



NALC Health Benefit Plan High Option

2014 Prescription Benefits Overview



This booklet is a summary of some of the features of the NALC Health Benefit Plan High Option. Detailed information on the benefits for the 2014 NALC Health Benefit Plan High Option 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.

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 2014 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 2014 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.

NALCSenior Antibiotic Generic List

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

Our 2014 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	Gentak Ointment 0.3% OP
Amoxicillin Capsule 500mg	Gentak Solution 0.3% OP
Amoxicillin Tablet 500mg	Gentamicin Sulfate Cream 0.1%
Ampicillin Capsule 500mg	Gentamicin Sulfate Mdv 40mg/ml
Bacitracin Ointment 500u/gm	Gentamicin Sulfate Ointment 0.1%
Bacitracin Zn/Poly B Oph Ointment	Gentamicin Sulfate Sdv 40mg/ml
Cephalexin Capsule 250mg	Gentamicin Sulfate Solution 0.3% OP
Ciprofloxacin HCL Tablet 750mg	Ilotycin Ointment OP
Erythromycin Gel 2%	Isoniazid Tablet 300mg
Erythromycin Solution 2%	Sulfacetamide Sodium Solution 10% OP
Erythromycin Ointment OP	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 67,000 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 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)^{††}
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^{*2†}

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
Monoclalte-P
Mononine
NovoSeven²
Profilnine SD
Proplex T
Recombinate
Refacto
RiaSTAP
Stimate
Wilate
Xyntha²

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^{*}
Kalbitor^{*}

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[†]

Bivigam
Carimune NF
Cytogam
Flebogamma²
GamaSTAN S/D
Gammagard
Gammagard S/D
Gammaked
Gammaplex^{*}
Gamunex
HepaGam B
Hizentra^{*}
HyperHEP B
HyperRHO S/D
MICRhoGAM²
Nabi-HB
Octagam
Privigen
RhoGAM²
Rhopylac
Vivaglobin^{*}
WinRho SDF

IMMUNE (IDIOPATHIC) THROMBOCYTOPENIC PURPURA

Nplate[†]
Promacta^{††}

INFECTIOUS DISEASE

Actimmune*†

INFLAMMATORY BOWEL DISEASE

Cimzia

Humira

Remicade†

Tysabri**†

IRON OVERLOADdeferoxamine
(DESFERAL)¹†
Exjade**†**LIPID DISORDERS**

Kynamro**†

LYSOSOMAL STORAGE DISORDERS¹

Aldurazyme*

Cerezyme*

Cystagon*

Elaprase*

Fabrazyme*

Lumizyme*

Myozyme*

Naglazyme*

VPRIV*

MOVEMENT DISORDERS

Apokyn**†

Xenazine**†

MULTIPLE SCLEROSIS

Ampyra**†

Aubagio**†

Avonex²

Betaseron

Copaxone

Extavia

Gilenya

Rebif²

Tecfidera**†

Tysabri**†

NEUTROPENIA

Leukine

Neulasta

Neupogen

ONCOLOGY – INJECTABLE³Synribo¹

Thyrogen**†

Xgeva¹zoledronic acid (Zometa)¹†**ONCOLOGY—ORAL/TOPICAL**Afinitor²

Bosulif

Erivedge**†

Gleevec

Hycamtin**†

Iclusig

Inlyta**†

Jakafi**†

Mekinist**†

Nexavar**†

Oforta**†

Pomalyst**†

Revlimid**†

Sprycel

Stivarga**†

Sutent

Tafinlar**†

Tarceva

Targretin²

Tasigna

Temodar

Thalomid

Tykerb**†

Votrient**†

Xalkori**†

Xeloda

Xtandi**†

Zelboraf**†

Zolinda

Zytiga

OSTEOARTHRITISEuflexxa¹Hyalgan¹Orthovisc¹Supartz¹Synvisc¹Synvisc One¹**OSTEOPOROSIS**

Forteo

Prolia¹Reclast¹**PAROXYSMAL NOCTURNAL HEMOGLOBINURIA**

Soliris**†

PHENYLKETONURIA

Kuvan**†

PRE-TERM BIRTH

Makena**†

PSORIASISAmevive¹

Enbrel

Humira

Remicade¹Stelara¹**PULMONARY ARTERIAL HYPERTENSION¹**

Adcirca epoprostenol

sodium^{1*}

Letairis*

Remodulin*

sildenafil citrate (Revatio)¹

Tracleer*

Tyvaso*

Veletri*

Ventavis*

RENAL DISEASE

Sensipar

RESPIRATORY SYNCYTIAL VIRUSSynagis¹**RETINAL DISORDERS**

Eylea**†

Lucentis**†

Macugen**†

Ozurdex**†

Retisert**†

Visudyne**†

RHEUMATOID ARTHRITISActemra¹

Cimzia

Enbrel

Humira

Kineret¹Orencia¹Remicade¹

Simponi

Xeljanz

SEIZURE DISORDERS

H.P. Acthar Gel**†

Sabril**†

SYSTEMIC LUPUS**ERYTHEMATOSUS**Benlysta¹**UREA CYCLE DISORDERS**

Buphenyl

Ravicti**†

If you are a plan member or a 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 2014, 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 2014 NALCSelect Generic list includes the following:

Acetaminophen/Codeine Solution 120-12/5	Clotrimazole Solution 1%
Acetaminophen/Codeine Tablet #3	Codeine Sulfate Tablet 15mg
Acetazolamide Tablet 125mg	Corvite Free Tablet
Alclometasone Dipropionat Ointment 0.05%	Cyanocobalamin Mdv 1000mcg
Allopurinol Tablet 100mg	Cyclopentolate Solution 1% OP
Amiloride/Hydrochlorothia Tablet 5-50	Cyproheptadine HCL Tablet 4mg
Amitriptyline HCL Tablet 10mg	Dexamethasone Tablet 0.5mg
Amitriptyline HCL Tablet 25mg	Dexamethasone Tablet 0.75mg
Amitriptyline HCL Tablet 50mg	Dexamethasone Tablet 1mg
Ammonium Lactate Cream 2X140GM	Dexamethasone Sodium Phos Via 10mg/ml
Amos Levothyroxine Sodium Tablet 0.025mg	Dexamethasone Sodium Phos MDV 4mg/ml
Amos Levothyroxine Sodium Tablet 0.088mg	Dexmethylphenidate HCL Tablet 2.5mg
Amos Levothyroxine Sodium Tablet 0.05mg	Dialyvite Tablet
Amos Levothyroxine Sodium Tablet 0.075mg	Diazepam Tablet 2mg
Amos Levothyroxine Sodium Tablet 0.1mg	Diazepam Tablet 5mg
Amos Levothyroxine Sodium Tablet 0.125mg	Diazepam Tablet 10mg
Amos Levothyroxine Sodium Tablet 0.112mg	Diazepam Solution 1mg/ml
Amos Levothyroxine Sodium Tablet 0.137mg	Diclofenac Sodium Solution 0.1% OP
Amos Levothyroxine Sodium Tablet 0.2mg	Digoxin Tablet 0.25mg
Amos Levothyroxine Sodium Tablet 0.15mg	Digoxin Tablet 0.125mg
Amos Levothyroxine Sodium Tablet 0.175mg	Diphenhydramine HCL Via 50mg/ml
Amoxicillin Capsule 250mg	Diphenhydramine HCL Capsule 50mg
Ampicillin Capsule 250mg	Enpresse-28 Tablet
Antipyrine/Benzocaine Solution OTIC	Epiklor Pow 20MEQ
Atenolol Tablet 25mg	Erythromycin Ointment OP
Atenolol Tablet 50mg	Estradiol Tablet 0.5mg
Atropine Sulfate Solution 1% OP	Estradiol Tablet 1mg
Atropine-Care Solution 1% OP	Estropipate Tablet 2.5-3mg
Azithromycin Sus 200/5ml	Ethyl Chloride/Mist Aer
Bacteriostatic Water For Via Benz Alc	Fabb Tablet
Belladonna Alkaloids/Phen Tablet 16.2mg	Fe C Plus Tablet
Benztrapine Mesylate Tablet 0.5mg	Fenofibrate Tablet 54mg
Benztrapine Mesylate Tablet 1mg	Ferocon Capsule
Benztrapine Mesylate Tablet 2mg	Ferrex 150 Forte Capsule
Brimonidine Tartrate Solution 0.2% OP	Ferrocite Plus Tablet
Butalbital/Aspirin/Caffeine Tablet	Ferrogels Forte Capsule
Carbamazepine Chew 100mg	Fludrocortisone Acetate Tablet 0.1mg
Carteolol HCL Solution 1%	Fluocinonide Cream 0.05%
Chlordiazepoxide HCL Capsule 5mg	Fluoridex Daily Defense S Pst Sensitive
Chlordiazepoxide HCL Capsule 10mg	Fluorometholone Sus 0.1% OP
Chlorhexidine Gluconate Solution 0.12%	Fluoxetine HCL Liquid 20mg/5ml
Chloroquine Phosphate Tablet 500mg	Fluphenazine HCL Tablet 2.5mg
Chlorothiazide Tablet 250mg	Flurazepam HCL Capsule 15mg
Chlorothiazide Tablet 500mg	Flurazepam HCL Capsule 30mg
Chlorpromazine HCL Tablet 10mg	Folbee Tablet
Chlorthalidone Tablet 25mg	Folbee Plus Tablet
Chlorthalidone Tablet 50mg	Folbee Plus Cz Tablet
Ciprofloxacin HCL Solution 0.3% OP	Folbic Tablet
Clonidine HCL Tablet 0.1mg	Folic Acid Tablet 1mg

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Folic Acid/Cyanocobalamin Tablet
 Folic Acid MDV 5mg/ml
 Folplex 2.2 Tablet
 Furosemide Tablet 20mg
 Furosemide Tablet 40mg
 Furosemide Solution 10mg/ml
 Glipizide Tablet 5mg
 Glipizide Er Tablet 2.5mg
 Glipizide Er Tablet 5mg
 Glipizide XI Tablet 2.5mg
 Glipizide XI Tablet 5mg
 Glyburide Tablet 1.25mg
 Haloperidol Tablet 0.5mg
 Hematin F Tablet
 Hematinic Plus Tablet
 Hematogen Forte Capsule
 Homatropine HBR Solution 5% OP
 Hydrochlorothiazide Capsule 12.5mg
 Hydrochlorothiazide Tablet 12.5mg
 Hydrochlorothiazide Tablet 25mg
 Hydrochlorothiazide Tablet 50mg
 Hydrocodone/Acetaminophen Tablet 5-500mg
 Hydrocodone/Acetaminophen Tablet 2.5-500
 Hydrocortisone Tablet 5mg
 Hydrocortisone Cream 1%
 Hydrocortisone Cream 2.5%
 Hydrocortisone Ointment 2.5%
 Hydromorphone HCL Liquid 1mg/ml
 Hydroxocobalamin Via 1000mcg
 Hydroxyzine Pamoate Capsule 50mg
 Hydroxyzine Pamoate Capsule 100mg
 Hypercare Solution 20%
 Isosorbide Mononitrate Tablet 10mg IR
 Ketoconazole Sha 2%
 Ketorolac Tromethamine Tablet 10mg
 Klor-Con Tablet 25MEQ
 Klor-Con M10 Tablet 10MEQ ER
 Klor-Con M20 Tablet 20MEQ ER
 Lactic Acid E Cream
 Leucovorin Calcium Tablet 5mg
 Levobunolol HCL Solution 0.25% OP
 Levothyroxine Sodium Tablet 25mcg
 Levothyroxine Sodium Tablet 0.05mg
 Levothyroxine Sodium Tablet 0.075mg
 Levothyroxine Sodium Tablet 75mcg
 Levothyroxine Sodium Tablet 0.088mg
 Levothyroxine Sodium Tablet 0.1mg
 Levothyroxine Sodium Tablet 125mcg
 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
 Levothyroxine Sodium Tablet 300mcg
 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 HCL Solution Topcl 4%
 Lidocaine Viscous Solution 2%
 Lithium Carbonate Capsule 150mg
 Lithium Carbonate Capsule 300mg
 Lithium Carbonate Capsule 600mg
 Lithium Carbonate Tablet 300mg
 Lithium Carbonate Er Tablet 450mg
 Meclizine HCL Tablet 25mg
 Medroxyprogesterone Aceta Tablet 2.5mg
 Medroxyprogesterone Aceta Tablet 5mg
 Medroxyprogesterone Aceta Tablet 10mg
 Melquin 3 Solution 3%
 Methadone HCL Tablet 5mg
 Methadone HCL Tablet 10mg
 Methimazole Tablet 5mg
 Methylprednisolone Dose Pak 4mg
 Metoprolol Tartrate Tablet TAR 25mg
 Metronidazole Tablet 250mg
 Metronidazole Tablet 500mg
 Morphine Sulfate Tablet 15mg
 Multi-Vitamin With Fluoride Chew 0.5mg
 Multi-Vitamin/Fluoride Drop 0.5mg/ml
 Multivitamin/Fluoride Chew 0.25mg
 Multivitamin/Fluoride Chew 0.5mg
 Multivitamin/Fluoride Chew 1mg
 Multi-Vitamin/Fluoride Drop 0.25mg
 Multi-Vitamin/Fluoride Drop 0.5mg/ml
 MVC-Flouride Chew 0.5mg
 Niacor Tablet 500mg
 Nitroglycerin Er Capsule 9mg
 Neomycin/Polymyxin/Gramic Solution OP
 Neomycin/Polymyxin/Hc Solution 1% OTIC
 Np Thyroid 30 Tablet 300mg
 Nystatin Ointment 100000
 Ofloxacin Solution 0.3%OTIC
 Ofloxacin Solution 0.3% OP
 Oxybutynin Chloride Syrup 5mg/5ml
 Oxycodone/Acetaminophen Tablet 5-325mg
 Pantoprazole Sodium Tablet 40mg
 Peg-3350/Electrolytes Solution
 Peg-3350/NaCl/Na Bicarbon Powder 4L Pkt
 Penicillin V Potassium Tablet 250mg
 Perphenazine/Amitriptylin Tablet 2-10mg
 Phenobarbital Tablet 15mg
 Phenobarbital Tablet 16.2mg
 Phenobarbital Tablet 30mg
 Phenobarbital Tablet 32.4mg
 Phenobarbital Tablet 60mg
 Phenobarbital Tablet 64.8mg
 Phenobarbital Tablet 97.2mg

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Phenobarbital Tablet 100mg	Synthroid Tablet 0.112mg
Phenytoin Chew 5mg	Synthroid Tablet 0.125mg
Pilocarpine Solution 2% OP	Synthroid Tablet 0.137mg
Pilocarpine Solution 4% OP	Synthroid Tablet 0.15mg
Pilocarpine HCL Solution 1% OP	Synthroid Tablet 0.175mg
Poly-Iron 150 Forte Capsule 150	Synthroid Tablet 0.2mg
Potassium Chloride Liquid 10% SF	Synthroid Tablet 0.3mg
Potassium Chloride Liquid 20% SF	Temazepam Capsule 15mg
Potassium Chloride Er Tablet 10MEQ	Temazepam Capsule 30mg
Potassium Chloride Er Tablet 20MEQ	Theophylline Cr Tablet 100mg
Prednisolone Acetate Sus 1% OP	Theophylline Er Tablet 300mg
Prednisolone Sodium Phosp Sol 15mg/5ml	Thiamine HCL Via 100mg/ml
Prednisone Tablet 1mg	Thioridazine HCL Tablet 100mg
Prednisone Tablet 2.5mg	Thiothixene Capsule 1mg
Prednisone Tablet 5mg	Timolol Maleate Tablet 5mg
Prednisone Tablet 10mg	TI Gard Rx Tablet
Prednisone Tablet 20mg	TI-Hem 150 Tablet
Prednisone Tablet 50mg	Torsemeide Tablet 5mg
Prenaplus Tablet	Trazodone HCL Tablet 50mg
PrenaTabs Fa Tablet	Triamcinolone Acetonide Cream 0.03%
PrenaTabs Rx Tablet	Triamcinolone Acetonide Cream 0.10%
Prenatal AD Tablet	Triamcinolone Acetonide Cream 0.50%
Prenatal Plus Tablet 27-1mgFE	Triamcinolone Acetonide Ointment 0.10%
Proctosol Hc Cream 2.50%	Triamcinolone Acetonide Ointment 0.50%
Proctozone-Hc Cream -HC 2.5%	Triamcinolone Acetonide Lot 0.03%
Promethazine/Codeine Syrup 6.25-10	Triamterene/Hctz Tablet 37.5-25
Promethazine/Dextromethor Syrup DM	Triamterene/Hydrochloroth Capsule 37.5-25
Promethazine VC Syrup 6.25-5/5	Triamterene/Hydrochloroth Tablet 37.5-25
Propranolol HCL Solution 20mg/5ml	Trigels-F Forte Capsule
Quinidine Sulfate Tablet 200mg	Trihexyphenidyl HCL Tablet 2mg
Quinidine Sulfate Tablet 300mg	Trihexyphenidyl HCL Tablet 5mg
Renal Cap Softgel	Trimethoprim Tablet 100mg
Rena-Vite Rx Tablet	Triphrocaps Capsule
Reno Caps Capsule	Trivit/Fluoride Drop 0.5mg
Roxicet Tablet5-325mg	Tri-Vitamin/Fluoride Drop 0.25mg
Selenium Sulfide Lot 2.5%	Trivora-28 Tablet 500mg
Se-Tan Plus Capsule	Unithroid Tablet 0.05mg
Silver Sulfadiazine Cream 1%	Unithroid Tablet 0.075mg
Sodium Chloride Injection 0.9% PB	Unithroid Tablet 0.088mg
Sodium Chloride 0.9% Solution 0.9%IRR	Unithroid Tablet 0.1mg
Sodium Fluoride Chew 0.25mg	Unithroid Tablet 0.112mg
Spiroinolactone Tablet 25mg	Unithroid Tablet 0.125mg
Sulfacetamide Sodium Solution 10%OP	Unithroid Tablet 0.2mg
Sulfamethoxazole/Tmp DS Tablet 800-160	V-C Forte Capsule
Sulfamethoxazole/Trimetho Tablet 400-80mg	Verapamil HCL Tablet 40mg
Sulfamethoxazole/Trimetho Tablet 800-160	Vitamin D Capsule 50,000IU
Sulfamethoxazole/Trimetho Sus 200-40/5	Vitamin D Capsule 50000IU
Synthroid Tablet 0.025mg	Vitamin D2 50,000IU Capsule
Synthroid Tablet 0.05mg	Vol-Care Rx Tablet
Synthroid Tablet 0.075mg	X-Viate Cream 40%
Synthroid Tablet 0.088mg	Zinc Sulfate Capsule 220mg RX
Synthroid Tablet 0.1mg	

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 2014, 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	Citalopram Hydrobromide Tablet 10mg
Albuterol Sulfate Neb 0.083%	Citalopram Hydrobromide Tablet 20mg
Albuterol Sulfate Neb 0.5%	Citalopram Hydrobromide Tablet 40mg
Albuterol Sulfate Solution 0.5%	Clonidine HCL Tablet 0.2mg
Albuterol Sulfate Tablet 2mg	Clonidine HCL Tablet 0.3mg
Alendronate Sodium Tablet 35mg	Coumadin Tablet 1mg
Alendronate Sodium Tablet 70mg	Cyclobenzaprine HCL Tablet 5mg
Allopurinol Tablet 300mg	Cyclobenzaprine HCL Tablet 10mg
Amiodarone HCL Tablet 200mg	Cytra-2 Solution
Amitriptyline HCL Tablet 75mg	Cytra-K Solution
Amitriptyline HCL Tablet 100mg	Desonide Cream 0.05%
Amitriptyline HCL Tablet 150mg	Dexamethasone Tablet 4mg
Atenolol Tablet 100mg	Diclofenac Sodium DR Tablet 50mg EC
Atenolol/Chlorthalidone Tablet 50-25mg	Diclofenac Sodium DR Tablet 75mg EC
Atenolol/Chlorthalidone Tablet 100-25mg	Diclofenac Sodium EC Tablet 50mg EC
Baclofen Tablet 10mg	Diclofenac Sodium EC Tablet 75mg EC
Benazepril HCL Tablet 5mg	Dicyclomine HCL Capsule 10mg
Benazepril HCL Tablet 10mg	Dicyclomine HCL Tablet 20mg
Benazepril HCL Tablet 20mg	Diltiazem CD Capsule 120/24hr
Benazepril HCL Tablet 40mg	Diltiazem HCL Tablet 30mg
Benazepril HCT Tablet 10-12.5	Diltiazem HCL Tablet 60mg
Benazepril HCT Tablet 20-12.5	Diltiazem HCL Tablet 90mg
Benazepril HCT Tablet 20-25mg	Diltiazem HCL Tablet 120mg
Betamethasone Valerate Lot 0.10%	Diltiazem HCL ER (CD) Capsule 120/24hr
Bisoprolol Fumarate/HCTZ Tablet 10/6.25	Doxazosin Mesylate Tablet 1mg
Bisoprolol Fumarate/Hydro Tablet 2.5/6.25	Doxazosin Mesylate Tablet 2mg
Bisoprolol Fumarate/Hydro Tablet 5-6.25mg	Doxazosin Mesylate Tablet 4mg
Bisoprolol Fumarate/Hydro Tablet 10/6.25	Doxazosin Mesylate Tablet 8mg
Bisoprolol/HCTZ Tablet 5/6.25mg	Doxepin HCL Capsule 10mg
Bumetanide Tablet 0.5mg	Doxepin HCL Capsule 25mg
Bumetanide Tablet 1mg	Doxepin HCL Capsule 50mg
Bumetanide Tablet 2mg	Doxepin HCL Capsule 75mg
Buspirone HCL Tablet 5mg	Doxepin HCL Capsule 100mg
Buspirone HCL Tablet 10mg	Enalapril Tablet 2.5mg
Buspirone HCL Tablet 15mg	Enalapril Tablet 10mg
Captopril Tablet 50mg	Enalapril Tablet 20mg
Captopril Tablet 100mg	Enalapril Maleate Tablet 2.5mg
Captopril/Hydrochlorothia Tablet 25-25mg	Enalapril Maleate Tablet 5mg
Carbamazepine Tablet 200mg	Enalapril Maleate Tablet 10mg
Carbamazepine IR Tablet 200mg	Enalapril Maleate Tablet 20mg
Cartia XT Capsule 120/24HR	Enalapril Maleate/HCTZ Tablet 5-12.5mg
Carvedilol Tablet 3.125mg	Enalapril Maleate/HCTZ Tablet 10-25mg
Carvedilol Tablet 6.5mg	Estradiol Tablet 2mg
Carvedilol Tablet 12.25mg	Estropipate Tablet .625= .75
Carvedilol Tablet 25mg	Estropipate Tablet 1.25= 1.5
Chlorpromazine HCL Tablet 25mg	Famotidine Tablet 20mg
Chlorpromazine HCL Tablet 50mg	Famotidine Tablet 40mg
Chlorzoxazone Tablet 500mg	Fluconazole Tablet 100mg
Cimetidine Tablet 300mg	Fluconazole Tablet 200mg
Cimetidine Tablet 400mg	Fluocinolonone Acetonide Cream 0.03%
Cimetidine Tablet 800mg	Fluocinolonone Acetonide Ointment 0.03%

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 4X7
 Fluoxetine Tablet 10mg
 Fluoxetine HCL Tablet 10mg
 Fluoxetine HCL Capsule 10mg
 Fluoxetine HCL Capsule 20mg
 Fluoxetine HCL Capsule 40mg
 Fluoxetine HCL Tablet 10mg
 Fluphenazine HCL Tablet 1mg
 Fluphenazine HCL Tablet 5mg
 Flurbiprofen Solution 0.03% OP
 Fosinopril Sodium Tablet 10mg
 Fosinopril Sodium Tablet 20mg
 Fosinopril Sodium Tablet 40mg
 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
 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 25's
 Ipratropium Bromide Solution Inh 30's
 Ipratropium Bromide Solution Inh 60's
 Isoniazid Tablet 300mg
 Isosorbide Mononitrate Tablet 20mg IR
 Isosorbide Mononitrate ER Tablet 30mg
 Jantoven Tablet 1mg
 Jantoven Tablet 2mg
 Jantoven Tablet 2.5mg
 Jantoven Tablet 5mg
 Jantoven Tablet 6mg
 Ketoprofen Capsule 50mg
 Ketoprofen Capsule 75mg
 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 20-12.5
 Lisinopril/HCTZ Tablet 20-25mg
 Lisinopril/HCTZ 20-12.5 Tablet 20-12.5
 Lovastatin Tablet 10mg
 Lovastatin Tablet 20mg
 Lovastatin Tablet 40mg
 Meclizine HCL Tablet 12.5mg
 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 (G)
 Metformin HCL ER Tablet 500mg ER
 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 5mg
 Metoclopramide HCL Tablet 10mg
 Metolazone Tablet 2.5mg
 Metolazone Tablet 5mg
 Metoprolol Tartrate Tablet 50mg
 Metoprolol Tartrate Tablet 100mg
 Mirtazapine Tablet 15mg
 Nadolol Tablet 20mg
 Nadolol Tablet 40mg
 Naproxen Tablet 250mg
 Naproxen Tablet 375mg
 Naproxen Tablet 500mg
 Naproxen Sodium Tablet 550mg
 Neurontin Capsule 100mg
 Nitroglycerin ER Capsule 2.5mg
 Nitroglycerin ER Capsule 6.5mg
 Nitro-Time CR Capsule 2.5mg CR
 Nitro-Time CR Capsule 6.5mg CR
 Nortriptyline HCL Capsule 10mg
 Nortriptyline HCL Capsule 25mg
 Nortriptyline HCL Capsule 75mg
 Np Thyroid 60 Tablet 60mg
 Oxybutynin Chloride Tablet 5mg
 Pacerone Tablet 200mg
 Paroxetine HCL Tablet 10mg
 Paroxetine HCL Tablet 20mg
 Paroxetine HCL Tablet 30mg
 Paroxetine HCL Tablet 40mg

Medications eligible for the NALCPREFERRED Generic, NALCSELECT Generic and NALCSENIOR ANTI-BIOTIC 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.

Perphenazine/Amitriptylin Tablet 4-25mg	Tamoxifen Citrate Tablet 10mg
Phospha 250 Neutral Tablet	Tamoxifen Citrate Tablet 20mg
Piroxicam Capsule 10mg	Terazosin HCL Capsule 1mg
Pravastatin Sodium Tablet 10mg	Terazosin HCL Capsule 2mg
Pravastatin Sodium Tablet 20mg	Terazosin HCL Capsule 5mg
Pravastatin Sodium Tablet 40mg	Terazosin HCL Capsule 10mg
Prazosin HCL Capsule 1mg	Terbinafine HCL Tablet 250mg
Prazosin HCL Capsule 2mg	TG Cartia XT Capsule 120/24HR
Prazosin HCL Capsule 5mg	TG Pacerone Tablet 200mg
Prochlorperazine Maleate Tablet 5mg	Theophylline CR Tablet 200mg
Prochlorperazine Maleate Tablet 10mg	Thioridazine HCL Tablet 25mg
Promethazine HCL Tablet 12.5mg	Thioridazine HCL Tablet 50mg
Promethazine HCL Tablet 25mg	Thiothixene Capsule 2mg
Promethazine Plain Syrup 6.25/5ml	Timolol Maleate Solution 0.25% OP
Propranolol HCL Tablet 10mg	Timolol Maleate Solution 0.5% OP
Propranolol HCL Tablet 20mg	Tizanidine HCL Tablet 2mg
Propranolol HCL Tablet 40mg	Tizanidine HCL Tablet 4mg
Propranolol HCL Tablet 80mg	Torsemide Tablet 10mg
Propranolol/HCTZ Tablet 40/25	Torsemide Tablet 20mg
Propranolol/Hydrochloroth Tablet 80/25	Trazodone HCL Tablet 100mg
Quinapril Tablet 5mg	Trazodone HCL Tablet 150mg
Quinapril Tablet 10mg	Trimethoprim Sulfate/Poly Solution OPH
Quinapril Tablet 20mg	Verapamil HCL Tablet 80mg
Quinapril Tablet 40mg	Verapamil HCL Tablet 120mg
Quinapril HCL Tablet 5mg	Verapamil HCL ER Tablet 180mg
Quinapril HCL Tablet 10mg	Verapamil HCL ER Tablet 240mg
Quinapril HCL Tablet 20mg	Verapamil HCL SR Tablet 180mg
Quinapril HCL Tablet 40mg	Verapamil HCL SR Tablet 240mg
Ranitidine HCL Tablet 150mg	Warfarin Sodium Tablet 1mg
Ranitidine HCL Tablet 300mg	Warfarin Sodium Tablet 2mg
Salsalate Tablet 500mg	Warfarin Sodium Tablet 2.5mg
Sertraline HCL Tablet 25mg	Warfarin Sodium Tablet 3mg
Sodium Fluoride Chew 2.2=.1mg	Warfarin Sodium Tablet 4mg
Sodium Fluoride Chew 1.1=.5mg	Warfarin Sodium Tablet 5mg
Sodium Fluoride Drop 0.5mg/ml	Warfarin Sodium Tablet 6mg
Sorine Tablet 80mg	Warfarin Sodium Tablet 7.5mg
Sotalol HCL Tablet 80mg	Warfarin Sodium Tablet 10mg
Sotalol HCL (Af) Tablet 80mg	Zonisamide Capsule 25mg

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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
Accredo Health Group, Inc.
ACME Pharmacy
AFC Physical Med of Gilbert
Albertson's Pharmacy
American Home Patient
Ameridrug
Apollo Medical Management
Aurora Pharmacy

B

Baker's Pharmacy*
Bartell Drugs
Bel Air Pharmacy
Bi-Lo Pharmacy*
Bi-Mart Pharmacy
Brookshire Pharmacy

C

Careplus/CVS Pharmacy*
Caremark Specialty Pharmacy
Careplus/CVS Onsite Pharmacy
Carrs-Gottstein Foods*
Cashwise Pharmacy
Central Dupage Convenient Care
Choctaw Nation Health Care
CIGNA
City Market Pharmacy*
Clinic Pharmacy
Coborn's Pharmacy
Community Health Systems
Community A Walgreens
Comprehensive Pain Management
Copps Food Center
Coram Healthcare

Costco Pharmacy
Critical Care Systems
Cub Pharmacy
CVS/Longs
CVS/pharmacy*

D

Dahl's Pharmacy
Dierbergs Pharmacy
Dillon Pharmacy*
Discount Drug Mart
Doc's Drugs
Dominicks Pharmacy*
Drug Town Pharmacy
Drug Warehouse
Duane Reade
Duluth Clinic

E

Eagle Pharmacy*
Eaton Apothecary

F

Fairview
Farm Fresh Pharmacy
Food 4 Less Pharmacy*
Food City Pharmacy
Food Lion Pharmacy
Food World Pharmacy
Fred Meyer Pharmacy*
Fred's Pharmacy
Fred's Xpress
Fresh Market Pharmacy
Fry's Food and 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.

G
Genuardi's Pharmacy*
Gerbes Pharmacy*
Giant Eagle Pharmacy
Giant Pharmacy*

H
Haggen Pharmacy
Hannaford Food & Drug
Happy Harry's
Harmons Pharmacy
Harps Pharmacy
Harris Teeter Pharmacy
Harvard Vanguard Medical Assoc.
Harveys Supermarket Pharmacy
H-E-B Pharmacy
HealthPartners
Henry Ford Pharmacy
Home Choice Partners INC.
Homeland Pharmacy
Horton & Converse
Hy-Vee Pharmacy

I
IHC Health Center
Infusion Partners
Ingles Pharmacy

J
Jay C Plus Pharmacy*

K
Kash N' Karry 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
Lincare Infusion Services
Longs Drug Store*

M
Marianos
Marsh Drug Store
Martin's Pharmacy*
Maxor Pharmacy
May's Drug Store
Mayo Pharmacy
Med-Fast Pharmacy
Med-X Drug
Medicap Pharmacy
Medicine Shoppe
Meijer Pharmacy
Molona Healthcare

N
Navarro Discount Pharmacy
NCS Healthcare
Neighborcare
Nob Hill Pharmacy

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

P
P & C Food Market Pharmacy
Pacmed Clinic Pharmacy
Pamida Pharmacy
Pathmark Pharmacy
Patient First 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.

Pavilions Pharmacy*
Payless Pharmacy*
Pharmerica
Pick N Save
Postal Prescription Services*
Price Chopper Pharmacy
Price Cutter Pharmacy
Primary Health Medical Group
Progressive Pharmacy
Publix Pharmacy
Pyramid Pharmacy

Q

QFC Pharmacy*
Quality Pharmacy
Quick Chek Pharmacy

R

Rainbow Foods Pharmacy
Raley's Drug Center
Ralphs Pharmacy*
Randalls Pharmacy*
Recept Pharmacy
Rite Aid 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

Stop & Shop Pharmacy*
Super 1 Pharmacy
Super D Drugs
Super G Discount Drug*
Super Fresh Pharmacy
Super Rx Pharmacy
Sweetbay Pharmacy

T

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

U

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

V

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.