



30-day supply just
\$4

90-day supply just
\$10

Hy-Vee Pharmacy

Available at Hy-Vee Food and Drugstores

A

GENERIC NAME	BRAND NAME	QTY	FORM
ACYCLOVIR 200MG	ZOVIRAX®	30	CAPSULE
ALBUTEROL 2MG/5ML	PROVENTIL®	120	SYRUP
ATENOLOL 25MG	TENORMIN®	30	TABLET
ATENOLOL 50MG	TENORMIN®	30	TABLET
ATENOLOL 100MG	TENORMIN®	30	TABLET

B

BACLOFEN 10MG	LIORESAL®	30	TABLET
BENAZEPRIL 5MG	LOTENSIN®	30	TABLET
BENAZEPRIL 10MG	LOTENSIN®	30	TABLET
BENAZEPRIL 20MG	LOTENSIN®	30	TABLET
BENAZEPRIL 40MG	LOTENSIN®	30	TABLET
BENZONATATE 100MG	TESSALON®	14	CAPSULE
BISOPROLOL/HCTZ 5-6.25MG	ZIAC®	30	TABLET
BISOPROLOL/HCTZ 10-6.25MG	ZIAC®	30	TABLET
BUSPIRONE 5MG	BUSPAR®	60	TABLET
*† BUSPIRONE 10MG	BUSPAR®	60	TABLET

C

CARVEDILOL 3.125MG	COREG®	60	TABLET
CARVEDILOL 6.25MG	COREG®	60	TABLET
CARVEDILOL 12.5MG	COREG®	60	TABLET
CARVEDILOL 25MG	COREG®	60	TABLET
CHLORHEXIDINE GLUCONATE 0.12%	PERIDEX®	473	SOLUTION
CITALOPRAM 20MG	CELEXA®	30	TABLET
CITALOPRAM 40MG	CELEXA®	30	TABLET
CLONIDINE 0.1MG	CATAPRES®	30	TABLET
CLONIDINE 0.2MG	CATAPRES®	30	TABLET
CYCLOBENZAPRINE 5MG	FLEXERIL®	30	TABLET
CYCLOBENZAPRINE 10MG	FLEXERIL®	30	TABLET

D

DEXAMETHASONE 0.5MG	DECADRON®	30	TABLET
DEXAMETHASONE 0.75MG	DECADRON®	12	TABLET
DEXAMETHASONE 4MG	DECADRON®	6	TABLET
DICLOFENAC SODIUM ER 75MG	VOLTAREN XR®	30	TABLET
DICYCLOMINE 10MG	BENTYL®	90	CAPSULE
DICYCLOMINE 20MG	BENTYL®	60	TABLET

E

ENALAPRIL MALEATE/HCTZ 5-12.5MG	VASERETIC®	30	TABLET
ESTRADIOL 0.5MG	ESTRACE®	30	TABLET
ESTRADIOL 1MG	ESTRACE®	30	TABLET
ESTRADIOL 2MG	ESTRACE®	30	TABLET

F

FAMOTIDINE 20MG	PEPCID	60	TABLET
FLUOXETINE 10MG	PROZAC®	30	CAPSULE
FLUOXETINE 20MG	PROZAC®	30	CAPSULE
*† FLUOXETINE 40MG	PROZAC®	30	CAPSULE
FOLIC ACID 1MG	FOLVITE®	30	TABLET
FUROSEMIDE 20MG	LASIX®	30	TABLET
FUROSEMIDE 40MG	LASIX®	30	TABLET
FUROSEMIDE 80MG	LASIX®	30	TABLET

G

GLIMEPIRIDE 1MG	AMARYL®	30	TABLET
GLIMEPIRIDE 2MG	AMARYL®	30	TABLET
GLIMEPIRIDE 4MG	AMARYL®	30	TABLET
GLIPIZIDE 5MG	GLUCOTROL®	30	TABLET
GLIPIZIDE 10MG	GLUCOTROL®	60	TABLET
GLYBURIDE MCR 3MG	GLYNASE PRESTAB®	30	TABLET
GLYBURIDE MCR 6MG	GLYNASE PRESTAB®	30	TABLET
GUANFACINE 1MG	TENEX®	30	TABLET

H

HYDRALAZINE 10MG	APRESOLINE®	30	TABLET
*† HYDRALAZINE 25MG	APRESOLINE®	30	TABLET
† HYDROCHLOROTHIAZIDE 12.5MG	MICROZIDE®	30	CAPSULE
HYDROCHLOROTHIAZIDE 25MG	HYDRODIURIL®	30	TABLET
HYDROCHLOROTHIAZIDE 50MG	HYDRODIURIL®	30	TABLET
HYDROCORTISONE 1%	HYTONE®	30	CREAM

L

LISINAPRIL 2.5MG	PRINIVIL®/ZESTRIL®	30	TABLET
LISINAPRIL 5MG	PRINIVIL®/ZESTRIL®	30	TABLET
LISINAPRIL 10MG	PRINIVIL®/ZESTRIL®	30	TABLET
LISINAPRIL 20MG	PRINIVIL®/ZESTRIL®	30	TABLET
LISINAPRIL/HCTZ 10-12.5MG	PRINZIDE®/	30	TABLET
ZESTORETIC®			
LISINAPRIL/HCTZ 20-12.5MG	PRINZIDE®/	30	TABLET
ZESTORETIC®			
LISINAPRIL/HCTZ 20-25MG	PRINZIDE®/	30	TABLET
ZESTORETIC®			
LITHIUM CARBONATE 300MG	ESKALITH®	90	CAPSULE
LORATADINE 10MG	CLARITIN®	30	TABLET
*† LOVASTATIN 10MG	MEVACOR®	30	TABLET
*† LOVASTATIN 20MG	MEVACOR®	30	TABLET

M

MAGNESIUM OXIDE 400MG	MAG-OX®	30	TABLET
MEDROXYPROGESTERONE 10MG	PROVERA®	10	TABLET
MELOXICAM 7.5MG	MOBIC®	30	TABLET
MELOXICAM 15MG	MOBIC®	30	TABLET
METFORMIN 500MG	GLUCOPHAGE®	60	TABLET
METFORMIN 850MG	GLUCOPHAGE®	60	TABLET
† METFORMIN 1000MG	GLUCOPHAGE®	60	TABLET
METFORMIN ER 500MG	GLUCOPHAGE XR®	60	TABLET
METOCLOPRAMIDE 10MG	REGLAN®	60	TABLET
METOPROLOL TARTRATE 25MG	LOPRESSOR®	60	TABLET
METOPROLOL TARTRATE 50MG	LOPRESSOR®	60	TABLET
METOPROLOL TARTRATE 100MG	LOPRESSOR®	60	TABLET

N

* NAPROXEN 375MG	NAPROSYN®	60	TABLET
NORTRIPTYLINE 10MG	PAMELOR®	30	CAPSULE

P

*† PAROXETINE 10MG	PAXIL®	30	TABLET
*† PAROXETINE 20MG	PAXIL®	30	TABLET
PREDNISONE 2.5MG	DELTAONE®	30	TABLET
PREDNISONE 5MG	DELTAONE®	30	TABLET
PROCHLORPERAZINE 10MG	COMPAZINE®	30	TABLET
PROMETHAZINE 25MG	PHENERGAN®	12	TABLET
PROMETHAZINE 6.25MG/5ML	PHENERGAN®	120	SYRUP
PROMETHAZINE DM	PHENERGAN DM®	120	SYRUP

R

RANITIDINE 150 MG	ZANTAC®	30	TABLET
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S

SODIUM FLUORIDE CHEWABLE 0.25MG	LURIDE®	30	TABLET
SOTALOL HCL 80MG	BETAPACE®	30	TABLET
SPIRONOLACTONE 25MG	ALDACTONE®	30	TABLET

T

TERAZOSIN 1MG	HYTRIN®	30	CAPSULE
TERAZOSIN 2MG	HYTRIN®	30	CAPSULE
TERAZOSIN 5MG	HYTRIN®	30	CAPSULE
TERAZOSIN 10MG	HYTRIN®	30	CAPSULE
*† TERBINAFFINE 250MG	LAMISIL®	30	TABLET
TIMOLOL MALEATE 0.25%	TIMOPTIC®	5	OPHTHALMIC DROP
TRAZODONE 50MG	DESYREL®	30	TABLET
† TRIAMCINOLONE 0.025%	ARISTOCORT®	15	CREAM
† TRIAMCINOLONE 0.10%	ARISTOCORT®	15	OINTMENT
TRIHYPHENIDYL 2MG	ARTANE®	60	TABLET

V

VERAPAMIL 80MG	CALAN®	30	TABLET
VERAPAMIL 120MG	CALAN®	30	TABLET

*Due to state laws, these drugs are not covered under the 30-day program in MN and WI; however, they have been competitively priced.

†Due to state laws, these drugs are not covered under the 90-day program in MN and WI; however, they have been competitively priced.

Please ask your pharmacist for specific pricing in these states.

\$4 prescriptions are for up to a 30-day supply at commonly prescribed dosages. Drug list subject to change. This list was created on 03/27/2017. Please visit our website at www.hy-vee.com for a current list of affected drugs and states.