



ST. LAWRENCE
COUNTY GOVERNMENT

**SIMPLE.
SAFE.
SMART.**



SIGN UP TODAY

Medications FREE to your door!
See reverse for a full list of medications.

CANARX is a voluntary international mail order prescription program that is available to eligible employees, retirees and their dependents of St. Lawrence County, New York.

Brand name medications, in the original factory-sealed manufacturers packaging, are delivered **DIRECT TO YOUR DOOR** from certified pharmacies in Canada, the United Kingdom and Australia. **YOU PAY NOTHING** thanks to the savings CANARX brings to your plan.

Getting started is super easy!

1. Check to see if a medication is offered - call CANARX at **1-866-893-6337** or to view the complete formulary - and enroll online or download an enrollment form - visit www.canarx.com (WebID: **SLCMEDS**).
2. Ask your doctor for a prescription for a 3-month supply, with 3 refills.
3. Submit documentation (completed enrollment form, prescription and a copy of your photo ID).
4. Sit back and relax...medication will be mailed direct to your home within 4 weeks!

- ✓ **\$0 Copay**
- ✓ **400+ FREE Brand Name Medications**
- ✓ **Easy, convenient refills**
- ✓ **Refills only, no "new to you" meds**
- ✓ **No additional costs**

For More Information



1-866-893-6337
www.canarx.com
WebID: **SLCMEDS**

ACULAR (G) 0.5%	CLIMARA PATCH 50MCG	IBRANCE 100MG	NEUPRO 2MG	SUTENT 37.5MG
ACULAR LS (G) 0.4%	CLIMARA PATCH 75MCG	IBRANCE 125MG	NEUPRO 3MG	SUTENT 50MG
ACZONE 5%	COMBIGAN 0.2-0.5%	ILEVRO 0.3%	NEUPRO 4MG	SYMBICORT 160MCG-4.5MCG
ADVAIR DISKUS 100MCG	COMBIVENT RESPIMAT	IMITREX NASAL SPRAY 5MG	NEUPRO 6MG	SYM TUZA 800-150-200-10MG
ADVAIR DISKUS 250MCG	20MCG/100MCG	IMITREX NASAL SPRAY 20MG	NEUPRO 8MG	SYNAREL NASAL
ADVAIR DISKUS 500MCG	CORGARD 80MG	IMITREX STATDOSE 6MG/0.5ML	NEVANAC 3MG/ML	SYNJARDY 5MG/500MG
ADVAIR HFA 45/21MCG	COSOPT PF 2%/0.5%	INCRUSE ELLIPTA 62.5MCG	NEXAVAR 200MG	SYNJARDY 5MG/1000MG
ADVAIR HFA 115/21MCG	CRESTOR (G) 10MG	INVEGA 3MG	NEXIUM DR (G) 10MG	SYNJARDY 12.5MG/500MG
ADVAIR HFA 230/21MCG	CRINONE GEL 8%	INVEGA (G) 6MG	NEXLETO 180MG	SYNJARDY 12.5MG/1000MG
AFINITOR 2.5MG	CYTOTEC (G) 200MCG	INVOKAMET 50MG-500MG	NEXLIZET 180MG-10.2MG	TASIGNA 150MG
AFINITOR 5MG	DALIRESP 250MCG	INVOKAMET 50MG-1000MG	NEXTSTELLIS 3MG-14.2MG	TASIGNA 200MG
AFINITOR 10MG	DETROL (G) 1MG	INVOKAMET 150MG-500MG	NORITATE CREAM 1%	TASMAR 100MG
AKLIEF 50MCG/G	DETROL LA (G) 4MG	INVOKAMET 150MG-1000MG	NUBEQA 300MG	TAZORAC GEL 0.05%
ALOMIDE 0.1%	DEXILANT DR 30MG	INVOKANA 100MG	NURTEC ODT 75MG	TIVICAY 50MG
ALPHAGAN-P 0.15%	DEXILANT DR 60MG	INVOKANA 300MG	OLUMIANT 2MG	TOBI PODHALER 28MG
ALREX 0.2%	DIFFERIN CREAM 0.1%	IRESSA 250MG	OMNARIS 50MCG	TOBREX OINT 0.3%
ALVESCO 80MCG	DIOVAN HCT (G) 80/12.5MG	ISENTRESS 400MG	ORACEA 40MG	TOPAMAX (G) 25MG
ALVESCO 160MCG	DIPROLENE OINT 0.05%	JAKAFI 5MG	ORILISSA 150MG	TRADJENTA 5MG
ANAPROX DS 550MG	DIVIGEL 0.25MG	JAKAFI 10MG	ORILISSA 200MG	TRELEGY ELLIPTA
ANORO ELLIPTA 62.5/25MCG	DIVIGEL 0.5MG	JAKAFI 15MG	OSPHENA 60MG	100-62.5-25MCG
APTIOM 200MG	DIVIGEL 1MG	JAKAFI 20MG	OTEZLA 30MG	TRELEGY ELLIPTA
APTIOM 400MG	DOVATO 50MG-300MG	JALYN 0.5MG/0.4MG	PENTASA 500MG	200-62.5-25MCG
APTIOM 600MG	DULERA 100MCG/5MCG	JANUMET 50/500MG	PRADAXA 75MG	TRIBENZOR 20/5/12.5MG
APTIOM 800MG	DULERA 200MCG/5MCG	JANUMET 50/1000MG	PRADAXA 150MG	TRIBENZOR 40/5/12.5MG
ARAZLO 0.045%	DUOBRII 0.01%-0.045%	JANUMET XR 50MG/500MG	PRED FORTE 1%	TRIBENZOR 40/5/25MG
ARNUITY ELLIPTA 100MCG	DYMISTA 137/50MCG	JANUMET XR 50MG/1000MG	PREMARIN 0.3MG	TRIBENZOR 40/10/12.5MG
ARNUITY ELLIPTA 200MCG	EDARBI 40MG	JANUMET XR 100MG/1000MG	PREMARIN 0.625MG	TRIBENZOR 40/10/25MG
ARTHROTEC 50MG	EDARBI 80MG	JANUVIA 25MG	PREMARIN 1.25MG	TRINTELLIX 5MG
ARTHROTEC 75MG	EDARBYCLOR 40MG/12.5MG	JANUVIA 50MG	PREMARIN CREAM	TRINTELLIX 10MG
ASMANEX TWISTHALER 110MCG	EDARBYCLOR 40MG/25MG	JANUVIA 100MG	0.625MG/GM	TRINTELLIX 20MG
ASMANEX TWISTHALER 220MCG	EDURANT 25MG	JARDIANCE 10MG	PREMPRO 0.3MG/1.5MG	TRIUMEQ 600-50-300MG
ASTAGRAF XL 0.5MG	ELIDEL 1%	JARDIANCE 25MG	PRESTALIA 3.5MG/2.5MG	TUDORZA PRESSAIR 400MCG
ASTAGRAF XL 1MG	ELIQUIS 2.5MG	JENTADUETO 2.5MG-500MG	PRESTALIA 7MG/5MG	UBRELVY 50MG
ASTAGRAF XL 5MG	ELIQUIS 5MG	JENTADUETO 2.5MG-850MG	PRESTALIA 14MG/10MG	UBRELVY 100MG
ATACAND 4MG	ELMIRON 100MG	JENTADUETO 2.5MG-1000MG	PREVACID SOLUTAB 15MG	UCERIS 9MG
ATACAND 8MG	ENTRESTO 24MG-26MG	JUBLIA 10%	PREVACID SOLUTAB 30MG	URSO 250MG
ATACAND 32MG	ENTRESTO 49MG-51MG	KALUCA 50MG-25MG	PREZISTA 800MG	VAGIFEM 10MCG
ATACAND HCT 16MG/12.5MG	ENTRESTO 97MG-103MG	KAZANO 12.5/500MG	PREZISTA 50MG	VECTICAL 3MCG/GM
ATACAND HCT 32MG/12.5MG	EPIDUO FORTE 0.3%/2.5%	KAZANO 12.5/1000MG	PROTOPIC OINT 0.03%	VELPHORO 500MG
ATACAND HCT 32MG/25MG	EPIDUO GEL PUMP 0.1%/2.5%	KERENDIA 10MG	QTERN 10-5MG	VENTOLIN HFA 90MCG
ATELVIA DR 35MG	ESTROGEL 0.06%	KERENDIA 20MG	QUILIPTA 10MG	VERQUVO 10MG
ATROVENT HFA 20UG	EUCRISA OINTMENT 2%	KISQALI 200MG	QUILIPTA 30MG	VERQUVO 2.5MG
AVALIDE (G) 300MG/12.5MG	EVOTAZ 300MG-150MG	LATUDA 40MG	QUILIPTA 60MG	VERQUVO 5MG
AVAPRO (G) 75MG	EXFORGE HCT 160/12.5/5MG	LATUDA 120MG	QVAR REDHALER 40MCG	VIVELLE-DOT 25MCG
AVAPRO (G) 150MG	EXFORGE HCT 160/12.5/10MG	LINZESS 72MCG	QVAR REDHALER 80MCG	VIVELLE-DOT 37.5MCG
AZOPT 1%	EXFORGE HCT 160/25/5MG	LINZESS 145MCG	RAPAMUNE 2MG	VIVELLE-DOT 50MCG
AZOR 40/10MG	EXFORGE HCT 160/25/10MG	LINZESS 290MCG	RENAGEL 800MG	VIVELLE-DOT 100MCG
BANZEL 200MG	EXFORGE HCT 320/25/10MG	LOTEMAX GEL 0.5%	RESTASIS VIALS 0.05%	VRAYLAR 1.5MG
BANZEL 400MG	FARESTON 60MG	LOTEMAX OINT 0.5%	RETIN A CREAM 0.05%	VRAYLAR 3MG
BENICAR HCT (G) 40MG/12.5MG	FARXIGA 5MG	LOTEMAX SUSP 0.5%	RETIN A GEL (G) 0.025%	VRAYLAR 4.5MG
BEPREVE 1.5%	FARXIGA 10MG	LUMIGAN 0.01%	RETIN A MICRO GEL PUMP 0.04%	VRAYLAR 6MG
BETIMOL 0.25%	FELDENE 10MG	MESTINON TS 180MG	RETIN-A MICRO GEL PUMP 0.1%	VUMERITY 231MG
BETIMOL 0.5%	FELDENE 20MG	METROGEL PUMP 1%	REXULTI 0.25MG	VYTORIN 10/10MG
BETOPTIC S 0.25%	FETZIMA 20MG	MICARDIS 40MG	REXULTI 0.5MG	VYTORIN 10/20MG
BEVESPI AEROSPHERE	FETZIMA 40MG	MICARDIS 80MG	REXULTI 1MG	VYTORIN 10/40MG
9MCG-4.8MCG	FETZIMA 80MG	MICARDIS HCT 40/12.5MG	REXULTI 2MG	VYTORIN 10/80MG
BEYAZ	FETZIMA 120MG	MICARDIS HCT 80/12.5MG	REXULTI 3MG	WAKIX 4.5MG
BIJUVA 1MG-100MG	FINACEA GEL 15%	MICARDIS HCT 80/25MG	REXULTI 4MG	WAKIX 17.8MG
BINOSTO 70MG	FLAREX 0.1%	MIGRANAL 4MG/ML	RINVOQ 15MG	XADAGO 50MG
BREO ELLIPTA 100/25MCG	FLOVENT 44MCG	MINIPRESS (G) 2MG	RINVOQ 30MG	XADAGO 100MG
BREO ELLIPTA 200/25MCG	FLOVENT 110MCG	MINIPRESS (G) 5MG	RINVOQ 45MG	XARELTO 2.5MG
BREZTRI AEROSPHERE	FLOVENT 220MCG	MIRAPEX ER 0.375MG	RYBELSUS 3MG	XARELTO 10MG
160MCG-9MCG-4.8MCG	FLOVENT DISKUS 100MCG	MIRAPEX ER 0.75MG	RYBELSUS 7MG	XARELTO 15MG
BRILINTA 60MG	FLOVENT DISKUS 250MCG	MIRAPEX ER 1.5MG	RYBELSUS 14MG	XARELTO 20MG
BRILINTA 90MG	FOSAMAX PLUS D	MIRAPEX ER 2.25MG	SAPHRIS 5MG	XELJANZ 5MG
CADUET 5/10MG	70MG-2800IU	MIRAPEX ER 3MG	SAPHRIS 10MG	XELJANZ 10MG
CADUET 5/20MG	FOSAMAX PLUS D	MIRAPEX ER 3.75MG	SEREVENT DISKUS 50MCG	XELJANZ XR 11MG
CADUET 5/40MG	70MG-5600IU	MIRAPEX ER 4.5MG	SIMBRINZA 1%/0.2%	XENICAL 120MG
CADUET 5/80MG	FOSRENOL CHEW 500MG	MIRVASO 0.33%	SLYND 4MG	XIGDUO XR 5/1000MG
CADUET 10/10MG	FOSRENOL CHEW 750MG	MOTEGRITY 1MG	SOOLANTRA 1%	XIGDUO XR 10/500MG
CADUET 10/20MG	FOSRENOL CHEW 1000MG	MOTEGRITY 2MG	SOTYKTU 6MG	XIGDUO XR 10/1000MG
CADUET 10/40MG	FOSRENOL POWDER 750MG	MULTAQ 400MG	SPIRIVA 18MCG	XIIDRA 5%
CADUET 10/80MG	FOSRENOL POWDER 1000MG	MYRBETRIQ 25MG	SPIRIVA RESPIMAT 2.5MCG	ZELAPAR 1.25MG
CAMBIA 50MG	FROVA 2.5MG	MYRBETRIQ 50MG	STALEVO (G) 50MG	ZIANA 1.2%-0.025%
CARDURA XL 4MG	GLUCAGEN HYPOKIT 1MG	NATAZIA 3/2-2/2-3/1MG	STEGLUJAN 15MG-100MG	ZOMIG NASAL SPRAY 5MG
CARDURA XL 8MG	GLUMETZA ER 1000MG	NESINA 6.25MG	STIOLTO RESPIMAT 2.5/2.5MCG	ZOVIRAX CREAM 5%
CEQUA (G) 0.09%	GLYXAMBI 10MG/5MG	NESINA 12.5MG	STRIVERDI RESPIMAT 2.5MCG	ZYCLARA PACKET 3.75%
CLARINEX 5MG	GLYXAMBI 25MG/5MG	NESINA 25MG	SUTENT 12.5MG	ZYCLARA PUMP 3.75%
CLIMARA PATCH 25MCG	IBRANCE 75MG	NEUPRO 1MG	SUTENT 25MG	ZYTIGA (G) 500MG

NOTE: Medication names appearing with (G) are available in a Generic version from your local or U.S. mail order pharmacy. This list is subject to change. Please call 1-866-893-6337 toll free to verify the availability of your medication through this program.