

June 22, 2009

[REDACTED]

Dear [REDACTED]

Walmart has committed to provide you and your covered family members with affordable prescription drug benefits, including more than 2,000 generic drugs that cost you only \$4. We continue to look for ways to help our associates save money so they can live a better life. Using a generic drug rather than a current brand-name drug could save you a minimum of \$26 a month, a yearly savings of over \$300.

This letter is to inform you about important changes that will be effective on July 20, 2009. Currently, your Pharmacy benefit includes a generic drug program, Preferred Brand Name and Non-Preferred Brand Name benefits. Effective July 20, 2009, the Preferred and Non-Preferred Brand Name Drug programs will be eliminated and will be replaced with a single Brand Name Drug plan. All of the drugs covered under the Non-Preferred Brand Name Program will be eliminated (except Specialty Drugs), as well as some of the drugs covered under the Preferred Brand Name Drug Program.

Important changes to your Pharmacy benefits include:

- A single Brand Name Drug benefit with a cost to you of \$30 or 20 percent, whichever is greater. (Any Brand prescription drug not on the Brand Name Drug list will not be covered.)
- A discount off the regular retail price of any prescription drug not covered under the Pharmacy benefit, an average of 20 percent. See page 94 of the 2008 *Associate Benefits Book* for more details.

The current coverage program for Specialty Drugs will not change.

Enclosed you will find a list of the most common conditions and treatment options that are available under the Pharmacy benefit. You can find the Brand Name Drug list on mywalmart.com and the WIRE, or call WellPoint Customer Service at 877-850-0185.

If your drug is not covered, you can contact your prescribing physician to see if there is an alternative medication available. DO NOT stop taking or change medications without talking to your doctor. After July 20, 2009, you can continue to fill a prescription for any drug not covered under the Plan, but you will be responsible for the full retail price (less any applicable discount).

~~The information provided in this communication is for general information purposes only. Inclusion or exclusion of medications available in your prescription drug program is not the practice of medicine or the substitute for the independent medical judgment of a treating physician. Only a treating physician can determine what medications are appropriate for a patient. Please refer to the 2008 *Associate Benefits Book* as well as the enclosed *Summary of Material Modifications* for information on Plan benefits, conditions, limitations or exclusions.~~

We are committed to helping you save money and live a better life. If you have any questions, please call WellPoint Customer Service at 877-850-0185.

Thank you,

WellPoint NextRx

**SUMMARY OF MATERIAL MODIFICATIONS
AMENDMENT TO ASSOCIATES' HEALTH AND WELFARE PLAN
July 20, 2009**

The 2008 *Associate Benefits Book*, which serves as the summary plan description for the Wal-Mart Stores, Inc. Associates' Health and Welfare Plan (the "Plan"), has been revised. Please read the following *Summary of Material Modifications*, which explains these revisions. These revisions and the page numbers mentioned in this *Summary of Material Modifications* refer to the 2008 *Associate Benefits Book* and the electronic version distributed on CD-ROM.

The Plan provides Pharmacy benefits to associates and their covered family members enrolled in a Value or Freedom Plan. Currently, the Plan covers prescription drugs in three tiers: Generic, Preferred Brand Name, and Non-Preferred Brand Name. Beginning July 20, 2009, the covered tiers will be: Generic, Brand Name, and Specialty.

The generic drug benefit provides a large number of drugs that offer an equivalent level of care at a reduced cost to the Plan participant. The number of generic drugs offered continues to increase as new generic drugs are approved by the FDA and are added to the program. Using a generic drug rather than a brand-name drug could save you money.

The Preferred and Non-Preferred Brand Name Drug programs are currently managed by category, and not as a specific list. An "open formulary" process has been used to determine what drugs would be included in each program. When a new brand-name drug was approved by the FDA for a category, it was automatically covered in one of the groups. Effective July 20, 2009, the Preferred and Non-Preferred Brand Name Drug programs will be eliminated, and will be replaced with a single Brand Name Drug plan. All of the drugs covered under the Non-Preferred Brand Name Program will be eliminated (except Specialty Drugs), as well as some of the drugs covered under the Preferred Brand Name Drug Program. This program will be known as the Brand Name Drug program and will be managed as a "closed formulary" process. It will only cover the drugs that are on the formulary list maintained by the Plan's pharmacy benefit manager, Wellpoint NextRx. Newly-approved brand-name drugs will not automatically be included.

The Specialty Drug list includes drugs that target and treat specific chronic or genetic conditions. Specialty drugs include biopharmaceuticals (bioengineered proteins), blood-derived products, and complex molecules. They are available in oral, injectable, or infused forms. The Specialty Drug program will not change.

Any prescription drug not covered in the Generic, Brand Name or Specialty Drug programs mentioned above will not be covered by the Plan.

To find out what drugs are covered under the Plan's Pharmacy benefit, go to www.mywalmart.com, or the WIRE, or call WellPoint NextRx Customer Service at 877-850-0185.

The Plan benefit for the covered drug tiers is as follows:

<u>Retail</u>		
Generic	1 to 30-day supply	\$4 Copay
	31 to 60-day supply	\$8 Copay
	61 to 90-day supply	\$12 Copay
Brand	1 to 30-day supply	\$30 or 20% of allowed cost, whichever is greater
Specialty	1 to 30-day supply	20% of allowed cost
<u>Mail Order</u>		
Generic	1 to 34-day supply	\$4 Copay
	35 to 90-day supply	\$8 Copay
	Brand	1 to 34-day supply
	35 to 90-day supply	\$60 or 20% of allowed cost, whichever is greater
Specialty	1 to 90-day supply	20% of allowed cost

Please keep this *Summary of Material Modifications* with your 2008 *Associate Benefits Book* for future reference, along with the other *Summaries of Material Modifications* that have been sent by the Plan. The 2008 *Associate Benefits Book* and the other *Summaries of Material Modifications* issued by the Plan contain important information about the Plan's rules concerning eligibility and benefits. The amendments described above do not supersede any of the provisions of the Plan not expressly addressed herein, and Wal-Mart reserves the right to amend or terminate the Plan at any time and to any extent.

If you have any questions about this *Summary of Material Modifications*, or if you need another copy of the 2008 *Associate Benefits Book* or any other *Summary of Material Modifications*, please contact the Wal-Mart Benefits Team, 922 West Walnut, Suite A, Rogers, AR 72756, or by phone at 800-421-1362 or 479-621-2929.

ERISA Information

Plan Sponsor:	Wal-Mart Stores, Inc.
Plan Sponsor EIN:	71-0415188
Plan Name:	The Associates' Health and Welfare Plan
Plan Number:	501

AHWP Formulary Alternative Guide
Effective July 20, 2009

GENERIC AND BRAND DRUGS FOR COMMON THERAPEUTIC CATEGORIES

Please note: Some of the drugs in this table may be used to treat other conditions. Possible alternatives listed in this table may be from different drug classes and may not be considered equivalent. Only your doctor can determine if a drug is right for you. The drugs listed in this table do not represent all the therapeutic options for the condition listed. This alternative guide is not a complete listing of all disease categories.

Therapeutic Category	Generic Drugs (\$4 copay)		Brand Drugs (\$30 or 20%, whichever is greater)	
Acid Reflux	cimetidine (Rx only) metoclopramide nizatidine (Rx only) omeprazole (Rx only)	ranitidine (Rx only) sucralfate	Nexium Prevacid	
ADHD	amphetamine salt combination dexamethylphenidate methylphenidate		Concerta Vyvanse	
Antiarrhythmics	amiodarone digoxin disopyramide flecainide mexiletine	procainamide propafenone quinidine gluconate quinidine sulfate sotalol	Cordarone Lanoxicaps/Lanoxin Pacerone	
Antibiotic	cefclidnir cefepodoxime cefprozil cefuroxime cephalexin azithromycin clarithromycin erythromycin base erythromycin ethylsuccinate erythromycin stearate amoxicillin ampicillin amoxicillin/clavulanate	dicloxacillin penicillin V potassium ciprofloxacin ofloxacin erythromycin/sulfisoxazole sulfisoxazole TMP-SMX doxycycline hyclate minocycline tetracycline	Levaquin	
Anticoagulant/Antithrombotics	anagrelide dipyridamole pentoxifylline	ticlopidine warfarin	Coumadin Lovenox	
Anticonvulsant	carbamazepine clonazepam divalproex ethosuximide gabapentin lamotrigine oxcarbazepine	phenobarbital phenytoin primidone topiramate valproic acid zonisamide	Carbatrol Depakene Dilantin Phenytek Tegretol XR Zarontin	
Antihistamines	cyproheptadine fexofenadine hydroxyzine HCl	hydroxyzine pamoate promethazine		
Antipsychotics	chlorpromazine clozapine fluphenazine haloperidol perphenazine	risperidone thioridazine thiathixene trifluoperazine	Abilify/Discemelt Fazaclo Geodon Seroquel/XR Zyprexa/Zydis	
Arthritis / Pain	diclofenac etodolac flurbiprofen ibuprofen indomethacin ketoprofen meloxicam	nabumetone naproxen oxaprozin piroxicam sulindac	Celebrex	
Asthma	Budesonide Albuterol Metaproterenol Terbutaline Aminophylline	Theophylline Albuterol/ipratropium Cromolyn sodium Ipratropium bromide	Azmacort Flovent HFA/Diskus Pulmicort Inhaler/soln Qvar Foradil ProAir HFA Proventil HFA Serevent Diskus Singular	Panfil G Theo-234 Uniphyll Advair HFA/Diskus Intal Neb Soln Symbicort
Contraceptives	ethinyl estadiol (EE)/desogestrel EE/drospirenone EE/ethynodiol EE/norethindrone EE/levonorgestrel Norethindrone	norethindron/mestranol EE/norgestimate EE/norgestrel EE/ethynodiol medroxyprogesterone acetate	Yaz	
Depression	amitriptyline bupropion citalopram desipramine doxepin fluoxetine Imipramine	mirtazapine nortriptyline paroxetine sertraline trazodone venlafaxine	Effexor XR Lexapro Pristiq	

Dermatologics	augmented betamethasone benzoyl peroxide betamethasone valerate ciclopirox clindamycin clobetasol propionate clotrimazole/betamethasone desonide econazole erythromycin erythromycin/benzoyl peroxide flucinolone acetonide	halobetasol propionate hydrocortisone valerate ketoconazole isotretinoin metronidazole mometasone furoate nystatin nystatin/triamcinolone sodium sulfacetamide sulfur lotion sodium sulfacetamide/sulfur tretinoin triamcinolone acetonide	Tazorac
Diabetes	Oral Products acarbose glimepiride glipizide glipizide/metformin glyburide glyburide/metformin metformin		Oral Products Actoplus Met Actos Avandamet Avandaryl Avandia Duetact Glyset Prandin Starfix Test Strips Accu-Chek One Touch (including Surestep and Fast Take) Insulin Apidra Humalog Humulin Iletin Novolin Novolog Lantus Levemir Other insulin syringes Lancets Byetta
Diuretics	acetazolamide furosemide hctz/triamterene hydrochlorothiazide indapamide	methazolamide metolazone spironolactone spironolactone/hctz torsemide	
Estrogen and Combination Therapy	estradiol estradiol transdermal estrogen/ methyltestosterone	estradiol/norethendrone estropipate	Premarin/Vaginal Cream Prempro Premphase
Glaucoma	betaxolol brimonidine carbachol dipivefrin	pilocarpine timolol	Lumigan Xalatan
High Blood Pressure	acebutolol amlodipine amlodipine/benazepril atenolol benazepril benazepril/HCTZ bisoprolol bumetanide carvedilol captopril captopril/HCTZ diltiazem enalapril enalapril/HCTZ felodipine fosinopril fosinopril/HCTZ indapamide	labetalol lisinopril lisinopril/ HCTZ metolazone metoprolol succinate metoprolol tartrate moexipril nadolol indolol prazosin propranolol quinapril quinapril/HCTZ ramipril terazosin timolol torsemide verapamil	Cozaar Coreg CR Diovan Diovan HCT Hyzaar
High Cholesterol and/or High Triglycerides	cholestyramine colestipol fenofibrate gemfibrozil	lovastatin pravastatin simvastatin	Lipitor Tricor
Migraine	ergotamine/caffeine isometheptene/dichloralphenazone/APAP sumatriptan		Maxal/MLT Zomig/ZMT
Narcotic Analgesics	APAP/caffeine/butalbital APAP or ASA/Codeine APAP/hydrocodone ASA/caffeine/butalbital codeine/APAP codeine/ASA fentanyl transdermal fentanyl transmucosal hydromorphone ibuprofen/oxycodone pentazocine/APAP	meperidine methadone morphine sulfate oxycodone oxycodone/APAP oxycodone/ASA propoxyphene HCl propoxyphene/APAP tramadol/APAP tramadol	Avinza OxyContin
Nasal Corticosteroids	fluticasone		Nasonex
Osteoporosis	aldendronate		Actonel Actonel with Calcium
Sedative Hypnotics	lorazepam temazepam	triazolam zolpidem	Lunesta
Vasodilators	hydralazine isosorbide dinitrate minitran	minoxidil nitroglycerin Nitroquick	

Specialty medications used to treat complex, chronic conditions that may require special handling and/or management will continue to process as they have during 2009. These products include drugs to treat psoriasis, hemophilia, chemotherapy, HIV/AIDS, growth hormone, multiple sclerosis, hepatitis, rheumatoid arthritis, etc. Androgen replacement therapy (Androderm, Androgel, Testim) will also continue to process as they have during 2009.

Walmart Associates

Prescription Drug Formulary

January 2009

This condensed formulary is designed to serve as a reference guide and assist in the selection of cost-effective pharmaceutical products. The formulary is not intended to be a substitute for clinical knowledge and judgment. In all cases, the prescriber is

expected to select appropriate drug therapy for the individual patient and provide high quality healthcare.

The Pharmacy and Therapeutics Committee will regularly review the formulary to ensure it meets the needs of both patients and providers. Thank you in advance for your cooperation.

This document is an abbreviated listing of formulary products. For more information contact Customer Service at 1-877-850-0185 or visit the MyRxBenefits tab on the Web site to search for specific formulary status.

PREFERRED DRUGS BY THERAPEUTIC CLASS

• Generics are available in this class and should be considered as the first line of prescribing.

ANTIDIABETIC AGENTS

INSULINS

Rapid-Acting Insulins

Apidra
Humalog
Humulin R
Iletin II Reg
Insulin R Pork
Novolin R
Novolog
Velosulin Human BR

Intermediate-Acting Insulins

Humalog Mix 75/25
Humulin
Humulin 50/50
Iletin II Lente
Iletin II NPH
Novolin N, L, 70/30
Novolog Mix 70/30

Long-Acting Insulins

Humulin U
Lantus
Levemir

•ORAL

Actoplus
Actos
Avandamet
Avandaryl
Avandia
Duetact
Glyset
Janumet
Januvia
Prandin
Starlix

OTHER ANTIDIABETIC

AGENTS/SUPPLIES

Accu-Check Strips and Kits
Byetta
Insulin syringes and needles
Lancets
One Touch Strips and Kits
Symliin

ANTIHISTAMINE / DECONGESTANTS

•ORAL

•NASAL CORTICOSTEROIDS-

NASAL ANTIHISTAMINES

Astelin

ANTI-INFECTIVE AGENTS (ORAL)

ANTIBIOTICS

•Cephalosporins

•Erythromycins/Macrolides/ Ketolides

Ketek

•Penicillins

Augmentin ES/XR

•Quinolones

Cipro Suspension

Levaquin

•Antifungal Agents

Lamisil

ANTIVIRALS

•Herpes Agents

Valtrex

•Influenza Agents

Tamiflu

AUTONOMIC & CENTRAL NERVOUS SYSTEM

ALZHEIMER'S AGENTS

Aricept

Exelon

Namenda

Razadyne ER

•ANALGESICS, NARCOTIC

Avinza

Kadian

OxyContin

•ANALGESICS, NONSTEROIDAL ANTI- INFLAMMATORY

Celebrex

•ANTICONSULSANTS

Carbatrol ER

Depakote/ER/Sprinkle

Diastat

Felbatol

Gabitril

Keppra

Lyrica

Neurontin solution

Tegretol XR

Topamax

Trileptal

•ANXIOLYTICS, SEDATIVES, AND HYPNOTICS

Ambien CR

Lunesta

•ATTENTION DEFICIT HYPERACTIVITY DISORDER

Adderall XR

Concerta

Strattera

•DMARDS

Enbrel

Humira

Kineret

Remicade

Ridaura

•MIGRAINE AGENTS

Maxalt/MLT

Migranal

Zomig/ZMT

PSYCHOTHERAPEUTIC AGENTS

•Antidepressants

Cymbalta

Effexor XR

Lexapro

Pristiq

Remeron 45mg SolTab

Venlafaxine SR

•Antipsychotic Agents

Abilify/Discmelt

Geodon

Invega

Risperdal M

Seroquel/XR

Zyprexa/Zydis

CARDIOVASCULAR AGENTS

ANGIOTENSIN II

ANTAGONISTS

Atacand

Avapro

Benicar

Cozaar

Diovan

•ACE INHIBITORS

•ANTI-ADRENERGIC AGENTS

- BETA-BLOCKERS

Coreg CR

•ANTI-ADRENERGIC BLOCKERS - CENTRALLY

ACTING

Catapres-TTS

•ANTI-ADRENERGIC BLOCKERS - PERIPHERALLY

ACTING

Flomax

•ANTICOAGULANTS/ ANTI-THROMBOTICS

Aggrenox

Arixtra

Coumadin

Lovenox

•ANTILIPEMICS

Advicor

Antara

Lipitor

Tricor

Vytorin

Welchol

Zetia

•CALCIUM CHANNEL BLOCKERS

Sular

Verelan PM

•COMBINATION

ANTIHYPERTENSIVES

Atacand HCT

Avalide

Benicar HCT

Caduet

Diovan HCT

Exforge

Hyzaar

Lotrel

Tarka

Tekturma HCT

Uniretic

Quinaretic

•DIRECT RENIN INHIBITORS

Tekturma

•VASODILATORS

BiDil

Nitrolingual

CONTRACEPTIVES

•MONOPHASIC and BI-PHASIC

Seasonique

Yaz

•TRI-PHASIC

Ortho Tri-Cyclen Lo

CONTRACEPTIVE DEVICES

NuvaRing

Ortho-Evra Patch

DERMATOLOGICALS

•ACNE

Clobex

Differin

Duac CS

Olux

Retin-A Micro

Ultravate

•OTHER DERMATOLOGICALS-

Aldara

Carac

Duacac Cream

JAN 2009

Elidel
Fluoroplex
Oxsoralen
Protopic
Raptiva
Regranex
Soriatane
Targretin
Tazorac

GASTROINTESTINAL AGENTS

•**ANTIULCER** -----
Nexium
Prevacid
Prevacid Naprapac
PrevPac

DIGESTANTS -----
Creon
Pancrease
Pancrearb-16
Ultrase/MT
Viokase

•**OTHER GI PRODUCTS** -----

Asacol
Dipentum
Cortifoam
Entocort EC
Golytely
Kristalose
Pentasa
Rowasa

HORMONES

•**ANDROGENS** -----

Androderm
Androgel
Teslac
Testim

•**ANTIESTROGENS/ ANTIANDROGENS** -----

Avodart
•**ESTROGENS** -----
Cenestin

Climara/Pro
Enjuvia
Estraderm
Estring
Menest
Premarin/Vaginal Cream
Vagifem
Vivelle/DOT

•**ESTROGEN AND ANDROGEN/PROGESTERONE COMBINATIONS** -----

CombiPatch
Femhrt
Prefest
Premphase
Prempro/Low Dose

GROWTH HORMONE -----

Genotropin
Humatrope
Nutropin/AQ/Depot

•**PROGESTINS** -----

Prometrium
SELECTIVE RECEPTOR MODULATORS -----
Evista

IMMUNOLOGIC AGENTS

Avonex
Betaseron
Copaxone
Rebif
Pegasys
PegIntron/Redipen

OPHTHALMICS

•**ANTI-ALLERGIC AGENTS** -----

Alamast
Alocril
Alomide
Alrex
Livostin
Optivar
Patanol

•**ANTI-GLAUCOMA AGENTS** -----

Alphagan-P
Azopt
Betimol
Betoptic-S
Lumigan
Xalatan

•**ANTI-INFECTIVE/ANTIVIRAL AGENTS** -----

Vigamox
•**BETA-BLOCKERS** -----
Timoptic Ocudose

OSTEOPOROSIS AGENTS

Actonel
Actonel with Calcium
Boniva
Forteo
Fosamax Plus D
Miacalcin

OTICS

•**ANTI-INFECTIVE AND ANTI-INFLAMMATORY COMBINATIONS** -----

Ciprodex
Floxin Otic

RESPIRATORY/ASTHMA

ANTI-ASTHMATIC AGENTS -----

Antileukotrienes

Accolate
Singulair

Corticosteroids

Asmanex
Azmacort
Flovent/HFA
Pulmicort
Qvar

•**Sympathomimetics**

AccuNeb
Foradil
Perforomist
ProAir HFA
Proventil HFA

Serevent/Diskus
Xopenex/HFA

•**OTHER RESPIRATORY/ ASTHMA AGENTS** -----

Advair Diskus
Atrovent Inhaler
Combivent
DuoNeb
Intal Inhaler
Nebupent
Pulmozyme
Spiriva
Symbicort
Tilade
Xolair

•THYROID AND ANTITHYROID AGENTS

Armour Thyroid
Synthroid

URINARY AGENTS

•**URINARY ANTISPASMODICS** -----

Detrol/Detrol LA
VESicare

•VAGINAL PREPARATIONS

Cleocin Vaginal Cream/Ovule
Gynazole-1
MetroGel-Vaginal

MISCELLANEOUS AGENTS

Aranesp
Cellcept
Epipen/JR
Epogen
Leukine
Neupogen
Neumega
Procrit
Renegel
Renvela
Twinject

QUICK REFERENCE PREFERRED BRAND LIST

A

Abilify/Discmelt
Accolate
Accu-Check Strips & Kit
AccuNeb
Actonel/Calcium
Actoplus Met
Actos
Adderall XR
Advair Diskus
Advicor
Aggrenox
Alamast
Aldara
Alocril
Alomide
Alphagan-P
Alrex

Ambien CR
Androderm
Androgel
Antara
Apidra
Aranesp
Aricept
Arixtra
Armour Thyroid
Asacol
Asmanex
Astelin
Atacand / HCT
Atrovent Inhaler
Augmentin ES/XR
Avalide
Avandamet
Avandaryl
Avandia
Avapro

Avinza
Avodart
Avonex
Azmacort
Azopt

B

Benicar
Benicar HCT
Betaseron
Betimol
Betoptic-S
BiDil
Boniva
Byetta

C

Caduet
Carac
Carbatrol ER
Cetirizine HCl

Celebrex
Cellcept
Cenestin
Ciprodex
Cleocin Vag cream/ovules
Climara/Pro
Clobex
CombiPatch
Combivent
Concerta
Copaxone
Coreg CR
Cortifoam
Coumadin
Cozaar
Creon
Cymbalta

D

Depakote ER/ Sprinkle
Detrol/LA
Diastat
Differin
Diovan
Diovan HCT
Dipentum
Dovonex Cream
Duac CS
Duetact
DuoNeb

E

Effexor XR
Elidel
Enbrel
Enjuvia
Entocort EC

F

Epipen/JR
Epogen
Estraderm
Estring
Evista
Exelon
Exforge
Felbatol
Femhrt
Flomax
Flovent/HFA
Floxin Otic
Fluoroplex
Foradil
Forteo
Fosamax D

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G

Gabitril
Genotropin
Geodon
Glyset
Golytely
Gynazole-1

H

Humalog
Humalog Mix 75/25
Humatrope
Humira
Humulin 50/50
Humulin 70/30
Humulin L
Humulin N
Humulin R
Humulin U
Hyzaar

I

Iletin II Lente
Iletin II NPH
Iletin II Reg
Insulin R Pork
Insulin syringes/
needles
Intal Inhaler
Invega

J-K

Januvia

Janumet
Kadian
Keppra
Ketek
Kineret
Kristalose

L

Lamisil
Lancets
Lantus
Leukine
Levaquin
Levemir
Lexapro
Lipitor
Livostin
Lotrel
Lovenox
Lumigan
Lunesta
Lyrica

M

Maxalt/MLT
Menest
MetroGel-Vaginal
Miacalcin
Migranal

N

Namenda
Nasonex

Nebupent
Neumega
Neupogen
Neurontin solution
Nexium
Nitrolingual
Novolin 70/30
Novolin L
Novolin N
Novolin R
Novolog
Novolog Mix 70/30
Nutropin/AQ/Depot
NuvaRing

O

Otux
One Touch Strips
& Kits
Optivar
Ortho Tri-Cyclen Lo
Ortho-Evra Patch
Oxsoralen
Oxycontin

P

Pancrease
Pancrecarb-16
Patanol
Pegaseys
PegIntron/Redipen
Pentasa
Perforomist

Plavix
Prandin
Prefest
Premarin/Vag
cream
Premphase
Prempro/Low Dose
Prevacid
Prevacid Naprapac
PrevPac
Pristiq
ProAir HFA
Prometrium
Protopic
Proventil HFA
Pulmicort
Pulmozyme

Q-R

Quinaretic
Qvar
Raptiva
Razadyne ER
Rebif
Regranex
Remeron 45mg
SolTab
Remicade
Renagel
Renvela
Retin-A Micro
Ridaura
Rispedal M

S

Seasonique
Serevent/Diskus
Seroquel/XR
Singulair
Soriatane
Spiriva
Starlix
Strattera
Sular
Symbicort
Symliin
Synthroid

T

Tamiflu
Targretin
Tarka
Tazorac
Tegretol XR
Tekturna/HCT
Teslac
Testim
Tilade
Timoptic Ocudose
Topamax
Tricor
Trileptal
Twinject

U-V-W

Ultrase/MT

Ultravate
Uniretic
Vagifem
Valtrex
Velosulin Human BR
Venlafaxine SR
Vereian PM
VESicare
Vigamox
Viokase
Vivelle/DOT
Vytorin
Vyvanse
Welchol

X-Y

Xalatan
Xolair
Xopenex/HFA
Yasmin
Yaz

Z

Zetia
Zomig/ZMT
Zyprexa/Zydis

JAN 2009
10/1
15/6
2/59

Administered by:
WellPoint NextRx
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West Hills, CA 91304

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Walmart Associates

Prescription Drug Formulary

July 20, 2009

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This document is an abbreviated listing of formulary products. For more information contact Customer Service at 1-877-850-0185 or visit the MyRxBenefits tab on the Web site to search for specific formulary status.

PREFERRED DRUGS BY THERAPEUTIC CLASS

• Generics are available in this class and should be considered as the first line of prescribing.

ANTIDIABETIC AGENTS

INSULINS

Rapid-Acting Insulins

- Apidra
- Humalog
- Humulin R
- Novolin R
- Novolog

Intermediate-Acting Insulins

- Humalog Mix 75/25
- Humulin
- Humulin 50/50
- Novolin N, L, 70/30
- Novolog Mix 70/30

Long-Acting Insulins

- Humulin U
- Lantus
- Levemir

ORAL

- Actoplus
- Actos
- Avandamet
- Avandaryl
- Avandia
- Duetact
- Glyset
- Prandin
- Starlix

OTHER ANTI-DIABETIC AGENTS/SUPPLIES

- Accu-Check Strips and Kits
- Byetta
- Insulin syringes and needles
- Lancets
- One Touch Strips and Kits

ANTIHISTAMINE / DECONGESTANTS

ORAL

NASAL CORTICOSTEROIDS

- Nasonex

ANTI-INFECTIVE AGENTS (ORAL)

ANTIBIOTICS

- Cephalosporins
- Erythromycins/Macrolides/Other
- Penicillins
- Penicillin combination
- Quinolones
- Levaquin
- Antifungal Agents
- ANTIVIRALS
- Herpes Agents
- Valtrex

Influenza Agents

- Relenza
- Tamiflu

AUTONOMIC & CENTRAL NERVOUS SYSTEM

ALZHEIMER'S AGENTS

ANALGESICS, NARCOTIC

- Avinza
- OxyContin

ANALGESICS, NONSTEROIDAL ANTI-INFLAMMATORY

- Celebrex

ANTICONVULSANTS

- Carbatrol ER
- Depakene
- Tegretol/XR
- Zarontin

ANXIOLYTICS, SEDATIVES, AND HYPNOTICS

- Lunesta

ATTENTION DEFICIT HYPERACTIVITY DISORDER

- Concerta
- Vyvanse

DMARDS

- Enbrel
- Humira
- Kineret
- Remicade
- Rheumatrex
- Trexall

MIGRAINE AGENTS

- Maxalt/MLT
- Zomig/ZMT

PSYCHOTHERAPEUTIC AGENTS

Antidepressants

- Effexor XR
- Lexapro
- Pristiq

Antipsychotic Agents

- Abilify/Discmelt
- Fazaclo
- Geodon
- Seroquel/XR
- Zyprexa/Zydis

CARDIOVASCULAR AGENTS

ANGIOTENSIN II ANTAGONISTS

- Cozaar

ACE INHIBITORS

- Diovan

ANTI-ADRENERGIC AGENTS - BETA-BLOCKERS

- Coreg_CR

ANTI-ADRENERGIC BLOCKERS - CENTRALLY ACTING

ANTI-ADRENERGIC BLOCKERS - PERIPHERALLY ACTING

- Flomax

ANTICOAGULANTS/ANTITHROMBOTICS

- Coumadin
- Lovenox

ANTILIPEMICS

- Lipitor
- Tricor

CALCIUM CHANNEL BLOCKERS

COMBINATION ANTIHYPERTENSIVES

- Diovan HCT
- Hyzaar

DIRECT RENIN INHIBITORS

VASODILATORS

CONTRACEPTIVES

MONOPHASIC and BI-PHASIC

TRI-PHASIC

DERMATOLOGICALS

ACNE

OTHER DERMATOLOGICALS

- Tazorac

GASTROINTESTINAL AGENTS

ANTIULCER

- Nexium
- Prevacid

DIGESTANTS

- Creon
- Pancrease
- Pancrecarb-16
- Ultrasa/MT
- Viokase

OTHER GI PRODUCTS

HORMONES

ANDROGENS

- Androderm
- AndroGel
- Teslac
- Testim

ANTIESTROGENS/ ANTIANDROGENS

ESTROGENS

- Premarin/Vaginal Cream

ESTROGEN AND ANDROGEN/PROGESTERONE COMBINATIONS

- Premphase
- Prempro/Low Dose

GROWTH HORMONE

- Genotropin
- Humatrope
- Nutropin/AQ/Depot

PROGESTINS

IMMUNOLOGIC AGENTS

- Avonex
- Betaseron
- Copaxone
- Rebetron
- Rebif
- Pegasys
- PegIntron/Redipen

OPHTHALMICS

ANTI-ALLERGIC AGENTS

ANTI-GLAUCOMA AGENTS

- Lumigan
- Xalatan

ANTI-INFECTIVE/ANTIVIRAL AGENTS

BETA-BLOCKERS

OSTEOPOROSIS AGENTS

- Actonel
- Actonel with Calcium

OTICS

ANTI-INFECTIVE AND ANTI-INFLAMMATORY COMBINATIONS

RESPIRATORY/ASTHMA

ANTI-ASTHMATIC AGENTS

Antileukotrienes

- Singulair

Corticosteroids

- Azmacort
- Flovent HFA
- Pulmicort
- Qvar

Sympathomimetics

- Foradil
- ProAir HFA
- Proventil HFA
- Serevent/Diskus

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**•OTHER RESPIRATORY/
ASTHMA AGENTS**

Advair Diskus
Intal Nebulizer
Symbicort

**•THYROID AND
ANTITHYROID AGENTS**

Armour Thyroid
Synthroid

URINARY AGENTS

**•URINARY ANTISPASMODICS -
Detrol/Detrol LA
VESicare**

• VAGINAL PREPARATIONS

MetroGel-Vaginal

MISCELLANEOUS AGENTS

Aranesp
Epipen/JR
Epogen

Leukine
Neupogen
Neumega
Procrit
Twinject

QUICK REFERENCE PREFERRED BRAND LIST

A	Copaxone Coreg_CR Coumadin Cozaar Creon Depakene Detrol/LA Diovan Diovan HCT Duetact DuoNeb	D	Humalog Humalog Mix 75/25 Humatrope Humira Humulin 50/50 Humulin 70/30 Humulin L Humulin N Humulin R Humulin U Hyzaar	L	Lovenox Lumigan Lunesta Maxalt/MLT MetroGel-Vaginal Nasonex Neupogen Neumega Nexium Novolin 70/30 Novolin L Novolin N Novolin R Novolog Novolog Mix 70/30 Nutropin/AQ/Depot	P	PegIntron/Redipen Prandin Premarin/Vag cream Premphase Prempro/Low Dose Prevacid Pristiq ProAir HFA Procrit Proventil HFA Pulmicort	Q-R	Tamiflu Tazorac Tegretol/XR Teslac Testim Trexall Tricor Twinject
B	Fazacio Flomax Flovent/HFA Foradil	E	Insulin syringes / needles Intal Nebulizer	N	Novolog Novolog Mix 70/30	Q-R	Quar Rebetron Rebif Relenza Remicade Rheumatrex	U-V-W	Ultrase/MT Valtrex VESicare Viokase Vyvanse
C	Genotropin Geodon Glyset	F	Kineret	O	One Touch Strips & Kits Oxycontin	S	Serevent/Diskus Seroquel/XR Singulair Starlix Symbicort Synthroid	X-Y	Xalatan Yaz
A	Abilify/Discmelt Accu-Check Strips and Kit Actonel/Calcium Actoplus Met Actos Advair Diskus Androderm Androgel Apidra Aranesp Armour Thyroid Avandamet Avandaryl Avandia Avinza Avonex Azmacort	G	Lancets Lantus Levaquin Levemir Leukine Lexapro Lipitor	C	Carbatrol ER Celebrex Concerta	P	Pancrease Pancrecarb-16 Pegasys	T	Zarontin Zomig/ZMT Zyprexa/Zydis

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