20mg
 Furosemide Tablet 40mg
 Furosemide Solution 10mg/ml
 Gentak Ointment 0.3% OP
 Gentamicin Sulfate Ointment 0.1%
 Gildess Fe 1.5/30 Tablet 1mg
 Gildess Fe 1/20 Tablet 2.5mg
 Glipizide Tablet 5mg
 Glipizide Er Tablet 5mg
 Glipizide Er Tablet .0375/24
 Glipizide XI Tablet 5mg
 Glipizide XI Tablet 0.0375mg
 Glyburide Tablet 1.25mg
 Haloperidol Tablet 0.5mg
 Hematin F Tablet
 Hematinic Plus Tablet
 Hematogen Capsule
 Hemocyte-F Tablet
 Homatropine HBR Solution 5% OP
 Hydrochlorothiazide Tablet 25mg
 Hydrochlorothiazide Tablet 50mg
 Hydrochlorothiazide Capsule 12.5mg
 Hydrochlorothiazide Tablet 12.5mg
 Hydrocodone/Acetaminophen Tablet 5-500mg
 Hydrocodone/Acetaminophen Tablet 2.5-500
 Hydrocortisone Cream 1%
 Hydrocortisone Ointment 2.5%
 Hydrocortisone Cream 2.5%
 Hydrocortisone Tablet 20mg
 Hydrocortisone Ointment 1%
 Hydrocortisone Tablet 875mg
 Hydrocortisone Acetate Sup 25mg
 Hydrocortisone Butyrate Ointment 0.1%
 Hydrocortisone Butyrate Cream 0.10%
 Hydrocortisone Valerate Cream 0.20%
 Hydroxyzine HCL Tablet 10mg
 Hydroxyzine Pamoate Capsule 50mg
 Hydroxyzine Pamoate Capsule 100mg
 Hypercare Solution 20%
 Icar-C Plus Tablet
 Isosorbide Dinitrate Tablet 20mg IR
 Isosorbide Dinitrate Tablet 20mg
 Isosorbide Dinitrate Tablet 5mg IR
 Isosorbide Dinitrate Sub 5mg
 Isosorbide Dinitrate Tablet 10mg
 Isosorbide Dinitrate Tablet 10mg IR
 Isosorbide Dinitrate Tablet 30mg IR
 Isosorbide Mononitrate Tablet 10mg
 Isosorbide Mononitrate Tablet 10mg IR
 Isosorbide Mononitrate Er Tablet 60mg
 Junel Fe 1.5/30 Tablet 25mg
 Junel Fe 1/20 Tablet 125mg
 K-Effervescent Tablet 25MEQ EF
 Ketoconazole Sha 2%
 Ketorolac Tromethamine Sdv 30mg/ml
 Ketorolac Tromethamine Sdv 30mg/ml
 Klor-Con Tablet 10MEQ ER
 Klor-Con Tablet 25MEQ
 Klor-Con 10 Tablet 10MEQ ER
 Klor-Con M10 Tablet 10MEQ ER
 Klor-Con M20 Tablet 20MEQ ER
 Klor-Con/Ef Tablet 25MEQ
 K-Vescent Tablet 25MEQ EF
 Lactic Acid W/Vitamin E Cream
 Leucovorin Calcium Tablet 5mg
 Levobunolol HCL Solution 0.25% OP
 Levora Tablet 500mg
 Levothroid Tablet 25mcg
 Levothroid Tablet 0.137mg
 Levothroid Tablet 0.05mg
 Levothroid Tablet 0.075mg
 Levothroid Tablet 0.025mg
 Levothroid Tablet 0.088mg
 Levothroid Tablet 0.1mg
 Levothroid Tablet 0.112mg
 Levothroid Tablet 0.125mg
 Levothroid Tablet 0.15mg
 Levothroid Tablet 0.2mg
 Levothroid Tablet 0.175mg
 Levothroid Tablet 0.3mg
 Levothyroxine Sodium Tablet 0.025mg
 Levothyroxine Sodium Tablet 25mcg
 Levothyroxine Sodium Tablet .088mg
 Levothyroxine Sodium Tablet 0.05mg
 Levothyroxine Sodium Tablet 0.075mg
 Levothyroxine Sodium Tablet 0.088mg
 Levothyroxine Sodium Tablet 0.1mg
 Levothyroxine Sodium Tablet 125mcg

Medications eligible for the NALC Preferred Generic, NALC Select Generic and NALC Senior Antibiotic Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

Levothyroxine Sodium Tablet 0.125mg
 Levothyroxine Sodium Tablet 0.15mg
 Levothyroxine Sodium Tablet 0.2mg
 Levothyroxine Sodium Tablet 0.175mg
 Levothyroxine Sodium Tablet 0.3mg
 Levoxyl Tablet 25mcg
 Levoxyl Tablet 50mcg
 Levoxyl Tablet 75mcg
 Levoxyl Tablet 88mcg
 Levoxyl Tablet 100mcg
 Levoxyl Tablet 112mcg
 Levoxyl Tablet 125mcg
 Levoxyl Tablet 137mcg
 Levoxyl Tablet 150mcg
 Levoxyl Tablet 175mcg
 Levoxyl Tablet 200mcg
 Lidocaine HCL Jelly Gel 2%
 Lidocaine Viscous Solution 2%
 Lithium Carbonate Capsule 150mg
 Lithium Carbonate Capsule 300mg
 Lithium Carbonate Tablet 300mg
 Lithium Carbonate Capsule 600mg
 Lithium Carbonate Er Tablet 450mg
 Magnesium Sulfate Sdv 50%
 Mecizine HCL Tablet 25mg
 Medroxyprogesterone Aceta Tablet 10mg
 Medroxyprogesterone Aceta Tablet 2.5mg
 Medroxyprogesterone Aceta Tablet 5mg
 Medroxyprogesterone Aceta Via 500mg
 Medroxyprogesterone Aceta Syn 750mg
 Mefloquine HCL Tablet 250mg
 Metaproterenol Sulfate Syrup 10mg/5ml
 Methadone HCL Tablet 5mg
 Methadone HCL Tablet 10mg
 Methenamine Mandelate Tablet 500mg
 Methimazole Tablet 5mg
 Methimazole Tablet 10mg
 Methylodopa/Hydrochlorothi Tablet 250/25
 Methylin Tablet 5mg
 Methylin Tablet 10mg
 Methylphenidate HCL Tablet 5mg
 Methylphenidate HCL Tablet 10mg
 Methylphenidate HCL Er Tablet 10mg
 Metipranolol Solution 0.3% OP
 Metipranolol Solution 0.30%
 Metoprolol Tartrate Tablet 25mg
 Metronidazole Tablet 250mg
 Metronidazole Tablet 500mg
 Microgestin 21 Tablet 250mg
 Microgestin Fe Tablet 50mg
 Morphine Sulfate Tablet 15mg
 Morphine Sulfate Tablet 30mg
 Multi-Vitamin With Fluoride Chew 0.5mg
 Multi-Vitamin/Fluoride Drop 0.5mg/ml
 Multi-Vitamin/Iron/Fluoride Drop /FL 0.25
 Multivitamin/Fluoride Chew 0.5mg
 Multivitamin/Fluoride Chew 0.25mg
 Multivitamin/Fluoride Chew 1mg
 Multi-Vitamin/Fluoride Chew 0.5mg
 Multi-Vitamin/Fluoride Chew 0.25mg
 Multi-Vitamin/Fluoride Chew 1mg
 Necon 1/35 Tablet 250mg
 Necon 1/50-28 Tablet 125mg
 Neomycin/Polymyxin/Dexame Ointment 0.1% OP
 Niacor Tablet 500mg
 Nicardipine HCL Capsule 20mg
 Nitroglycerin 0.4 mg 1/150
 Nitroglycerin 0.3 mg 1/200
 Nitroglycerin Sr Capsule 9mg
 Norgestrel/Ethinyl Estrad Tablet 250mg
 Np Thyroid 30 Tablet 30mg
 Nystatin Ointment 100000
 Nystatin Cream 100000U
 Ofloxacin Solution 0.3%OTIC
 Ofloxacin Solution 0.3% OP
 Ondansetron HCL MDV 2mg/ml
 Oto-End 10 Solution OTIC
 Oxybutynin Chloride Syrup 5mg/5ml
 Oxycodone/Acetaminophen Tablet 5-325mg
 Pantoprazole Sodium Tablet 40mg
 Peg-3350/Electrolytes Solution
 Penicillin V Potassium Tablet 250mg
 Perphenazine/Amitriptylin Tablet 2-10mg
 Perphenazine/Amitriptylin Tablet 4-10mg
 Phenazopyridine HCL Tablet 100mg
 Phenobarbital Tablet 15mg
 Phenobarbital Tablet 16.2mg
 Phenobarbital Tablet 97.2mg
 Phenobarbital Tablet 30mg
 Phenobarbital Tablet 60mg
 Phenobarbital Tablet 100mg
 Phenobarbital Tablet 32.4mg
 Phenobarbital Tablet 64.8mg
 Phenobarbital Elix 20mg/5ml
 Phenytoin Sodium Extended Capsule 100mg
 Pilocarpine Solution 1% OP
 Pilocarpine Solution 4% OP
 Pilocarpine Solution 2% OP
 Pilocarpine HCL Solution 1% OP
 Poly-Iron 150 Forte Capsule 150
 Potassium Chloride Liquid 20% SF
 Potassium Chloride Liquid 10% SF
 Potassium Chloride Er Tablet 10MEQ
 Potassium Chloride Er Tablet 20MEQ
 Prednisolone Acetate Sus 1% OP
 Prednisolone Sodium Phosp Solution 500mg
 Prednisone Tablet 5mg
 Prednisone Pak 5mg21'S
 Prednisone Tablet 2.5mg
 Prednisone Tablet 10mg
 Prednisone Tablet 50mg
 Prednisone Tablet 20mg
 Prednisone Tablet 1mg
 Prenaplus Tablet

Medications eligible for the NALC Preferred Generic, NALC Select Generic and NALC Senior Antibiotic Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

PrenaTablets Fa Tablet
 PrenaTablets Rx Tablet
 Prenatal 19 Tablet
 Prenatal 19 Chew Tablet
 Prenatal Ad Tablet
 Prenatal Plus Tablet 27-1mgFE
 Prenatal Plus/Iron Tablet PLUS/FE
 Proctosol Hc Cream 2.50%
 Protozone-Hc Cream -HC 2.5%
 Promethazine/Codeine Syrup 6.25-10
 Promethazine/Dextromethor Syrup DM
 Propranolol HCL Solution 20mg/5ml
 Quinidine Sulfate Tablet 300mg
 Quinidine Sulfate Tablet 200mg
 Quinidine Sulfate Er Tablet 300mg
 Renal Cap Softgel
 Rena-Vite Rx Tablet
 Reno Caps Capsule
 Selenium Sulfide Lot 2.5%
 Se-Tan Plus Capsule
 Silver Sulfadiazine Cream 1%
 Sodium Chloride Injection 0.90%
 Sodium Chloride Neb 3% 15ml
 Sodium Chloride Neb 0.9% 3ml
 Sodium Chloride 0.9% Injection 0.9% PB
 Sodium Fluoride Chew 0.25mg
 Spironolactone Tablet 25mg
 Spironolactone Tablet 50mg
 Spironolactone/Hydrochlor Tablet 25/25
 Sterile Water For Injection Via
 Strovite Plus Tablet
 Sulfamethoxazole/Trimetho Sus 200-40/5
 Sulfamethoxazole/Trimetho Tablet 400-80mg
 Sulfamethoxazole/Trimetho Tablet 800-160
 Sulfasalazine Tablet 500mg
 Synthroid Tablet 0.025mg
 Synthroid Tablet 0.1mg
 Synthroid Tablet 0.088mg
 Synthroid Tablet 0.112mg
 Synthroid Tablet 0.05mg
 Synthroid Tablet 0.15mg
 Synthroid Tablet 0.2mg
 Taztia Xt Capsule 120mg/24
 Temazepam Capsule 15mg
 Temazepam Capsule 30mg
 Theophylline Cr Tablet 100mg
 Theophylline Er Tablet 300mg
 Thermazene Cream 1%

Thiamine HCL Via 100mg/ml
 Thioridazine HCL Tablet 100mg
 Thiothixene Capsule 1mg
 Timolol Maleate Tablet 5mg
 Timolol Maleate Tablet 10mg
 TI Gard Rx Tablet
 TI-Fol 500 Tablet
 TI-Hem 150 Tablet
 Torsemido Tablet 5mg
 Trazodone HCL Tablet 50mg
 Triamcinolone Acetonide Cream 0.025%
 Triamcinolone Acetonide Cream 0.1%
 Triamcinolone Acetonide Ointment 0.5%
 Triamcinolone Acetonide Ointment 0.1%
 Triamcinolone Acetonide Ointment 0.025%
 Triamcinolone Acetonide Cream 0.5%
 Triamterene/Hydrochloroth Tablet 37.5-25
 Triamterene/Hydrochloroth Capsule 37.5-25
 Triamterene/Hydrochloroth Tablet 75-50mg
 Triazolam Tablet 0.125mg
 Triazolam Tablet 0.25mg
 Tricon Capsule
 Trifluoperazine HCL Tablet 1mg
 Trihexyphenidyl HCL Tablet 2mg
 Trihexyphenidyl HCL Tablet 5mg
 Trimethoprim Tablet 100mg
 Triphrocaps Capsule
 Tri-Vitamin/Fluoride Drop 0.25mg
 Trivora-28 Tablet 500mg
 Tropicamide Sol 1% OP
 Tussigon Tablet 1.5/5mg
 Unithroid Tablet 0.05mg
 Unithroid Tablet 0.088mg
 Unithroid Tablet 0.1mg
 Unithroid Tablet 0.112mg
 Unithroid Tablet 0.125mg
 Unithroid Tablet 0.15mg
 Unithroid Tablet 0.075mg
 V-C Forte Capsule
 Verapamil HCL Tablet 40mg
 Vitamin D Capsule 50,000IU
 Vitamin D Capsule 50000IU
 Vitamin D Capsule 50000UNT
 Vitamin D2 50,000iu Capsule
 Vol-Care Rx Tablet
 Zinc Sulfate Capsule 220mg RX
 Zincate Capsule 220mg
 Zovia Tablet 200mg

Medications eligible for the NALC Preferred Generic, NALC Select Generic and NALC Senior Antibiotic Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

NALCPreferred Generics

In 2013, we're making 90-day fills of thousands of generic drugs available through the CVS Maintenance Choice Program and through our Caremark mail order program for only \$7.99 when we are your primary payor, and for only \$4 when Medicare Part B is the primary payor. This NALCPreferred Generic list represents a summary of prescriptions included in our NALCPreferred Generic list.

Acyclovir Capsule 200mg	Chlorzoxazone Tablet 500mg
Albuterol Sulfate Tablet 2mg	Cimetidine Tablet 300mg
Albuterol Sulfate Solution 0.5%	Cimetidine Tablet 400mg
Albuterol Sulfate Tablet 4mg	Cimetidine Tablet 800mg
Albuterol Sulfate Neb 0.5%	Citalopram Hydrobromide Tablet 10mg
Albuterol Sulfate Neb 0.083%	Citalopram Hydrobromide Tablet 20mg
Alendronate Sodium Tablet 70mg	Citalopram Hydrobromide Tablet 40mg
Alendronate Sodium Tablet 35mg	Citric Acid/Sodium Citrat Solution
Allopurinol Tablet 300mg	Clonidine HCL Tablet 0.2mg
Amiodarone HCL Tablet 200mg	Clonidine HCL Tablet 0.3mg
Amitriptyline HCL Tablet 75mg	Coumadin Tablet 2.5mg
Amitriptyline HCL Tablet 150mg	Cyclobenzaprine HCL Tablet 10mg
Amitriptyline HCL Tablet 100mg	Cyclobenzaprine HCL Tablet 5mg
Atenolol Tablet 100mg	Cytra-2 Solution
Atenolol/Chlorthalidone Tablet 50-25mg	Desonide Cream 0.05%
Atenolol/Chlorthalidone Tablet 100-25mg	Dexamethasone Tablet 4mg
Atorvastatin Calcium Tablet 10mg	Diclofenac Sodium DR Tablet 50mg EC
Atorvastatin Calcium Tablet 80mg	Diclofenac Sodium DR Tablet 75mg EC
Atorvastatin Calcium Tablet 20mg	Diclofenac Sodium EC Tablet 50mg
Atorvastatin Calcium Tablet 40mg	Diclofenac Sodium EC Tablet 75mg
Baclofen Tablet 10mg	Dicyclomine HCL Capsule 10mg
Benazepril HCL Tablet 5mg	Dicyclomine HCL Tablet 20mg
Benazepril HCL Tablet 10mg	Diltiazem CD Capsule 120/24hr
Benazepril HCL Tablet 40mg	Diltiazem HCL Tablet 30mg
Benazepril HCL Tablet 20mg	Diltiazem HCL Tablet 60mg
Benazepril HCT Tablet 10-12.5	Diltiazem HCL Tablet 120mg
Benazepril HCT Tablet 20-25mg	Diltiazem HCL Tablet 90mg
Benazepril HCT Tablet 20-12.5	Diltiazem HCL ER Capsule 120/24hr
Betamethasone Dipropionat Cream 0.05%	Doxazosin Mesylate Tablet 4mg
Bisoprolol Fum Tablet 2.5/6.25	Doxazosin Mesylate Tablet 2mg
Bisoprolol Fumarate/HCTZ Tablet 10/6.25	Doxazosin Mesylate Tablet 8mg
Bisoprolol Fumarate/Hydro Tablet 2.5/6.25	Doxazosin Mesylate Tablet 1mg
Bisoprolol Fumarate/Hydro Tablet 5-6.25mg	Doxepin HCL Capsule 10mg
Bisoprolol Fumarate/Hydro Tablet 10/6.25	Doxepin HCL Capsule 50mg
Bisoprolol/HCTZ Tablet 5/6.25mg	Doxepin HCL Capsule 25mg
Bumetanide Tablet 0.5mg	Doxepin HCL Capsule 75mg
Bumetanide Tablet 1mg	Doxepin HCL Capsule 100mg
Bumetanide Tablet 2mg	Enalapril Maleate Tablet 2.5mg
Buspiron HCL Tablet 5mg	Enalapril Maleate Tablet 5mg
Buspiron HCL Tablet 10mg	Enalapril Maleate Tablet 10mg
Buspiron HCL Tablet 15mg	Enalapril Maleate Tablet 20mg
Captopril Tablet 50mg	Enalapril Maleate/HCTZ Tablet 5-12.5mg
Captopril Tablet 100mg	Enalapril Maleate/HCTZ Tablet 10-25mg
Carbamazepine Tablet 200mg	Estradiol Tablet 2mg
Carbamazepine IR Tablet 200mg	Estropipate Tablet .625=.75
Carvedilol Tablet 3.125mg	Estropipate Tablet 1.25=1.5
Carvedilol Tablet 12.5mg	Famotidine Tablet 20mg
Carvedilol Tablet 6.25mg	Famotidine Tablet 40mg
Carvedilol Tablet 25mg	Fluconazole Tablet 200mg
Chlorpromazine HCL Tablet 25mg	Fluconazole Tablet 100mg
Chlorpromazine HCL Tablet 50mg	Fluocinolone Acetonide Cream 0.025%

Medications eligible for the NALCPreferred Generic, NALCSelect Generic and NALCSenior Antibiotic Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

Fluoxetine Capsule 10mg
 Fluoxetine Tablet 10mg
 Fluoxetine HCL Tablet 10mg
 Fluoxetine HCL Capsule 10mg
 Fluoxetine HCL Capsule 20mg
 Fluoxetine HCL Capsule 40mg
 Fluphenazine HCL Tablet 1mg
 Fluphenazine HCL Tablet 5mg
 Flurbiprofen Solution 0.03% OP
 Fosinopril Sodium Tablet 10mg
 Fosinopril Sodium Tablet 40mg
 Fosinopril Sodium Tablet 20mg
 Furosemide Tablet 80mg
 Gabapentin Capsule 100mg
 Glimepiride Tablet 1mg
 Glimepiride Tablet 2mg
 Glimepiride Tablet 4mg
 Glipizide Tablet 10mg
 Glyburide Tablet 2.5mg
 Glyburide Tablet 5mg
 Glyburide, Micronized Tablet 1.5mg
 Glyburide, Micronized Tablet 3mg
 Glyburide, Micronized Tablet 6mg
 Glyburide/Metformin HCL Tablet 5-500mg
 Guanfacine HCL Tablet 1mg
 Guanfacine HCL Tablet 2mg
 Haloperidol Tablet 1mg
 Haloperidol Tablet 2mg
 Haloperidol Tablet 5mg
 Hydralazine HCL Tablet 10mg
 Hydralazine HCL Tablet 25mg
 Hydroxyzine HCL Syrup 10mg/5ml
 Hydroxyzine Pamoate Capsule 25mg
 Ibuprofen Tablet 400mg
 Ibuprofen Tablet 600mg
 Ibuprofen Tablet 800mg
 Imdur ER Tablet 30mg
 Imipramine HCL Tablet 10mg
 Imipramine HCL Tablet 25mg
 Indapamide Tablet 1.25mg
 Indapamide Tablet 2.5mg
 Indomethacin Capsule 25mg
 Indomethacin Capsule 50mg
 Ipratropium Bromide Solution Inh 30's
 Ipratropium Bromide Solution Inh 25's
 Isosorbide Mononitrate IR Tablet 20mg
 Isosorbide Mononitrate Tablet 20mg
 Isosorbide Mononitrate ER Tablet 30mg
 Isosorbide Mononitrate ER Tablet 120mg
 Jantoven Tablet 4mg
 Jantoven Tablet 5mg
 Jantoven Tablet 2.5mg
 Jantoven Tablet 2mg
 Jantoven Tablet 1mg
 Ketoprofen Capsule 75mg
 Ketoprofen Capsule 50mg
 Klor-Con ER Tablet 8meq
 Labetalol HCL Tablet 100mg
 Lactulose Solution 10gm/15
 Levobunolol HCL Solution 0.5% OP
 Lisinopril Tablet 2.5mg
 Lisinopril Tablet 5mg
 Lisinopril Tablet 10mg
 Lisinopril Tablet 20mg
 Lisinopril Tablet 30mg
 Lisinopril Tablet 40mg
 Lisinopril/HCTZ Tablet 10-12.5
 Lisinopril/HCTZ Tablet 20-25mg
 Lisinopril/HCTZ Tablet 20-12.5
 Lisinopril/Hydrochlorothi Tablet 10-12.5
 Lisinopril/Hydrochlorothi Tablet 20-25mg
 Lisinopril/Hydrochlorothi Tablet 20-12.5
 Lovastatin Tablet 10mg
 Lovastatin Tablet 20mg
 Lovastatin Tablet 40mg
 Mecizine HCL Tablet 12.5mg
 Medrol Tablet 4mg
 Megestrol Acetate Tablet 20mg
 Meloxicam Tablet 7.5mg
 Meloxicam Tablet 15mg
 Metformin HCL Tablet 500mg
 Metformin HCL Tablet 850mg
 Metformin HCL Tablet 1000mg
 Metformin HCL ER Tablet 500mg
 Metformin HCL ER Tablet 500mg(G)
 Metformin HCL ER Tablet 500mg
 Metformin HCL XR Tablet 500mg
 Methocarbamol Tablet 500mg
 Methylodopa Tablet 250mg
 Methylodopa Tablet 500mg
 Methylprednisolone Tablet 4mg
 Metoclopramide HCL Solution 5mg/5ml
 Metoclopramide HCL Tablet 10mg
 Metoclopramide HCL Tablet 5mg
 Metolazone Tablet 2.5mg
 Metolazone Tablet 5mg
 Metoprolol Tartrate Tablet 50mg
 Metoprolol Tartrate Tablet 100mg
 Metoprolol Tartrate Tablet Tar 50mg
 Metoprolol Tartrate Tablet Tar100mg
 Mirtazapine Tablet 15mg
 Nadolol Tablet 20mg
 Nadolol Tablet 40mg
 Naproxen Tablet 250mg
 Naproxen Tablet 375mg
 Naproxen Tablet 500mg
 Naproxen Sodium Tablet 275mg
 Naproxen Sodium Tablet 550mg
 Nitroglycerin ER Capsule 6.5mg
 Nitroglycerin ER Capsule 2.5mg
 Nitroglycerin SR Capsule 2.5mg
 Nitroglycerin SR Capsule 6.5mg
 Nitro-Time CR Capsule 6.5mg
 Nitro-Time CR Capsule 2.5mg
 Nortriptyline HCL Capsule 10mg
 Nortriptyline HCL Capsule 25mg

Medications eligible for the NALC Preferred Generic, NALC Select Generic and NALC Senior Antibiotic Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

Nortriptyline HCL Capsule 75mg	Sertraline HCL Tablet 25mg
Np Thyroid 60 Tablet 60mg	Sodium Fluoride Chew 2.2=1mg
Oxybutynin Chloride Tablet 5mg	Sodium Fluoride Chew 1.1=.5mg
Pacerone Tablet 200mg	Sodium Fluoride Drop 0.5mg/ml
Paroxetine HCL Tablet 10mg	Sotalol HCL Tablet 80mg
Paroxetine HCL Tablet 20mg	Sotalol HCL (Af) Tablet 80mg
Paroxetine HCL Tablet 40mg	Tamoxifen Tablet 10mg
Paroxetine HCL Tablet 30mg	Tamoxifen Tablet 20mg
Perphenazine/Amitriptylin Tablet 2-25mg	Tamoxifen Citrate Tablet 10mg
Perphenazine/Amitriptylin Tablet 4-25mg	Tamoxifen Citrate Tablet 20mg
Phospha 250 Neutral Tablet	Terazosin HCL Capsule 10mg
Pindolol Tablet 5mg	Terazosin HCL Capsule 5mg
Pindolol Tablet 10mg	Terazosin HCL Capsule 2mg
Piroxicam Capsule 10mg	Terazosin HCL Capsule 1mg
Piroxicam Capsule 20mg	Terbinafine HCL Tablet 250mg
Potassium Chloride SR Tablet 8meq	Tg Pacerone Tablet 200mg
Potassium Citrate/Citric Solution	Theophylline CR Tablet 200mg
Pravastatin Sodium Tablet 10mg	Thioridazine HCL Tablet 50mg
Pravastatin Sodium Tablet 20mg	Thioridazine HCL Tablet 25mg
Pravastatin Sodium Tablet 40mg	Thiothixene Capsule 2mg
Prazosin HCL Capsule 1mg	Timolol Maleate Solution 0.25% OP
Prazosin HCL Capsule 2mg	Timolol Maleate Solution 0.5% OP
Prazosin HCL Capsule 5mg	Tizanidine HCL Tablet 2mg
Prochlorperazine Maleate Tablet 5mg	Tizanidine HCL Tablet 4mg
Prochlorperazine Maleate Tablet 10mg	Torsemide Tablet 10mg
Promethazine HCL Tablet 12.5mg	Torsemide Tablet 20mg
Promethazine HCL Tablet 25mg	Tramadol HCL Tablet 50mg
Promethazine Plain Syrup 6.25/5ml	Trazodone HCL Tablet 100mg
Propranolol HCL Tablet 10mg	Trazodone HCL Tablet 150mg
Propranolol HCL Tablet 20mg	Trimethoprim Sulfate/Poly Solution OPH
Propranolol HCL Tablet 40mg	Verapamil HCL Tablet 120mg
Propranolol HCL Tablet 80mg	Verapamil HCL Tablet 80mg
Propranolol/HCTZ Tablet 40/25	Verapamil HCL ER Tablet 180mg
Propranolol/Hydrochloroth Tablet 80/25	Verapamil HCL ER Tablet 240mg
Quinapril Tablet 10mg	Verapamil HCL SR Tablet 180mg
Quinapril Tablet 5mg	Verapamil HCL SR Tablet 240mg
Quinapril Tablet 20mg	Warfarin Sodium Tablet 3mg
Quinapril Tablet 40mg	Warfarin Sodium Tablet 4mg
Quinapril HCL Tablet 5mg	Warfarin Sodium Tablet 5mg
Quinapril HCL Tablet 10mg	Warfarin Sodium Tablet 2.5mg
Quinapril HCL Tablet 40mg	Warfarin Sodium Tablet 1mg
Quinapril HCL Tablet 20mg	Warfarin Sodium Tablet 2mg
Ranitidine Tablet 150mg	Warfarin Sodium Tablet 7.5mg
Ranitidine Tablet 300mg	Warfarin Sodium Tablet 6mg
Ranitidine HCL Tablet 150mg	Warfarin Sodium Tablet 10mg
Ranitidine HCL Tablet 300mg	Zonisamide Capsule 25mg

Medications eligible for the NALCPREFERRED Generic, NALCSELECT Generic and NALCSENIOR ANITBIOTIC Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

NALCSenior Antibiotic Generic List

Available to Plan Members At **No Cost** When Medicare Part B is the Primary Payor.

Our 2013 NALCSenior Antibiotic Generic list offers the following prescription generic medications at no cost for (up to) a 30-day supply when purchased at a local NALC CareSelect or NALC Preferred pharmacy and Medicare Part B is the primary payor. For generic medications not on the NALCSenior Antibiotic Generic list, regular retail coinsurance and mail order copayment amounts apply. The NALCSenior Antibiotic Generic list includes:

Amoxicillin Sus 250/5ml	Erythromycin Base Tablet 250mg
Amoxicillin Tablet 500mg	Erythromycin Base Tablet 500mg
Amoxicillin Capsule 500mg	Gentak Ointment 0.3% OP
Ampicillin Capsule 500mg	Gentamicin Sulfate Ointment 0.1%
Bacitracin Ointment 500u/gm	Gentamicin Sulfate Cream 0.1%
Cephalexin Capsule 250mg	Gentamicin Sulfate Sdv 40mg/ml
Ciprofloxacin HCL Tablet 750mg	Gentamicin Sulfate Solution 0.3% OP
Erythrocin Stearate Tablet 500mg	Gentamicin Sulfate Ointment 0.3% OP
Erythrocin Stearate Tablet 250mg	Ilotycin Ointment OP
Erythromycin Solution 2%	Isoniazid Tablet 300mg
Erythromycin Ointment OP	Sulfacetamide Sodium Solution 10% OP
Erythromycin Gel 2%	Tetracycline HCL Capsule 250mg
Erythromycin Tablet 500mg	Tetracycline HCL Capsule 500mg

Medications eligible for the NALCPreferred Generic, NALCSelect Generic and NALCSenior Antibiotic Generic lists are subject to change. Call the NALC CVS Caremark Customer Service Representative at 1-800-933-NALC (6252) to verify the copayment amount of any generic drug.

NALCPreferred Retail Pharmacies

The Plan continues to offer the NALCPreferred Retail Pharmacy Network. From our broad network of 67,822 participating pharmacies, the following pharmacies stepped up to offer members of the NALC Health Benefit Plan an additional discount. Out-of-pocket expenses are reduced for brand name prescriptions filled at any of the following preferred pharmacies:

Baker's Pharmacy	Giant Pharmacy	QFC Pharmacy
Bi-Lo Pharmacy	Jay C Plus Pharmacy	Ralphs Pharmacy
Care Plus CVS/Pharmacy	Kessel Pharmacy	Randalls Pharmacy
Carrs-Gottstein Foods	King Soopers Pharmacy	Rite-Aid Pharmacy
City Market Pharmacy	Kmart Pharmacy	Safeway Pharmacy
CVS/pharmacy	Kroger Drugstore	Scotts Pharmacy
Dillon Pharmacy	Kroger Food & Drug	Smith's Pharmacy
Dominicks Pharmacy	Kroger Sav-On	Stop and Shop Pharmacy
Eagle Pharmacy	Longs Drug Store	Super G Discount Drug
Food 4 Less Pharmacy	Martin's Pharmacy	Target Pharmacy
Fred Meyer Pharmacy	Owen's Pharmacy	Tom Thumb Pharmacy
Fry's Food & Drug	Pavilions Pharmacy	Vons Pharmacy
Genuardi's Pharmacy	Payless Pharmacy	Wellness Works Pharmacy
Gerbes Pharmacy	Postal Prescription Services	

These preferred network pharmacies recognize the value of the NALC Health Benefit Plan's retail business and have agreed to lower prices.

This means our members will typically see lower priced brand name drugs at these pharmacies.

Pharmacies that participate in the NALC Preferred and NALC CareSelect networks are subject to change. Please call CVS Caremark at 1-800-933-NALC (6252) to verify a pharmacy's participation.

NALC CareSelect Pharmacies

The following list shows the major chain pharmacies and affiliated groups of independent community pharmacies that accept your prescription benefit ID card. In addition to these, most independent pharmacies nationwide also participate in our prescription program. To find out if a pharmacy not listed here accepts your card, call the pharmacy directly.

A

A & P Pharmacy
AAP / United Drugs
Accredo Health Group, Inc.
ACME Pharmacy
Albertson's Pharmacy
American Pharmacy Cooperative
/ American Pharmacy Network
Solutions
American Home Patient
American Pharmacy
Apria Healthcare, Inc.
Aurora Pharmacy

B

Baker's Pharmacy*
Bartell Drugs
Basha's United Drug
Bel Air Pharmacy
Bi-Lo Pharmacy*
Bi-Mart Pharmacy
Biggs Pharmacy
Bioscrip Pharmacy
Bloom Pharmacy
Brookshire Brothers Pharmacy
Brookshire Pharmacy
Bruno's Food and Pharmacy
Buehler's Pharmacy

C

Careplus/CVS Pharmacy*
Carle Rx Express
Carrs-Gottstein Foods*
Cashwise Pharmacy
CIGNA
City Market Pharmacy*
Clinic Pharmacy

Coborn's Pharmacy

Community Health Systems
COOPHARMA
Coram Healthcare
Costco Pharmacy
Critical Care Systems
Cub Pharmacy
Curascript Pharmacy
CVS Caremark Specialty Pharmacy
CVS/Longs
CVS/pharmacy*

D

Dahl's Pharmacy
Dierbergs Pharmacy
Dillon Pharmacy*
Discount Drug Mart
Doc's Drugs
Doctor's Choice Pharmacy
Dominicks Pharmacy*
Drug Town Pharmacy
Drug Warehouse
Drug World
Drugs for Less
Duane Reade
Duluth Clinic

E

EPIC
Eagle Pharmacy*
Eaton Apothecary
Econofoods

F

Fagen Pharmacy
Fairview
Family Care

Pharmacies that participate in the NALC Preferred and NALC CareSelect networks are subject to change. Please call CVS Caremark at 1-800-933-NALC (6252) to verify a pharmacy's participation.

Family Fare Pharmacy
Family Pharmacy
Farm Fresh Pharmacy
Food 4 Less Pharmacy*
Food City Pharmacy
Food City United Drugs
Food Lion Pharmacy
Food World Pharmacy
Fred Meyer Pharmacy*
Fred's Pharmacy
Fred's Xpress
Fresh Market Pharmacy
Fruth Pharmacy
Fry's Food and Drug*

G

Genuardi's Pharmacy*
Gerbes Pharmacy*
Giant Eagle Pharmacy
Giant Pharmacy*
Good Neighbor Pharmacy

H

Haggen Pharmacy
Hannaford Food & Drug
Happy Harry's
Harmons Pharmacy
Harps Pharmacy
Harris Teeter Pharmacy
Harvard Drug
Harvard Vanguard Medical Assoc.
Harveys Supermarket Pharmacy
H-E-B Pharmacy
Health Mart
HealthPartners
Hen House Pharmacy
Henry Ford Pharmacy
Hi-School Pharmacies
Homeland Pharmacy
Horton & Converse
Hy-Vee Pharmacy

I

IHC Health Center
Infusion Partners
Ingles Pharmacy

J

Jay C Plus Pharmacy*
Jewel Osco

K

Kash N' Karry Pharmacy
Keaveny Pharmacy
Kerr Drug
Kessel Pharmacy*
Kindred Pharmacy Services
King Soopers Pharmacy*
Kinney Drugs
Klein's Pharmacy
Klingensmith's Drug
Kmart Pharmacy*
Knight Drugs
Kopp Drug
Kroger Drugstore*
Kroger Food & Drug*
Kroger Sav-On*

L

Lifechek
Lincare Infusion Services
Longs Drug Store*
Leader

M

Major Value/H.D. Smith
Managed Care Pharmacy/RxPride
Marc's Pharmacy
Marsh Drug Store
Market Basket
Martin's Pharmacy*
Maxor Pharmacy
May's Drug Store
Mayo Pharmacy

Pharmacies that participate in the NALC Preferred and NALC CareSelect networks are subject to change. Please call CVS Caremark at 1-800-933-NALC (6252) to verify a pharmacy's participation.

Med-Fast Pharmacy
Med-Rx
Med-X Drug
Medi-Serv
Medicap Pharmacy
Meijer Pharmacy
Minyard Pharmacy

N

Navarro Discount Pharmacy
NCS Healthcare
Neighborcare
Nob Hill Pharmacy
Northeast Pharmacy Services

O

Omnicare Pharmacy
Oncology Pharmacy Services
Option Care
Osco Pharmacy
Owen's Pharmacy*

P

P & C Food Market Pharmacy
Pacmed Clinic Pharmacy
Pamida Pharmacy
Paradise Shop N Save
Pavilions Pharmacy*
Pathmark Pharmacy
Patient First Pharmacy
Payless Pharmacy*
Pharma-Card
Pharmacy Providers of OK
Pharmerica
Pick N Save
Pine Knob Pharmacy
Postal Prescription Services*
Prairiestone Pharmacy
Price Chopper Pharmacy
Price Cutter Pharmacy
Primary Health Medical Group
Progressive Pharmacy
Publix Pharmacy

Pyramid Pharmacy
Postal Prescription Services*
Q
QFC Pharmacy*
Quality Pharmacy
Quick Chek Pharmacy
QVL Pharmac

R

Rainbow Foods Pharmacy
Raley's Drug Center
Ralphs Pharmacy*
Randalls Pharmacy*
Recept Pharmacy
Rite Aid Pharmacy*
Ritzman Pharmacy
Rosauers Pharmacy
Rx Express Pharmacy

S

Safeway Pharmacy*
Sam's Club Pharmacy
Sav-Mor
Sav-On Pharmacy
SaveMart Pharmacy
Schnucks Pharmacy
Scolari's
Scotts Pharmacy*
Shaw's Osco Pharmacy
Shop 'n Save Pharmacy
Shopko Pharmacy
Shoppers Pharmacy
ShopRite Pharmacy
Smith's Pharmacy*
Southern Family Market
St John Pharmacy
Sterling Drug
Stop & Shop Pharmacy*
Super 1 Pharmacy
Super D Drugs
Super D Express
Super G Discount Drug*

Pharmacies that participate in the NALC Preferred and NALC CareSelect networks are subject to change. Please call CVS Caremark at 1-800-933-NALC (6252) to verify a pharmacy's participation.

Super Fresh Pharmacy
Super Rx Pharmacy
Super Valu
Superfoodmart Pharmacy
Sweetbay Pharmacy

T

Target Pharmacy*
Texas Oncology Pharmacy Services
The Medicine Shoppe
Thrifty White
Times Pharmacy
Tom Thumb Pharmacy*
Top Food & Drug
Tops Pharmacy
TriNet
TrueCare

U

United Drugs
United Marketstreet Pharmacy
United Pharmacy
USA Drug
USA Drug Express
UW Health Pharmacy Services

V

VG's Pharmacy
Vons Pharmacy*

W

Wal-Mart Pharmacy
Waldbaum's Pharmacy
Walgreens
Weber & Judd
Wegman's Pharmacy
Weis Pharmacy
Wellness Works Pharmacy*
White Drug
Winn-Dixie Pharmacy



*An asterisk indicates participation in the NALC Preferred Retail Pharmacy Network.

Pharmacies that participate in the NALC Preferred and NALC CareSelect networks are subject to change. Please call CVS Caremark at 1-800-933-NALC (6252) to verify a pharmacy's participation.

