

Rx Outreach only offers the medications listed on the back of this form. Please make sure a medication is on the list before you complete the form.

Referring Clinic Name: _____

STEP 1 – PATIENT SECTION

Patient Name _____ Date / /
mm dd yyyy

Date of Birth / / Patient ID/SSN _____
mm dd yyyy

Patient Address _____ City _____ State _____ Zip _____

Annual Household # of People
Phone _____ Income _____ in Household _____ M F

Food/Medications you are allergic to _____

Other Medications you are taking and Medical Conditions _____

Shipping address if different from above:

Name _____

Address _____ City _____ State _____ Zip _____

PLEASE NOTE THAT CONTROLLED SUBSTANCES CANNOT BE SHIPPED TO A P. O. BOX OR DOCTOR'S OFFICE. YOU MUST ENCLOSE A COPY OF A PHOTO ID AND SOCIAL SECURITY CARD/GREEN CARD IF YOU ARE ORDERING A CONTROLLED SUBSTANCE. MEDICATIONS WILL SHIP WITHIN 10-14 DAYS.

STEP 2 – PHYSICIAN SECTION

PLEASE DO NOT USE FORM BELOW FOR CONTROLLED SUBSTANCES – ATTACH SEPARATE PRESCRIPTION.

Rx 1 – Drug Name _____ Strength _____

Directions _____ Quantity 90 Days 180 Days Refills (Check One) 1 2 3

Rx 2 – Drug Name _____ Strength _____

Directions _____ Quantity 90 Days 180 Days Refills (Check One) 1 2 3

Rx 3 – Drug Name _____ Strength _____

Directions _____ Quantity 90 Days 180 Days Refills (Check One) 1 2 3

PHYSICIAN MUST SIGN BELOW. PLEASE ATTACH ANY ADDITIONAL PRESCRIPTIONS TO THIS FORM.

SUBSTITUTION PERMITTED (Physician Signature) / / Dispense as Written
mm dd yyyy

Physician Name _____ DEA Number _____ Phone _____

Address _____ City _____ State _____ Zip _____

STEP 3 – PAYMENT INSTRUCTIONS

Payment Options: Check or Money Order payable to Rx Outreach, or Credit Card (Visa, MasterCard or Discover only). Please do not send cash.

Payment Amount: Please refer to drug list and prices on the reverse side.

Credit Card Number: _____ Visa MasterCard Discover

Expiration Date /

I authorize Express Scripts Specialty Distribution Services, Inc. to charge this credit card for payment:

Name on Card: _____ Card Holder Signature _____

Event Code

777

Mail Form and Payment to:

Rx Outreach / Express Scripts Specialty Distribution Services, Inc./ P. O. Box 66536 / St. Louis, MO 63166-6536

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Rx Outreach® List of Available Medications

Tier 1: ALL MEDICATIONS AVAILABLE IN UP TO A 180-DAY SUPPLY FOR \$20

Rx Outreach Medication List	Available Strengths	Rx Outreach Medication List	Available Strengths
Acyclovir	200mg, 400mg, 800mg	Glyburide, micronized	1.5mg, 3mg, 6mg
Allopurinol	100mg, 300mg	Hydrochlorothiazide capsule	12.5mg capsule, 25mg and 50mg tablet
Atenolol	25mg, 50mg, 100mg	Indapamide	1.25mg, 2.5mg
Atenolol/Chlorthalidone	50/25mg, 100/25mg	Isoniazid	300mg
Benazepril	5mg, 10mg, 20mg, 40mg	Isosorbide Mononitrate ER	30mg, 60mg, 120mg
Benzotropine	0.5mg, 1mg, 2mg	Isosorbide Mononitrate	10mg, 20mg
Bisoprolol/HCTZ	2.5/6.25mg, 5/6.25mg, 10/6.25mg	Levothyroxine	mcg: 25, 50, 75, 88, 100, 112, 125, 137, 150, 175, 200, 300
Bumetanide	0.5mg, 1mg, 2mg	Lisinopril	2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg
Captopril	12.5mg, 25mg, 50mg, 100mg	Lisinopril/HCTZ	10/12.5mg, 20/12.5mg, 20/25mg
Carbamazepine	200mg	Lovastatin	10mg, 20mg, 40mg
Carvedilol	3.125mg, 6.25mg, 12.5mg, 25mg	Metformin ER	500mg, 750mg
Chlorthalidone	25mg, 50mg	Metformin	500mg, 850mg, 1,000mg
Clonidine	0.1mg, 0.2mg, 0.3mg	Metoclopramide	5mg, 10mg
Colchicine	0.6mg	Metoprolol Tartrate	25mg, 50mg, 100mg
Dicyclomine	10mg	Nadolol	20mg, 40mg, 80mg
Dicyclomine	20mg	Nitroglycerin sublingual	0.4mg
Digoxin	0.125mg, 0.25mg	Oxybutynin	5mg
Doxazosin	1mg, 2mg, 4mg, 8mg	Potassium Chloride ER	750mg (10MEQ)
Enalapril	2.5mg, 5mg, 10mg, 20mg	Pravastatin	10mg, 20mg, 40mg
Enalapril/HCTZ	5/12.5mg, 10/25mg	Prazosin	1mg, 2mg, 5mg
Estradiol	0.5mg, 1mg, 2mg	Prochlorperazine	5mg, 10mg
Estropipate	0.625(0.75mg), 1.25(1.5mg)	Propranolol	10mg, 20mg, 40mg, 80mg
Famotidine	20mg, 40mg	Ranitidine	150mg, 300mg
Folic Acid	1mg	Spirolactone	25mg
Furosemide	20mg, 40mg, 80mg	Sulfamethoxazole/Trimethoprim DS	80mg/160mg
Glimepiride	1mg, 2mg, 4mg	Terazosin	1mg, 2mg, 5mg, 10mg
Glipizide	5mg, 10mg	Triamterene/HCTZ	37.5/25mg, 50/25mg capsule; 37.5/25mg, 75/50mg tablet
Glyburide	1.25mg, 2.5mg, 5mg	Verapamil	40mg, 80mg, 120mg

Tier 2: AVAILABLE IN 90-DAY & 180-DAY SUPPLIES

		90 Day	180 Day			90 Day	180 Day
Afedtab CR tab (Nifedipine CR)	30mg, 60mg	\$50	\$95	Metolazone	2.5mg, 5mg	\$35	\$65
Alendronate (1/week dosage)	70mg (limit: 12 for 90; 24 for 180)	\$25	\$45	Metoprolol Succinate ER	25mg, 50mg, 100mg, 200mg	\$50	\$95
Amiodarone	200mg	\$30	\$55	Minocycline capsule	50mg, 75mg, 100mg	\$45	\$85
Amlodipine	2.5mg, 5mg, 10mg	\$25	\$45	Minocycline tablet	50mg, 75mg	\$45	\$85
Benazepril/HCTZ	5/6.25mg, 10/12.5mg, 20/12.5mg, 20/25mg	\$25	\$45	Nitroglycerin SA capsule	2.5mg, 6.5mg, 9mg	\$45	\$85
Bicalutamide tablet	50mg	\$35	\$65	Omeprazole	10mg, 20mg, 40mg	\$35	\$65
Carbidopa / Levodopa SR	25/100mg, 50/200mg	\$45	\$85	Ondansetron	4mg, 8mg	\$50	\$95
Carbidopa / Levodopa	10/100mg, 25/100mg, 25/250mg	\$45	\$85	Ondansetron ODT	4mg, 8mg	\$50	\$95
Cilostazol	50mg, 100mg	\$30	\$55	Pentoxifyline ER	400mg	\$30	\$55
Clindamycin	150mg	\$45	\$85	Phenytoin	100mg	\$45	\$85
Diltiazem ER ((24hr) (Dilt-XR)	120mg, 180mg, 240mg	\$40	\$75	Potassium Chloride ER	1500mg (20MEQ)	\$30	\$55
Diltiazem ER (Dilt-CD)	120mg, 180mg, 240mg, 300mg	\$40	\$75	Previfem™	28's (limit: 3 for 90; 6 for 180)	\$35	\$65
Divalproex NA DR	125mg, 250mg, 500mg	\$45	\$85	Propafenone	150mg, 225mg, 300mg	\$40	\$75
Fexofenadine	30mg, 60mg, 180mg	\$50	\$95	Propylthiouracil	50mg	\$35	\$65
Finasteride	5mg	\$50	\$95	Quinapril	5mg, 10mg, 20mg, 40mg	\$30	\$55
Fluticasone nasal spray	50mcg (limit: 4 for 90; 8 for 180)	\$35	\$65	Ramipril	1.25mg, 2.5mg, 5mg, 10mg	\$25	\$45
Gabapentin	100mg, 300mg, 400mg, 600mg, 800mg	\$35	\$65	Ropinirole HCL tablet	0.25mg, 0.5mg, 1mg, 2mg	\$45	\$85
Gemfibrozil	600mg	\$30	\$55	Simvastatin	5mg, 10mg, 20mg, 40mg, 80mg	\$25	\$45
Glipizide ER	2.5mg, 5mg, 10mg	\$35	\$65	Tamoxifen	10mg, 20mg	\$25	\$45
Glyburide/Metformin	1.25/250mg, 2.5/500mg, 5/500mg	\$30	\$55	Theophylline ER	100mg, 200mg, 300mg	\$30	\$55
Hydralazine	10mg, 25mg, 50mg	\$25	\$45	Ticlopidine	250mg	\$35	\$65
Hydroxychloroquine	200mg	\$25	\$45	Topiramate tablet	25mg, 50mg, 100mg, 200mg	\$35	\$65
Labetalol	100mg, 200mg, 300mg	\$30	\$55	Trandolapril	1mg, 2mg, 4mg	\$30	\$55
Levetiracetam tablet	250mg, 500mg, 750mg	\$50	\$95	Tri-Previfem™	28's (limit: 3 for 90; 6 for 180)	\$35	\$65
Lamotrigine tablet	25mg, 100mg, 150mg, 200mg	\$40	\$75	Verapamil SR	120mg, 180mg, 240mg	\$35	\$65
Meclizine	12.5mg, 25mg	\$30	\$55				

Tier 3: AVAILABLE IN A 90-DAY SUPPLY ONLY

Alprazolam (CS)	0.25mg, 0.5mg, 1mg, 2mg	\$35	Etodolac	200mg, 300mg	\$30	Oxaprozin	600mg	\$50
Amitriptyline	mg: 10, 25, 50, 75, 100, 150	\$20	Etodolac	400mg, 500mg	\$30	Paroxetine	10mg, 20mg, 30mg, 40mg	\$20
Baclofen	10mg, 20mg	\$15	Fibricor™	105mg	\$15	Piroxicam	10mg, 20mg	\$15
Belladonna/Phenobarbital	N/A	\$20	Fluoxetine	10mg, 20mg, 40mg	\$15	Prednisone	mg: 1, 2.5, 5, 10, 20, 50	\$20
Bupropion HCL tab	75mg, 100mg	\$30	Haloperidol	0.5g, 1mg, 2mg, 5mg	\$25	Qualaquin®	324mg	\$15
Bupropion HCL XL tab	150mg, 300mg	\$65	Ibuprofen	400mg, 600mg, 800mg	\$20	Risperidone tablet	mg: 0.25, 0.5, 1, 2, 3, 4	\$45
Buspione	5mg, 10mg, 15mg, 30mg	\$20	Lithium Carbonate	300mg	\$25	Sertraline	25mg, 50mg, 100mg	\$35
Citalopram	10mg, 20mg, 40mg	\$20	Lorazepam (CS)	0.5mg, 1mg, 2mg	\$35	Sumatriptan Succ tab	25mg, 50mg, 100mg	\$35
Clonazepam (CS)	0.5mg, 1mg, 2mg	\$35	Medroxyprogesterone	2.5mg, 5mg, 10mg	\$15	Temazepam (CS)	15mg, 30mg	\$35
Colcrys™	0.6mg	\$15	Meloxicam	7.5mg, 15mg	\$20	Tizanidine	2mg, 4mg	\$30
Cyclobenzaprine	10mg	\$25	Methotrexate	2.5mg	\$25	Tramadol (CS)	50mg	\$35
Diazepam (CS)	2mg, 5mg, 10mg	\$35	Mirtazapine	15mg, 30mg, 45mg	\$30	Trazodone	50mg, 100mg, 150mg	\$20
Diclofenac EC	25mg, 50mg, 75mg	\$25	Nabumetone	500mg, 750mg	\$35	Venlafaxine	mg: 25, 37.5, 50, 75, 100	\$45
Diclofenac ER	100mg	\$40	Naproxen	250mg, 375mg, 500mg	\$20	Warfarin	mg: 1, 2, 2.5, 3, 4, 5, 6, 7.5, 10	\$25
Diphenoxylate/Atropine (CS)	2.5/0.025mg	\$35	Naproxen Sodium	550mg	\$25	Zaleplon (CS)	5mg, 10mg	\$35
Doxepin	mg: 10, 25, 50, 75, 100	\$15	Nortriptyline	10mg, 25mg, 50mg, 75mg	\$20	Zolpidem (CS)	5mg, 10mg	\$35

PRICE BY QUANTITY

Hydroxyurea 500mg is priced by quantity: 180 capsules = \$45; 270 capsules = \$65; 360 capsules = \$85; 450 capsules = \$105; 540 capsules = \$120; 630 capsules = \$135

All prescriptions are evaluated by a pharmacist before being filled. The quantity may be limited based on dose restrictions set by therapeutic guidelines and state regulations. (CS) Controlled Substance Rev 11/09

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