

Your Guide

Available Services & Detailed Program Information for Access to Care Members

2225 Enterprise Drive, Suite 2507
Westchester IL 60154
708-531-0680

info@accesstocare.org | accesstocare.org



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You can find current versions of all Access to Care member documents, benefit information, and answers to Frequently Asked Questions (FAQs) on our website: <https://accesstocare.org/member-portal/benefits-documents-faqs/>

About the Access to Care Program

Access to Care (ATC) works with doctors across suburban Cook County. These doctors care for ATC members. Your ATC doctor will provide basic health care services, also called “primary care”. Please read this “Your Guide” carefully to understand what is offered to you—as an Access to Care member. If you have questions after reading “Your Guide”, call us at 708-531-0680 and we will help.

Services Included for ATC Members:

- Unlimited visits to your Access to Care doctor
- Most prescription drugs prescribed by your Access to Care doctor
- Laboratory tests, x-rays, breast ultrasounds, and mammograms ordered by your ATC doctor

Medical services, tests, x-rays, mammograms and/or prescriptions ordered by any doctor other than your assigned Access to Care doctor are not covered. **Non-covered services or procedures will not be paid for by the program regardless of whether your Access to Care doctor performs or orders it.**


Services Not Covered by the Access to Care Program:

- Emergency room care
- Hospital care
- Vision or dental services
- Care provided by non-primary care physician or specialist
- Well baby care and child care
- Physicals
- Family planning/birth control
- Care provided by an obstetrician or gynecologist
- Prenatal care
- Sexually transmitted disease diagnosis and treatment
- Ultrasounds and IVPs, except Breast Ultrasounds
- CT scans or MRI tests
- Over-the-counter drugs and equipment, except diabetic testing supplies
- Completion of disability, worker compensation, employment, or school forms

If you have questions about whether a procedure or service is covered by ATC, call 708-531-0680 **before** you have the procedure done. **You will be responsible to pay for non-covered procedures.**

Member Identification Card

You can begin to use your Access to Care member identification (ID) card immediately after receiving it. Call your doctor’s office (see “Physician Phone” and the arrow below) to make your first appointment. You will show your ID card to receive ATC services and prescriptions. Only you can use your ID card. If you need to replace your card, the cost is \$5 per card. Here is an example of how your ID card will look:

ACCESS TO CARE®		
SUBURBAN PRIMARY HEALTH CARE COUNCIL		
2225 ENTERPRISE DR. #2507, WESTCHESTER, IL 60154 (708) 531-0680		
SAMPLE NAME	01/01/1999	M
<small>Member Name</small>	<small>Birthdate</small>	<small>Sex</small>
000000001A	123: SAMPLE DOCTOR'S OFFICE	
<small>Identification No.</small>	<small>Location No.</small>	<small>Physician Name</small>
01/01/2024	Rx = B30/40 G15	(708) 555-5555
<small>Expiration Date</small>	<small>Co-Pay</small>	<small>Physician Phone</small>
		<small>*MANDATORY GENERICS</small>
SERVE YOU 		Rx Group No. 18100



Enrollment Period

Your enrollment in the Access to Care program will automatically expire on the expiration date shown on your ID card unless you have re-enrolled by that time. You should apply for re-enrollment one month before the expiration date. You can now re-enroll by mail or online. Go to:

www.accesstocare.org/application and fill out the application. When you re-enroll, we will check to make sure you are still eligible.

Fees for ATC Program Services



Doctor Visits

\$5

For each office visit to your Access to Care doctor.

See "Doctor Services" below.



Prescriptions

\$15 - \$40

For each prescription.

See "Pharmacy Services" below.



Lab Tests & X-Rays

\$5

Each lab and/or x-ray procedure.

See "Lab and X-Ray Services" below.

You should be prepared to pay these fees in full at the time you receive services.

Doctor Services

We have a list of doctors who participate in the Access to Care program. Each member will be assigned a doctor or physician site. You can see any family medicine doctor at that site. Important to remember:

- Under certain circumstances, you may be transferred to another ATC doctor. If you or your doctor request a transfer to another doctor, it may take up to 60 days to provide you with a new Access to Care doctor.
- Your Access to Care doctor may not always be available. In order to receive ATC benefits, your doctor must refer you to another doctor in the ATC program. To make sure you are covered, before going to any other doctor, call us at 708-531-0680 to find out if he/she is an ATC doctor.

If you do not speak English, bring an adult with you who can translate when you go to the doctor's office. Translation services might not always be available.

- Physician services, tests or prescription medications provided at Cook County Health and Hospital System sites are not covered by the Access to Care program. These services are offered on a sliding fee scale based on your income and you are responsible for full payment. You will need to apply for the CareLink program on the day of your appointment.

- Referrals made for specialty care by your ATC doctor are done as a courtesy and are not part of the program. Note: Access to Care does not schedule appointments with the Cook County Health and Hospital System.

Pharmacy Services

Access to Care is accepted at most pharmacies. You must show your member ID card. You will pay \$15 per prescription for generic drugs*, \$30 per prescription for formulary brand drugs and \$40 for non-formulary brand drugs. You will be given generic medicine unless your Access to Care doctor makes a special request for a brand name drug. See "Your Medication Guide" for more information.

***IMPORTANT:** If you request a brand name drug without a special notation from your physician, you will be responsible for the full cost of the medication. Prescriptions are limited to 30-day doses without exception. Over-the-counter drugs and equipment (except diabetic testing supplies) are not covered by the program. Prescriptions from doctors other than your ATC doctor (except as indicated above) will not be covered through the program.*

**There are options, other than the ATC program, to get generic prescriptions at an even lower cost. For example, Walmart offers a low-cost prescription program. Some generic prescriptions are only \$4 for a 30-day supply. See additional information at the end of this Guide.*

Vaccinations for Flu and Pneumonia are covered at zero cost. These are the ONLY vaccinations covered by the program. You do not need a prescription to request these vaccinations. However, flu and pneumonia vaccines must be provided by your local pharmacy. Bring your ATC ID card. These vaccines will not be covered if given at your doctor's office.

Free diabetic test strips. If you have diabetes and need to test your blood sugar, the ATC program covers diabetic test strips at zero cost. Simply take your ATC doctor's prescription for the diabetic test strips to your pharmacy. You'll receive a 30-day supply of the strips for FREE. We don't cover the testing device itself but call us at 708-531-0680 and we may be able to help.

Lab and X-ray Services

Basic lab and x-ray procedures are available through the program when ordered by your Access to Care doctor. This includes mammograms. You may have to go to a location other than your doctor's office for these procedures.

When you call for an appointment or go for lab or x-ray services, tell them you are an ATC member. You must show your Access to Care ID card and the order from your doctor. You will be required to pay \$5 for each ordered procedure.

Lab Services. For ATC members, lab services are available ONLY* through Quest Diagnostics or LabCorp facilities. Both facilities have many locations. To find a Quest near you: call 1-866-697-8378 or go to: questdiagnostics.com. To find a LabCorp near you: call 1-888-522-2677 or go to: labcorp.com.

**If your assigned ATC doctor/physician site is part of Advocate Health, he or she will send you to an ACL Lab site. Lab services will be covered at the ACL Lab, but only if your doctor is part of Advocate Health.*

X-ray and Mammography Services. For Access to Care members, x-rays and mammograms are available ONLY at the following locations. Call ahead to confirm that they are open and available.

NORTH

Bright Light Radiology
31 S. Arlington Heights Rd; Elk Grove Village; 847-616-2000

Glenbrook Hospital
2100 Pfingsten Rd; Glenview
847-657-5860

Nesset Health Center
Only if your doctor is on staff at
Nesset Health Center
1775 Ballard Rd; Park Ridge
847-318-2000

North Shore University Health System
2650 Ridge Ave; Evanston
888-364-6400

Northwest Community Treatment Centers
15 S. McHenry Rd; Buffalo Grove;
847-459-6100

St. Alexius Medical Center
1555 Barrington Rd; Hoffman Estates; 847-843-2000

SOUTH

Chicago Ridge Medical Imaging
9830 S Ridgeland Ave; Chicago Ridge;
708-423-1819
*Mammograms not available here.

Advocate Christ Hospital
4440 W 95th St; Oak Lawn
708-304-9500

Advocate Christ Center for Breast Care Mammography
4545 West 103rd St; Oak Lawn
708-684-1829

Little Company of Mary Hospital
2800 W. 95th St; Evergreen Park
708-422-6200

Little Company of Mary Care Stations
4901 W. 79th St; Burbank;
708-422-0300

6700 West 95th St; Oak Lawn
708-499-2273

Palos Community Hospital
12251 S. 80th Ave; Palos Heights
708-923-4000

Palos Primary Care Center
Immediate Care Center South Bldg
15300 West Ave; Orland Park
708-460-5550

South Suburban Hospital
17850 S. Kedzie Ave; Hazel Crest
708-799-8000, ext. 3270

WEST

Gottlieb Memorial Hospital
701 W North Ave; Melrose Park
708-216-1630

La Grange Memorial Hospital
Only if your doctor is at La Grange Memorial Hospital
5101 S Willow Springs Rd.
La Grange; 708-352-1200
*Mammograms not available here.

West Suburban Hospital
3 Erie Ct; Oak Park
708-383-6200
*Mammograms not available here.

CHICAGO

Resurrection Health Care
7435 W Talcott Ave
Chicago; 773-774-8000

If you receive lab, x-ray service, or mammogram at any facility or site other than the above, you will be responsible for the entire cost of these services.

Counseling/Behavioral Health Services

Access to Care works with Ascension Illinois to offer behavioral health services. Sessions are available in-person, virtually, or over the phone. Access to Care members can receive an initial assessment visit plus up to 8 counseling sessions. There is a co-payment of \$5 per session and more sessions are available via sliding fee scale.

To schedule a session, call Ascension Illinois at 708-786-8505, say you are an Access to Care member and staff will set up your first session. Ascension Illinois' 24/7 Crisis Hotline: 708-681-HELP (4357) is always available. If you have an emergency or are in danger, go to an emergency room or call 911.

Responsibilities of Members:

1. **You are responsible** for making appointments with your Access to Care doctor. You should identify yourself as an Access to Care member when calling for an appointment.

IMPORTANT: If you have a private insurance with a high deductible, you **MUST** tell your Access to Care doctor's office to use your ATC ID card otherwise, they may bill your private insurance.

2. **You are responsible** for the full payment of visits to any doctor other than the one that appears on your ATC ID card and for the full payment of any medical tests ordered by other doctors.
3. **You are responsible** for presenting your ATC ID card whenever you go for medical, pharmacy, lab or x-ray services.
4. **You are responsible** for paying the appropriate co-payments to ATC doctors and pharmacies; and for each lab and x-ray. You are responsible for full payment of services not covered by ATC.
5. **You are responsible** for notifying the ATC program of changes in your name, address, phone number or if you become ineligible for the program during the enrollment period.
6. **You are responsible** for re-enrolling prior to the expiration date on your ATC ID card if you wish to remain in the program. You can enroll by mail or online: accesstocare.org/application.

Eligibility requirements are:

- Age 19 and older; and
- Live in suburban Cook County or in northwest Chicago. The only Chicago zip codes that are eligible for the ATC program are: 60630, 60631, 60634, 60639, 60641, 60646, or 60656.
- Family income less than 300% of the federal poverty level;* and
- Ineligible for Medicaid (Public Aid) or Medicare; and
- No health insurance for doctor office visits (unless individual deductible is \$1500 or more)

**Federal poverty levels are revised and published in the Federal Register in February of each year.*

Other Health Care Services Available in the Community

The Access to Care program does not provide some basic health care services which may be available in your community for free or at a reduced cost. Contact the Cook County Department of Public Health (www.cookcountypublichealth.org; 708-836-8600; healthycook@cookcountyhhs.org). You can also contact your local health department, your city or township office, or other local social service agencies.

Access to Care Resource Desk



If there's a service we don't offer we may be able to help you find one! Since Access to Care has been part of your communities for over 30 years, we can help connect you with resources you need.

The Resource Desk can help with questions about food pantries, housing, mental health, COVID testing questions, employment, domestic violence, housing, and other services. *Our bilingual staff is here to help with your medical and non-medical needs!*

Contact our Resource Desk at 708-531-0680 (Monday through Friday; 9 am to 5pm) or send an email with your name, ATC member number and what you need help with to info@accesstocare.org.

Access to Care enrollment and privileges will be terminated for:

- Lack of compliance with ATC program procedures, responsibilities, or eligibility requirements; or
- Repeated lack of compliance with your Access to Care physician's therapeutic direction or abusive behavior directed toward the physician or office staff; or
- Giving your identification card as an Access to Care enrollee to any other person to use; or
- Participating in Medicare, Medicaid or receiving health benefits for doctor office visits under any other program; or
- Deliberate omission or misrepresentation of any information provided to the Suburban Primary Health Care Council, the administrators of the Access to Care program.

Members' Rights

You may file a grievance if:

1. You believe you have been unfairly terminated or declared ineligible.
2. You believe you have been discriminated against based on of race, color, sex, national origin, age or handicap by an employee, agent or contractor of the ATC program other than a physician.
3. You believe that an employee, agent or contractor of the Council, other than a physician, has violated any established policy or procedure of the Access to Care program.

Grievances must be submitted in writing within 14 days of the event to: Access to Care; 2225 Enterprise Drive, Suite 2507; Westchester, Illinois 60154. A copy of the grievance procedure is available upon request from the Access to Care office.

***Disclaimer:** The doctors participating in the Access to Care program are not employees, agents, or partners of the Access to Care program. The program is not responsible in any way for the amount or quality of medical care services received from participating doctors. The program is not engaged in the practice of medicine and does not hold itself out as a medical facility. The Access to Care program will not function as a resource for medical advice with respect to medical diagnosis and/or medical treatment. Access to Care is charity care, not insurance.*

If you have questions about the information in this Guide, please contact Access to Care at 708-531-0680. Or email us at info@accesstocare.org and include your name and member identification number.

The Access to Care (ATC) program is administered by the Suburban Primary Health Council. ATC is a non-profit primary health care program for residents of suburban Cook County and northwest Chicago who are lower-income, uninsured, and underinsured. ATC has proudly served our communities since 1988. Access to Care partners with physicians and hospitals all across suburban Cook County to offer health care services to our members.

Access to Care welcomes all residents in our service area regardless of their race, age, religion, country of origin, gender identity, orientation, physical and mental ability, or immigration status.

Facebook: www.facebook.com/AccessstoCare

Instagram: www.instagram.com/accesstocare1

Behavioral Health Services

Access to Care works with Ascension Illinois to offer behavioral health services.

What's Available to ATC Members?	How to Schedule a Session?
<ul style="list-style-type: none">• Sessions available in-person, virtually or by phone• Initial assessment visit + up to 8 counseling sessions• Co-payment of \$5 per session + more sessions available via sliding fee scale	<ul style="list-style-type: none">• Call Ascension Illinois at 708-786-8505; say you are an Access to Care member• Staff will help set up your first session

[depression](#) | [anxiety](#) | [spouse/family issues](#) | [anger management](#) | [trauma](#) | [other issues](#)

Ascension Illinois 24/7 Crisis Hotline: 708-681-HELP (4357) is always available.

Servicios de Salud del Comportamiento

Access to Care trabaja con Ascension Illinois para ofrecer servicios de salud del comportamiento.

¿Qué Hay Disponible Para Miembros de ATC?	¿Como Programo Una Sesión?
<ul style="list-style-type: none">• Sesiones están disponibles en persona, virtualmente, o por teléfono• Visita de evaluación inicial y hasta 8 sesiones de asesoramiento.• Copago de \$5 por sesión y mas sesiones disponibles con una escala de tarifa variable	<ul style="list-style-type: none">• Llame a Ascension Illinois al 708-786-8505; sigales que es un miembro de Access to Care• El personal lo ayudará a crear su primera sesión

[depresión](#) | [ansiedad](#) | [problemas de matrimonio/familia](#) | [control de la ira](#) | [otros problemas](#)

Ascension Illinois número de crisis: 708-681-HELP (4357) siempre está disponible.



2225 Enterprise Drive, Suite 2507
Westchester, IL 60145
708-531-0680 | accesstocare.org

Guide to low-cost prescriptions starting at: 30-day \$4 | 90-day \$10

Check pharmacy counter for details.*

Effective 04/15/2023

Diabetes

	\$4 30 Day Qty	\$10 90 Day Qty
GLIMEPIRIDE 1MG, 2MG, 4MG	30	90
GLIPIZIDE 5MG, 10MG	60	180
METFORMIN 500MG, 850MG, 1000MG	60	180
METFORMIN ER 500MG TAB	120	360
METFORMIN ER 750MG TAB	60	180

LISINAPRIL 2.5MG, 5MG, 10MG, 20MG, 30MG	30	90
LISINAPRIL/HCTZ 20/25MG	30	90
LOSARTAN/HCTZ 50/12.5MG TAB	30	90
METOPROLOL TART 25MG, 50MG, 100MG	60	180
RAMIPRIL 2.5MG, 5MG, 10MG	30	90
TRIAMTERENE/HCTZ 37.5/25MG, 75/50MG TAB	30	90
WARFARIN 1MG, 2MG, 2.5MG, 3MG, 4MG, 5MG, 6MG, 7.5MG, 10MG	30	90

	\$9 30 Day Qty	\$24 90 Day Qty
GLIPIZIDE ER 2.5MG, 5MG, 10MG	30	90
GLYBURIDE/METFORMIN 2.5/500MG, 5/500MG	60	180

Heart

	\$9 30 Day Qty	\$24 90 Day Qty
FENOFIBRATE 145MG	30	90
GEMFIBROZIL 600MG	60	180
SIMVASTATIN 10MG, 20MG, 40MG	30	90

	\$4 30 Day Qty	\$10 90 Day Qty
ATENOLOL 25MG, 50MG, 100MG	30	90
BENAZEPRIL 20MG, 40MG	30	90
CARVEDILOL 3.125MG, 6.25MG, 12.5MG, 25MG	60	180
CLONIDINE 0.1MG, 0.2MG, 0.3MG	60	180
FLORENSEMI 20MG, 40MG, 80MG	30	90
HYDRALAZINE 10MG, 25MG, 50MG	90	270
HYDROCHLOROTHIAZIDE 12.5MG, 25MG, 50MG TAB	30	90
HYDROCHLOROTHIAZIDE 12.5MG CAP	30	90
INDAPAMIDE 1.25MG, 2.5MG	30	90
ISOSORBIDE MONONITRATE ER 30MG, 60MG	30	90

	\$9 30 Day Qty	\$24 90 Day Qty
AMIODARONE 200MG	30	90
AMLODIPINE 2.5MG, 5MG, 10MG	30	90
BISOPROLOL 5MG	30	90
CILOSTAZOL 50MG, 100MG	60	180
DIGOXIN 0.125MG, 0.25MG	30	90
DILTIAZEM ER 120MG CAP (24 HOUR)	30	90
DILTIAZEM 30MG, 60MG, 120MG	60	180
DOXAZOSIN 1MG, 2MG, 4MG, 8MG	30	90
ENALAPRIL 2.5MG, 10MG, 20MG	30	90
IRBESARTAN 150MG, 300MG	30	90
LOSARTAN 25MG, 50MG, 100MG	30	90
METOPROLOL ER 25MG, ER 50MG	30	90
MINOXIDIL 10MG TAB	30	90
TORSEMIDE 20MG, 100MG	30	90
TRIAMTERENE/HCTZ 37.5/25MG CAP	30	90
VALSARTAN/HCTZ 160/12.5MG, 160/25MG	30	90
VERAPAMIL ER 120MG, 180MG, 240MG TAB	30	90
SPIRONOLACTONE 50MG	30	90
CHLORALHDONE 25MG, 50MG	30	90
NITROGLYCERIN 0.4MG	25	75

	\$15 30 Day Qty	\$38 90 Day Qty
Heart Health & Blood Pressure	30 Day Qty	90 Day Qty
CLOPIDOGREL 75MG	30	90
SPIRONOLACTONE 100MG	30	90

Continued >>

*Prescription Program includes up to a 30-day supply for \$4 and a 90-day supply for \$10 of some covered generic drugs at community or preferred dispensing. Higher dosage cost more. Prices for some drugs vary by pharmacy. Program may not be available in all states. For important information regarding program's full list of covered drugs, visit [walmart.com/rxprogram](#). Prices for some drugs may vary by pharmacy. Program may not be available in all states. For important information regarding program's full list of covered drugs, visit [walmart.com/rxprogram](#).

† Program pricing may be limited to select manufacturer's of a covered drug and is available at local suppliers from within manufacturer's ask in stock at the dispensing pharmacy.

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Mental Health

	\$4 30 Day Qty	\$10 90 Day Qty
AMITRIPTYLINE 10MG, 25MG, 50MG, 75MG	30	90
BUSPIRONE 5MG, 10MG	60	180
CITALOPRAM 10MG, 20MG, 40MG	30	90
FLOXETINE 10MG TAB	30	90
FLOXETINE 20MG, 40MG CAP	30	90
LITHIUM CARB 300MG CAP	60	180
NORTRIPTYLINE 10MG, 25MG, 50MG	30	90
PAROXETINE 20MG, 30MG	30	90
RISPERIDONE 0.25MG, 0.5MG, 1MG, 2MG, 3MG, 4MG	30	90
TRIAHEXYPHENIDYL 2MG TAB	60	180

	\$9 30 Day Qty	\$24 90 Day Qty
AMANTADINE 100MG	60	180
CARB/LEVO 10/100MG, 25/100MG	90	270
DIVALPROEX DR 250MG TAB	60	180
DONEPEZIL 5MG, 10MG	30	90
LAMOTRIGINE 100MG, 200MG	30	90
LAMOTRIGINE 25MG, 150MG	60	180
LEVETIRACETAM 500MG	60	180
LITHIUM CARB ER 300MG, 450MG TAB	60	180
MIRAZAPINE 15MG, 30MG, 45MG	30	90
OXCARBAPZEPINE 300MG	60	180
PAROXETINE 40MG	30	90
PRAMIPEXOLE 0.125MG, 0.25MG, 0.5MG, 1MG, 1.5MG	30	90
PRIMIDONE 250MG TAB	60	180
QUETIAPINE 50MG TAB	30	90
QUETIAPINE 25MG, 50MG, 100MG, 200MG, 300MG	30	90
ROPINIROLE 0.25MG, 0.5MG, 1MG, 2MG, 3MG, 4MG	30	90
SERTALINE 25MG, 100MG	30	90
TOPRAMATE 25MG, 50MG, 100MG, 200MG	60	180
TRIAHEXYPHENIDYL 5MG TAB	60	180
ZONISAMIDE 50MG CAP	60	180

	\$15 30 Day Qty	\$38 90 Day Qty
BUPROPION 75MG, 100MG	60	180
BUPROPION ER/SR 100MG, 150MG, 200MG TAB	60	180
BUPROPION XL 150MG TAB	30	90
DULOXETINE 20MG, 30MG, 60MG	30	90
ESCITALOPRAM 5MG, 10MG, 20MG	30	90

*Prescription Program includes up to a 30-day supply for \$4 and a 90-day supply for \$10 of some covered generic drugs at community or preferred dispensing. Higher dosage cost more. Prices for some drugs vary by pharmacy. Program may not be available in all states. For important information regarding program's full list of covered drugs, visit [walmart.com/rxprogram](#). Prices for some drugs may vary by pharmacy. Program may not be available in all states. For important information regarding program's full list of covered drugs, visit [walmart.com/rxprogram](#).

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VENLAFAXINE 37.5MG TAB	60	180
VENLAFAXINE 75MG, 100MG TAB	60	180
VENLAFAXINE ER 37.5MG, 75MG, 150MG CAP	30	90

Other Therapeutic Category

	\$4 30 Day Qty	\$10 90 Day Qty
Digestion	30 Day Qty	90 Day Qty
METOCLOPRAMIDE 5MG, 10MG	90	270

	\$9 30 Day Qty	\$24 90 Day Qty
Digestion	30 Day Qty	90 Day Qty
METOCLOPRAMIDE 5MG, 10MG	30	90

	\$15 30 Day Qty	\$38 90 Day Qty
Digestion	30 Day Qty	90 Day Qty
OMEPRAZOLE 20MG CAP	30	90
OMEPRAZOLE DR 40MG	30	90
PROMETHAZINE 12.5MG, 25MG	30	90

	\$9 30 Day Qty	\$24 90 Day Qty
Pain Management	30 Day Qty	90 Day Qty
TIZANIDINE 2MG, 4MG TAB	30	90

	\$15 30 Day Qty	\$38 90 Day Qty
Pain Management	30 Day Qty	90 Day Qty
METHOCARBAMOL 750MG	30	90
LIDOCAINE 2% VISC SOL	100 ML	300 ML

	\$4 30 Day Qty	\$10 90 Day Qty
Thyroid	30 Day Qty	90 Day Qty
LEVOTHYROXINE 25MCG, 50MCG, 75MCG, 88MCG 100MCG, 112MCG, 125MCG, 137MCG, 150MCG, 175MCG, 200MCG	30	90

	\$4 30 Day Qty	\$10 90 Day Qty
Vitamin & Nutrition	30 Day Qty	90 Day Qty
FOLIC ACID 1MG	30	90

	\$9 30 Day Qty	\$24 90 Day Qty
Vitamin & Nutrition	30 Day Qty	90 Day Qty
FOLBEE TAB	30	90

	\$9 30 Day Qty	\$24 90 Day Qty
Family Planning	30 Day Qty	90 Day Qty
NORETHINDRONE TAB 0.35 MG	28	84
SPRINTEC 28 TAB 28 DAY	28	84
TRI-SPRINTEC TAB	28	84

	\$24 30 Day Qty	TINHALER
Respiratory Health	30 Day Qty	TINHALER
ALBUTEROL HFA	30	90
Preferred over store of Proventil HFA only		

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