



(931) 879-9997

Low-Co\$T Rx Program

Low-Cost Prescriptions Available, Starting at \$3

*Effective 05/01/19
*check at Pharmacy counter for details

DIABETES	\$4 30 Day Qty	\$10 90 Day Qty
GLIMEPIRIDE 1MG, 2MG, 4MG	30	90
GLIPIZIDE 10MG	60	180
GLIPIZIDE 5MG	30	90
GLYBURIDE MCR 3MG, 6MG	30	90
GLYBURIDE 2.5MG, 5MG	30	90
METFORMIN 500MG, 850MG, 1000MG	60	180
METFORMIN ER 500MG	60	180
METFORMIN ER 750MG	30	90

DIABETES	\$8 30 Day Qty	\$20 90 Day Qty
GLIPIZIDE ER 2.5MG,5MG,10MG	30	90

HEART	\$4 30 Day Qty	\$10 90 Day Qty
CHOLESTEROL		
LOVASTATIN 10MG,20MG	30	90
SIMVASTATIN 10MG,20MG,40MG	30	90

CHOLESTEROL	\$10 30 Day Qty	\$30 90 Day Qty
ATORVASTATIN 10MG,20MG,40MG	30	90

HEART HEALTH & BLOOD PRESSURE	\$3 30 Day Qty	\$8 90 Day Qty
ASPIRIN 81MG	\$30	90
ASPIRIN 325MG	\$30	90

HEART HEALTH & BLOOD PRESSURE	\$4 30 Day Qty	\$10 90 Day Qty
ATENOLOL 25MG, 50MG, 100MG	30	90
BENZAEPRI 5MG,10MG,20MG,20MG	30	90
CARVEDILOL 3.125MG,6.25MG,12.5MG,25MG	60	180
CLONIDINE 0.1MG,0.2MG, 0.3MG	30	90
ENALAPRIL/HCTZ 5/12MG	30	90
FUROSEMIDE 20MG,40MG,80MG	30	90
HYDRALAZINE 10MG,25MG	30	90
HYDROCHLOROTHIAZIDE 12.5MG,25MG,50MG	30	90
INDAPAMIDE 1.25MG,2.5MG	30	90
LISINOPRIL 2.5MG,5MG,10MG,20MG,30MG	30	90
LISINOPRIL/HCTZ 10/12.5MG,20/12.5MG,20/25MG	30	90
METOPROLOL TARTRATE 25MG,50MG,100MG	60	180
SPIRONOLACTONE 25MG	30	90
TRIAMTERENE/HCTZ 37.5/25MG TAB,75/50MG TAB	30	90
VERAPAMIL 80MG,120MG	30	90
WARFARIN 1MG, 2MG, 2.5MG, 3MG, 4MG,5MG,6MG,7.5MG,10MG	30	90

HEART HEALTH & BLOOD PRESSURE	\$8 30 Day Qty	\$20 90 Day Qty
AMIODRONE 200MG	30	90
DILTIAZEM 120MG TAB	30	90
DILTIAZEM 30MG,60MG TAB	60	180
DOXAZOSIN 1MG, 2MG, 4MG,8MG	30	90

HEART HEALTH & BLOOD PRESSURE	\$10 30 Day Qty	\$30 90 Day Qty
DILTIAZEM ER/XR 120MG 180MG CAPS	30	90
ISOSORBIDE MONO ER 30MG, 60MG	30	90
SOTALOL HCL 80MG	30	90
TRIAMTERENE/HCTZ 37.5/25MG TAB/CAPS 75/50MG TAB	30	90
VERAPAMIL ER TAB 120MG, 180MG,240MG	30	90

MENTAL HEALTH	\$4 30 Day Qty	\$10 90 Day Qty
BENZTROPINE 2MG TAB	30	90
BUSPIRONE 5MG,10MG	60	180
CITALOPRAM 10MG,20MG,40MG	30	90
FLUOXETINE 10MG,20MG,40MG CAP	30	90
LITHIUM CARB 300MG CAP	90	270
NORTRIPTYLINE 10MG,25MG,50MG	30	90
PAROXETINE 10MG, 20MG,30MG, 40mg	30	90
RISPERIDONE 0.25MG,0.5MG,1MG,2MG,3MG,4MG	30	90
SERTRALINE 25, 50, 100	30	90

MENTAL HEALTH	\$8 30 Day Qty	\$20 90 Day Qty
BENZTROPINE 1MG TAB	60	180
OLANZAPINE 2.5MG,5MG,7.5MG,10MG,15MG,20MG	30	90
QUETIAPINE 25MG,50MG,100MG,200MG,300MG	30	90

MENTAL HEALTH	\$10 30 Day Qty	\$30 90 Day Qty
AMITRIPTYLINE 10MG, 25MG, 50MG, 75MG, 100MG	30	90
TRAZODONE 50MG, 100MG, 150MG	30	90

OTHER THERAPEUTIC	\$8 30 Day Qty	\$20 90 Day Qty
STOMACH		
ESOMEPRAZOLE 40MG	30	90
OMEPRAZOLE 20MG, 40MG	30	90
PANTOPRAZOLE 20MG, 40MG	30	90
RANITIDINE 150MG TAB	60	180
RANITIDINE 300MG TAB	30	90
POLYETHYLENE GLYCOL POWDER	527g for \$15	

OTHER		
MEGESTROL 20MG	30	90
PREDNISONE 10MG	30	90
METHYLPREDNISOLONE 4MG PACK	1 pack for \$10	

SKINCARE		
HYDROCORTISONE 1%,2.5%CRM	30	90
TRIAMCINOLONE 0.1% CRM,0.1% OINT, 0.5%CRM	15	45

CONTINUED ON BACK



Low-Co\$T Rx Program

THYROID \$15 30 Day Qty \$42 90 Day Qty

LEVOTHYROXINE 25MCG,50MCG,5MCG,88MCG, 100MCG,112MCG,125MCG,137MCG, 150MCG,175MCG,200MCG	30	90
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VITAMIN & NUTRITION \$4 30 Day Qty \$10 90 Day Qty

FOLIC ACID 1MG TAB	30	90
MAG OXIDE 400MG TAB	30	90
PRENATAL PLUS TAB	30	90

PRENATAL VITAMINS ARE FREE TO ESTABLISHED CUSTOMERS WHO ARE PREGNANT OR 3 MONTHS POST-PARTUM

CALCIUM/VIT D 600/400	30	90
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WOMEN'S HEALTH

ESTRADIOL 0.5MG,1MG,2MG	30	90
MEDROXYPR AC 2.5MG,5MG	30	90
MEDROXYPR AC 10MG	10	30

FAMILY PLANNING \$10 30 Day Qty \$28 90 Day Qty

NORETHINDRONE 0.35MG TAB	28	N/A
GENERIC ORTHO CYCLEN	28	N/A
GENERIC ORTHO TRI-CYCLEN	28	N/A

MEN'S HEALTH

FINASTERIDE 5MG TAB	30	N/A
SILDENAFIL 20MG	30 tablets for \$30	
SILDENAFIL 100MG	10 tablets for \$25	

NAUSEA

ONDANSETRON 4mg	20 tablets for \$4.00	
ONDANSETRON 8mg	20 tablets for \$5.00	
PROMETHAZINE 25mg	20 tablets for \$4.00	

ANTI-INFLAMATORY \$10 30 Day Qty \$30 90 Day Qty

DICLOFENAC 50MG, 75MG	30	90
MELOXICAM 7.5MG, 15MG	30	90

ASTHMA & ALLERGY \$6 30 Day Qty \$15 90 Day Qty

LORATADINE 10MG	30	90
CETIRIZINE 10MG	30	90
CETIRIZINE 1MG/1ML SOLUTION	120ML	N/A
HYDROXYZINE 10MG/5ML SYRUP	120ML	N/A

\$8 30 Day Qty \$20 90 Day Qty

MONTELUKAST 4MG, 5MG, 10MG	30	90
FLUTICASONE NASAL SPRY	1 container for \$10	N/A
ALBUTEROL HFA	1 container for \$40	N/A

\$8 30 Day Qty \$30 90 Day Qty

ALBUTEROL NEB SOLN	90ML (1 box)	360ML (4 boxes)
IPRATROPIUM NEB SOLN	75ML (1 box)	300ML (4 boxes)
IPRATROPIUM/ALBUTEROL NEB SOLN	90 ML (1 box) for \$10	360ML (4 boxes) for \$36

ANTI-INFECTIVES

VIRAL

ACYCLOVIR 400mg	30 tablets for 10.00
VALACYCLOVIR 1gm	30 tablets for \$30.00

BACTERIAL/FUNGAL

FLUCONAZOLE 150mg	1 tablet for \$4.00	3 tablets for \$10.00
AMOXICILLIN 500mg	40 tablets for \$6.00	
CEPHALEXIN 500mg	40 tablets for \$6.00	
AZITHROMYCYN 250mg (Z-Pack)	6 tablets for \$4.00	
SULFAMETHOXAZOLE/TRIMETHOPRIM 800mg/160mg	20 tablets for \$8.00	
MUPIROCIIN 2% OINT	22g tube for \$8	
POLYMYXIN SULFATE /TRIMETHOPRIM EYE DROPS	5ml bottle for \$10	
NYSTATIN 100,000 UNITS CREAM	30g for \$8	



Low-Cost Rx Program Disclaimer

1. Proprietary Statement: Possession of this document establishes a responsibility not to share with other pharmacies, and agreement not to share with other pharmacies.
2. Prescription Program includes up to a 30-day supply and a 90-day supply of some covered generic drugs at commonly prescribed dosages. Higher dosages cost more. Prices for some drugs covered by the Prescription Program may be higher or vary. For important information regarding the Prescription Program, please see a Hall Family Pharmacy pharmacist.
3. Program pricing may be limited to select manufacturers of a covered drug and is available as long as supplies from such manufacturers are in stock at the dispensing pharmacy. Prepackaged drugs are covered only in unit sizes specified on Drug List. Other restrictions may apply. See a Hall Family Pharmacy pharmacist for details.
4. You may pay less or more than the Prescription Program price, depending on the terms of your health plan. No insurance necessary. Prescriber permission may be required to change a 30-day prescription to a 90-day prescription. Certain plans, including government-funded programs, may not cover a 90-day supply.
5. Prescription Program Effective date May 01, 2019. Please see a Hall Family Pharmacist for details, questions, and concerns.