

Please see website for current medication list.

MAKING MEDICATION AFFORDABLE

Buy with confidence from
America's largest non-profit
pharmacy.

There are no additional membership fees. We believe in
transparent pricing. At Rx Outreach, the price you see is the
price you actually pay!



Easy to join:

Find out if your medication is available through Rx Outreach.

Have your doctor's office e-prescribe your prescription.

Enroll online, by phone, or mail the completed application.

The Rx Outreach price may be lower than your co-pay.

Rx Outreach
P.O. Box 66536
St. Louis, MO 63166-6536
Phone: 1-888-RXO-1234 (796-1234)
Fax: 1-800-875-6591
Hours: Mon-Fri, 7:00 am - 5:30 pm CST

Benefits include:

Free membership, whether insured,
under-insured, or uninsured

Free pharmacist consultation

Free home delivery

No coupons or discount cards needed

Transparent low prices, convenient auto-pay, and
auto-renew options available

Rx Outreach is accredited by the following:



Step 1: Complete your Membership Application

First Name: _____ MI: _____ Last Name: _____

Date of Birth: ____/____/____ Email: _____ ☐ Opt in for emails

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

☐ Male ☐ Female☐ Cell ☐ Home ☐ Opt in for text messages**MEDICAL CONDITION(s)** Please check all that apply☐ Heart Disease ☐ Alzheimer's ☐ Arthritis ☐ Diabetes ☐ Cancer ☐ Other

Medication allergies (if applicable): _____

Medication(s) you are currently taking: _____

ELIGIBILITY**Income Information:**

Annual household income: \$_____ Number of people in your household, including you: _____

You must sign this form before we can send your medication(s). I attest that the information provided in this application is complete and accurate. This authorization or a copy shall be valid for 12 months from the date of the signature. I understand that Rx Outreach reserves the right to request income verification from me or refuse my application based on any misuse, abuse or illegal distribution of any product in this program. I will not seek reimbursement of any fee I pay to Rx Outreach from my health insurance, including Medicaid, Medicare or similar programs.

Signature Required: _____ **Date:** ____/____/____
(If advocate/guardian signing on behalf of patient, please complete section below)**Event Code**
788

Patient's advocate / guardian contact (if applicable) _____

Relationship: _____ Phone: (____) _____

Scan the code using your smartphone
camera app or visit the website**rxoutreach.org/find-your-medication****TO ORDER CONTROLLED SUBSTANCES, YOU MUST ATTACH A COPY
OF YOUR GOVERNMENT ISSUED PHOTO ID CARD.****To protect your safety, controlled substances and expedited shipping must be signed for upon delivery.**
Controlled substances are identified by (CS) on the Medication List.

*You can mail in the application and prescription or fax to 1-800-875-6591.
(Faxed prescriptions must come directly from the doctor's office)*

Disease State Medication List

Allergies / Asthma

Albuterol Inhalation Solution 0.083%
Albuterol Sulfate HFA Inhaler
Azelastrine Nasal Spray
Budesonide Inhalation Solution
Budesonide EC
Fluticasone / Salmeterol Diskus
Fluticasone / Salmeterol Inhaler
Fluticasone Nasal Spray
Hydrocortisone
Hydroxyzine HCL
Hydroxyzine Pamoate
Ipratropium / Albuterol Inhalation Solution
Levalbuterol Solution
Levocetirizine
Montelukast
Olopatadine 0.2% Solution
Olopatadine Nasal Spray
Theophylline ER
Zafirlukast

Anxiety

Alprazolam ER (CS)
Alprazolam (CS)
Buspirone
Chlordiazepoxide (CS)
Clonazepam (CS)
Diazepam (CS)
Lorazepam (CS)
Meprobamate

Antibiotic/ Antiviral/ Antifungal

Acyclovir
Clindamycin
Clotrimazole / Betamethasone Cream
Doxycycline Hyclate
Famciclovir
Fluconazole
Isoniazid
Metronidazole Gel
Minocycline
Nyamyc® Topical Powder
Nystatin
Sulfamethoxazole / Trimethoprim DS
Valacyclovir

Arthritis/Pain

Celecoxib
Diclofenac Sodium EC
Diclofenac Sodium ER
Diclofenac Sodium 1% Gel
Etofolac
Hydroxychloroquine
Ibuprofen
Indomethacin

Indomethacin ER
Leflunomide
Lidocaine 2% Viscous Solution
Lidocaine 5% Patch
Meloxicam
Methotrexate
Nabumetone
Naproxen
Tramadol ER (CS)
Tramadol (CS)
Tramadol / Acetaminophen (CS)

Cancer

Anastrozole
Bicalutamide
Capecitabine
Exemestane
Imatinib
Letrozole
Nilandron
Panretin® Gel 0.1%
Tamoxifen

Cardiovascular

Amlodipine / Benazepril
Amlodipine / Valsartan / HCTZ
Amlodipine / Valsartan
Amlodipine / Olmesartan
Amlodipine
Atenolol
Atenolol / Chlorthalidone
Benazepril / HCTZ
Benazepril
Bisoprolol / HCTZ
Bumetanide
Candesartan / HCTZ
Candesartan
Captopril
Carvedilol
Cilostazol
Clonidine
Clonidine Patch
Chlorthalidone
Clopidogrel
Digoxin
Diltiazem ER (24hr) (Dilt-XR)
Diltiazem ER (24hr) (Dilt-CD)
Dofetilide
Doxazosin Mesylate
Dutoprol
Dyrenium
Enalapril / HCTZ
Enalapril
Eplerenone
Felodipine ER
Flecainide
Furosemide
Hydralazine
Hydrochlorothiazide
Indapamide
Irbesartan / HCTZ
Irbesartan
Isosorbide
Mononitrate ER
Isosorbide
Mononitrate
Jantoven® (Warfarin)

Klor-Con Packet
Labetalol
Lanoxin
Lisinopril
Lisinopril / HCTZ
Losartan / HCTZ
Losartan
Metolazone
Metoprolol
Metoprolol ER (CS)
Metoprolol Tartrate
Metoprolol
Tartate/HCTZ
Midodrine
Nifedipine
Nifedipine ER
Nitroglycerin SA
Nitroglycerin SL
Olmesartan / HCTZ
Olmesartan
Pacerone
Pentoxifylline ER
Potassium Chloride ER
Potassium Citrate ER
Prasugrel
Prazosin
Propafenone
Propranolol ER
Propranolol
Quinapril
Quinapril / HCTZ
Ramipril
Ranolazine ER
Sotalol
Spironolactone / HCTZ
Spironolactone
Telmisartan
Telmisartan / HCTZ
Terazosin
Trandolapril
Triamterene / HCTZ
Valsartan / HCTZ
Valsartan
Verapamil ER (24hr)
Verapamil SR (12hr)
Verapamil

Cholesterol / Triglycerides

Atorvastatin
Colesevelam
Colestipol
Micronized Ezetimibe
Fenofibrate
Fenofibrate
Fenofibric Acid DR
Gemfibrozil
Lovastatin
Niacin ER
Omega-3 Acid Ethyl Esters
Pravastatin
Prevalite® Powder
Rosuvastatin
Simvastatin

Dermatology

Acyclovir Ointment
Alclometasone Dipropionate Cream
Betamethasone Dipropionate Cream, Augmented

Clobetasol Propionate Cream
Desonide Ointment
Econazole Cream
Fluocinonide
Topical Solution
Halobetasol Ointment
Mometasone Cream
Mometasone Ointment
Mupirocin 2% Ointment
Nystatin / Triamcinolone Ointment
Tazarotene Cream
Tretinoin Cream
Triamcinolone Cream
Triamcinolone Ointment

Diabetes

See OTC list for Diabetic Supplies
Glimepiride
Glipizide ER
Glipizide
Glyburide
Glyburide, micronized
Glyburide/Metformin
Insulin Syringes (Prodigy®)
Metformin ER
Metformin
Pioglitazone
Repaglinide

Dry Mouth

Cevimeline
Salagen®

Erectile Dysfunction

Sildenafil
Tadalafil

Gastrointestinal

Balsalazide Disodium
Dicyclomine
Difenoxylate / Atropine (CS)
Donnatal® Elixir (CS)
Mint or Grape
Donnatal® (CS)
Esomeprazole
Famotidine
Lactulose Oral Solution
Lansoprazole DR
Loperamide
Meclizine
Mesalamine DR
Metoclopramide
Omeprazole
Ondansetron ODT
Ondansetron
Pantoprazole
Prochlorperazine
Promethazine
Rabeprazole DR
Sucralfate
Sulfasalazine
Sulfasalazine DR
Ursodiol

Gout

Allopurinol
Febuxostat

Hepatitis B

Entecavir
Tenofovir
HIV
Emtricitabine/ Tenofovir
Efavirenz/ Emtricitabine/ Tenofovir
Zidovudine

Hormones

Clomiphene
Estradiol 0.01% Cream
Estradiol
Medroxyprogesterone
Norethindrone / Ethinyl Estradiol
Norethindrone
Acetate
Norethindrone
Progesterone
Sprintec®
Testosterone Cypionate Solution (CS)
Testosterone Gel Packet (CS)
Testosterone Gel Pump (CS)
Testosterone Gel Tube (CS)
Tri-Sprintec®

Immunosuppressant

Azathioprine
Mycophenolate Mofetil
Mycophenolic Acid DR
Prednisone
Tacrolimus

Insomnia

Eszopiclone (CS)
Temazepam (CS)
Zaleplon (CS)
Zolpidem ER (CS)
Zolpidem (CS)

Kidney

Calcitriol
Calcium Acetate
Sevelamer

Mental Health

Amitriptyline
Amoxapine
Aripiprazole
Bupropion SR
Bupropion
Bupropion XL
Chlorpromazine
Clomipramine
Citalopram
Desvenlafaxine ER
Doxepin
Duloxetine DR
Escitalopram
Fluoxetine
Fluvoxamine
Haloperidol
Lithium

Lithium ER
Lorazepam
Mirtazapine
Nortriptyline
Olanzapine
Paroxetine ER
Paroxetine
Perphenazine
Phenelzine
Quetiapine ER
Quetiapine
Risperidone
Sertraline
Trazodone
Venlafaxine ER
Venlafaxine
Ziprasidone

Miscellaneous

Benzonate
Hydroxyurea
Phentermine (CS)
Pyridostigmine BR

Muscle Relaxers

Baclofen
Chlorzoxazone
Cyclobenzaprine
Methocarbamol
Tizanidine

Neurology

Amantadine
Armodafinil (CS)
Atomoxetine
Banzel
Benzotropine
Bromocriptine
Carbamazepine ER
Carbamazepine
Carbidopa / Levodopa SR
Carbidopa / Levodopa
Carbidopa / Levodopa / Entacapone
Dalfampridine ER
Dexmethylphenidate (CS)
Dextroamphetamine Sulfate ER (CS)
Dextroamphetamine - Amphetamine ER (CS)
Dextroamphetamine - Amphetamine (CS)
Divalproex DR
Divalproex ER
Donepezil
Eletriptan
Gabapentin (CS)
Galantamine
Galantamine ER
Guanfacine ER
Kapvay
Lamotrigine ER
Lamotrigine
Levetiracetam ER
Levetiracetam
Memantine
Methylphenidate CD (CS)
Methylphenidate LA (CS)
Methylphenidate (CS)

Modafinil (CS)
Oxcarbazepine
Phenytoin ER
Pramipexole ER
Pramipexole
Pregabalin (CS)
Primidone
Rasagiline
Rivastigmine
Tartrate
Rizatriptan
Ropinirole ER
Ropinirole
Sumatriptan
Topiramate
Topiramate ER
Valproic Acid
Zonisamide

Nutritional/ Metabolic

Folic Acid
PNV Prenatal Multivitamin
Polystyrene Sulfonate Powder

Ophthalmic

Brimonidine 0.2% Solution
Dorzolamide 2% Solution
Latanoprost 0.005% Solution

Osteoporosis

Alendronate
Oxandrolone (CS)
Raloxifene
Risedronate
Vitamin D2

Prostate

Alfuzosin ER
Dutasteride
Finasteride
Silodosin
Tamsulosin
Uroxatral®

Substance Use Disorder

Acamprosate
Calcium DR
Buprenorphine / Naloxone (CS)
Bupropion XL
Naltrexone

Thyroid

Levothyroxine
Liothyronine
Methimazole
Propylthiouracil

Urinary

Bethanechol
Darifenacin ER
Oxybutynin ER
Oxybutynin
Solifenacin
Tolterodine ER
Tolterodine
Trosipium

(CS) = Controlled Substance Rev. 10.21



Can't find your medication?

Scan the code using your smart-phone camera app or visit the website.

An updated list of all our medications and prices are available online at rxoutreach.org or call us at 1-888-RXO-1234.

No prescription is needed for these medications. Please indicate all medications you would like to order on the prescription submission form. OTC orders will be applied to approved payment method. Prices subject to change.

First Name: _____ MI: _____ Last Name: _____

Date of Birth: ____/____/____ Email: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

Over the Counter Medications and Products

Product			Price	Quantity to Order
Allergies				
Budesonide Nasal Spray	32mcg	Rhinocort® Allergy	\$22 per bottle (min. 2 bottles)	
Cetirizine Tablet	10mg	Zyrtec®	\$10 per bottle of 100 tablets (min. 2 bottles)	
Fexofenadine Tablet	60mg	Allegra®	\$40 per bottle of 100 tablets	
Fexofenadine Tablet	180mg	Allegra®	\$40 per bottle of 100 tablets	
Loratadine Tablet	10mg	Claritin®	\$10 per bottle of 100 tablets (min. 2 bottles)	
Diabetic Supplies				
Glucose Monitor (ProdigyAutocode®)			One Free Monitor Per Year* (with order of test strips)	
Glucose Control Solution Low (Prodigy®)	4mL bottle		\$5 per bottle (Vial)	
Glucose No Coding Test Strips (Prodigy®)	Box of 50 strips		\$15 per box	
Glucose TwistTop Lancets 28G (Prodigy®)	Box of 100 lancets		\$5 per box (min. 2 boxes)	
Eye Drops				
Ketotifen Ophthalmic Solution 0.025%	5mL bottle	Zaditor®	\$9 per bottle	
Pain Relievers				
Aspirin EC Coated Tablet	325mg		\$7 per bottle of 100 tablets	
Aspirin EC Coated Tablet	81mg		\$9 per bottle of 120 tablets	
Capsaicin Cream 0.025%	60gm tube		\$12 per tube	
Supplements				
Docusate Sodium	250mg		\$9 per bottle of 100 tablets	
Ferrous Sulfate EC Tablet	325mg		\$6 per bottle of 100 tablets (min. 2 bottles)	
Magnesium Oxide Tablet	400mg		\$8 per bottle of 120 tablets	
Melatonin Tablet	5mg		\$7 per bottle of 60 tablets (min. 2 bottles)	
Niacin SA Capsule	250mg		\$9 per bottle of 100 capsules	
Vitamin B-6 Tablet	50mg		\$11 per bottle of 100 tablets	
Vitamin B-6 Tablet	100mg		\$7 per bottle of 100 tablets	
Vitamin D3 Capsule	50,000IU		\$15 per bottle of 12 capsules	
Vitamin D3 Tablet	400IU		\$11 per bottle of 100 tablets	

*restrictions apply

Rev. 10.21

rxoutreach.org

Join online through our website,
 or call 1-888-RXO-1234 (796-1234),
 or fill out this application and mail.

Rx Outreach

P.O. Box 66536, St. Louis, MO 63166-6536

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Fax: 1-800-875-6591
Hours: Mon-Fri, 7:00 am -5:30 pm CST

Step 2: Submit Your Prescription

Full Name: _____

D.O.B. _____ Phone (____) _____

☐ **Option A: Your Doctor**
will send prescription
Ask your doctor to send your prescription to
Rx Outreach:

- ① By E-Script
- ② By Phone: 1-888-796-1234
- ③ By Fax: 1-800-875-6591

☐ **Option B: I will mail in the**
Rx Outreach Membership
Application and my prescription

Rx Outreach, P.O. Box 66536
St. Louis, MO 63166-6536

☐ **Option C: Rx Outreach requests transfer from another pharmacy.**
Please list the medications that you would like transferred from another pharmacy.

Pharmacy Name _____ (____) _____ (____) _____
Phone Number Fax Number

Doctor's Name _____

Medication Name	Strength	Quantity Requested

☐ **Option D: Rx Outreach requests prescription from your doctor.**
Please list the medications that you would like requested from your doctor.

Doctor's Name _____ (____) _____ (____) _____
Phone Number Fax Number

Medication Name	Strength	Quantity Requested

Step 3: Choose a Payment Method

Pay by Credit, Debit Card, or FSA.

Cardholder's Name _____

Credit Card Number _____

Expiration Date ____/____/____ (MM/YY) CVV ____

I authorize Rx Outreach to charge this credit card for
payment on my **first** order up to \$ _____

OR **Pay by check or Money Order.**

☐ I will make a payment by check
or money order, and mail it to:

Rx Outreach
P.O. Box 66536
St. Louis, MO 63166-6536

LET US HELP YOU AFFORD YOUR MEDICATION.



Rev. 1.21

Stay healthy and safe with Rx Outreach!

As a non-profit, mail-order pharmacy, Rx Outreach is uniquely positioned to help reduce the impact and spread of the Coronavirus (COVID-19) by providing affordable medication mailed directly to your home. Membership is traditionally reserved for those earning less than 400% of the Federal Poverty Level, but we have temporarily expanded the guidelines on our medication program to assist individuals and families who are facing severe financial hardships because of COVID-19. Please call us or visit our website for details.

We hope you will love our affordable medication prices, the ease of ordering, and the convenience of having your medication shipped for free directly to your home. We look forward to the opportunity to serve you!

Rx Outreach is accredited by the following:



www.rxoutreach.org

For more information, visit our website
or call 1-888-RXO-1234 (796-1234)