

Home Delivery Prescription Program Drug List

Low-cost prescriptions, right in your mailbox.
 Now you can have your generic prescriptions mailed right to your home, no matter where you live. Because we think everyone should be able to get low-cost prescriptions, not just those who live close to a Walmart.

Free home delivery of \$10 prescriptions.
 Our \$10, 90-Day home delivery program covers hundreds of prescriptions. That includes medicines for a wide range of conditions and diagnosis groups. This list is a quick-reference tool that will help you find the specific medicines you're looking for.

Allergies & Cold and Flu **\$10/90-Day**

Benzonatate 100mg cap	42
Loratadine 10mg tab	90
Promethazine DM syrup	360ml

Antibiotic Treatments **\$10/90-Day**

Amoxicillin 250mg cap	90
Amoxicillin 500mg cap	90
Cephalexin 250mg cap	84
Cephalexin 500mg cap	90
Ciprofloxacin 250mg tab	42
Ciprofloxacin 500mg tab	60
Penicillin VK 250mg tab	84
SMZ-TMP 400mg-80mg tab	84
SMZ-TMP DS 800mg-160mg tab	60

Arthritis & Pain **\$10/90-Day**

Allopurinol 100mg tab	90
Allopurinol 300mg tab	90
Baclofen 10mg tab*	90
Cyclobenzaprine 5mg tab	90
Cyclobenzaprine 10mg tab	90
Dexamethasone 0.5mg tab	90
Dexamethasone 0.75mg tab	36
Dexamethasone 4mg tab	18
Diclofenac DR 75mg tab*	180
Ibuprofen 400mg tab	270
Ibuprofen 600mg tab*	180
Ibuprofen 800mg tab	90

Meloxicam 7.5mg tab	90
Meloxicam 15mg tab	90

Asthma **\$10/90-Day**

Albuterol 2mg tab	270
Albuterol 4mg tab	180
Albuterol 2mg/5ml syrup	360ml
Albuterol 0.83% neb sol	60
Ipratropium inh sol	180

Cholesterol **\$10/90-Day**

Lovastatin 10mg tab	90
Lovastatin 20mg tab	90

Diabetes **\$10/90-Day**

Glimepiride 1mg tab	90
Glimepiride 2mg tab	90
Glimepiride 4mg tab	90
Glipizide 5mg tab	90
Glyburide 2.5mg tab	90
Glyburide 5mg tab (blue)	90
Glyburide 5mg tab (green)	90
Glyburide, micronized 3mg tab	90
Glyburide, micronized 6mg tab	90
Metformin 500mg tab	180
Metformin 850mg tab	180
Metformin 1000mg tab	180
Metformin 500mg ER tab	180

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Digestive Ailments

\$10/90-Day

Dicyclomine 10mg cap.....	270
Dicyclomine 20mg tab.....	180
Famotidine 20mg tab.....	180
Lactulose syrup*.....	708ml
Metoclopramide 10mg tab.....	180
Metoclopramide syrup.....	180ml
Ranitidine 150mg tab.....	180
Ranitidine 300mg tab.....	90

Ear Health

\$10/90-Day

Antipyrine/Benzocaine otic* (15ml bottle)†.....	3
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Fungal Infections

\$10/90-Day

Fluconazole 150mg tab.....	3
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Glaucoma & Eye Care

\$10/90-Day

Bacitracin Op ointment.....	12
Gentak 0.3% Op soln.....	15
Gentamicin 0.3% op. soln (5ml bottle)†.....	3
Levobunolol 0.5% op soln (5ml bottle)*.....	3
Timolol Maleate 0.25% op. soln (5ml bottle)†.....	3
Timolol Maleate 0.5% op soln (5ml bottle)†.....	3
Tobramycin 0.3% op. soln (5ml bottle)†.....	3

Heart Health & Blood Pressure

\$10/90-Day

Atenolol-Chlorthalidone 100mg.....	90
Atenolol 25mg tab.....	90
Atenolol 50mg tab.....	90
Atenolol 100mg tab.....	90
Benazepril 5mg tab.....	90
Benazepril 10mg tab.....	90
Benazepril 20mg tab.....	90
Benazepril 40mg tab.....	90
Bisoprolol-HCTZ 2.5mg-6.25mg tab.....	90
Bisoprolol-HCTZ 5mg-6.25mg tab.....	90
Bisoprolol-HCTZ 10mg-6.25mg tab.....	90
Carvedilol 3.125mg tab.....	180
Carvedilol 6.25mg tab.....	180
Carvedilol 12.5mg tab.....	180

Carvedilol 25mg tab.....	180
Clonidine 0.1mg tab.....	90
Clonidine 0.2mg tab.....	90
Clonidine HCL 0.1mg.....	90
Clonidine HCL 0.2mg.....	90
Enalapril-HCTZ 5mg-12.5mg tab*.....	90
Furosemide 20mg tab.....	90
Furosemide 40mg tab.....	90
Furosemide 80mg tab.....	90
Guanfacine 1mg tab.....	90
Hydralazine 10mg tab.....	90
Hydralazine 25mg tab.....	90
Hydrochlorothiazide(HCTZ)12.5mg cap.....	90
Hydrochlorothiazide (HCTZ) 25mg tab.....	90
Hydrochlorothiazide (HCTZ) 50mg tab.....	90
Indapamide 1.25mg tab.....	90
Indapamide 2.5mg tab.....	90
Isosorbide Mononitrate 30mg ER tab*.....	90
Isosorbide Mononitrate 60mg ER tab*.....	90
Lisinopril-HCTZ 10mg-12.5mg tab.....	90
Lisinopril 2.5mg tab.....	90
Lisinopril 5mg tab.....	90
Lisinopril 10mg tab.....	90
Lisinopril 20mg tab.....	90
Methyldopa 250mg tab.....	180
Methyldopa 250mg tab.....	90
Metoprolol Tartrate 25mg tab.....	180
Metoprolol Tartrate 50mg tab.....	180
Sotalol HCL 80mg tab.....	90
Spironolactone 25mg tab.....	90
Terazosin 1mg cap.....	90
Terazosin 2mg cap.....	90
Terazosin 5mg cap.....	90
Terazosin 10mg cap.....	90
Triamterene-HCTZ 75mg-50mg tab.....	90
Triamterene-HCTZ 37.5mg-25mg tab.....	90
Verapamil 80mg tab.....	90
Verapamil 120mg tab.....	90
Warfarin 1mg tab.....	90
Warfarin 2mg tab.....	90

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Warfarin 2.5mg tab	90
Warfarin 3mg tab	90
Warfarin 4mg tab	90
Warfarin 5mg tab	90
Warfarin 6mg tab	90
Warfarin 7.5mg tab	90
Warfarin 10mg tab	90

Mens Health

\$9/30-Day

Finasteride 5mg tab	30
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Mental Health

\$10/90-Day

Amitriptyline 10mg tab*	90
Amitriptyline 25mg tab*	90
Amitriptyline 50mg tab*	90
Amitriptyline 75mg tab*	90
Amitriptyline 100mg tab*	90
Benzotropine 2mg tab	90
Bupirone 5mg tab	180
Citalopram 20mg tab	90
Citalopram 40mg tab	90
Fluoxetine 10mg cap*	90
Fluoxetine 10mg tab*	90
Fluoxetine 20mg cap*	90
Fluoxetine 40mg cap*	90
Fluphenazine 1mg tab	90
Haloperidol 0.5mg tab	90
Haloperidol 1mg tab	90
Haloperidol 2mg tab	90
Haloperidol 5mg tab	90
Nortriptyline 10mg cap	90
Nortriptyline 25mg cap	90
Paroxetine 10mg tab	90
Prochlorperazine 10mg tab	90
Trazodone 50mg tab	90
Trazodone 100mg tab	90
Trazodone 150mg tab	90
Trihexyphenidyl 2mg tab	180

Skin Conditions

\$10/90-Day

Gentamicin 0.1% cream (15gm tube) [†]	3
Gentamicin 0.1% ointment (15gm tube) [†]	3
Hydrocortisone 1% cream (28.35-30g tube) [†]	3
Hydrocortisone 2.5% cream (30gm tube) [†]	3
Triamcinolone 0.025% cream (15gm tube) [†]	3
Triamcinolone 0.025% cream (80gm tube) [†]	3
Triamcinolone 0.1% cream (15gm tube) [†]	3
Triamcinolone 0.1% cream (80gm tube) [†]	3
Triamcinolone 0.1% ointment (15gm tube) [†]	3
Triamcinolone 0.1% ointment (80gm tube) [†]	3
Triamcinolone 0.5% cream (15gm tube) [†]	3

Thyroid Conditions

\$10/90-Day

Levothyroxine 25mcg tab	90
Levothyroxine 50mcg tab	90
Levothyroxine 75mcg tab	90
Levothyroxine 88mcg tab	90
Levothyroxine 100mcg tab	90
Levothyroxine 112mcg tab	90
Levothyroxine 125mcg tab	90
Levothyroxine 137mcg tab	90
Levothyroxine 150mcg tab	90

Viruses

\$10/90-Day

Acyclovir 200mg cap	90
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Vitamins & Nutritional Health

\$10/90-Day

Folic Acid 1mg tab	90
Magnesium Oxide 400mg tab	90
NatalCare Plus tab	90

Women's Health

\$10/90-Day

Estradiol 0.5mg tab	90
Estradiol 1mg tab	90
Estradiol 2mg tab	90
MedroxyprogesteroneAcetate 2.5mg tab	90
Medroxyprogesterone Acetate 5mg tab	90
Medroxyprogesterone Acetate 10mg tab	30

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Oral Contraceptives **\$9/28-Day**

Levonorgestrel/Ethinyl Estradiol	28
Kurvelo	28
Norethindrone USP 0.35mg	28
Enskyce	28
Jencycla	28
Pirmella 1/35	28
Pirmella 7/7/7	28
Sprintec	28
Tri-Sprintec	28

\$24/90-Day

Alendronate SOD 35mg tab	12
Alendronate SOD 70mg tab	12
Clomiphene 50mg tab	15

Other Medical Conditions **\$10/90-Day**

Chlorhexidine Gluconate 0.12% soln (473ml bottle) [†]	3
Isoniazid 300mg tab	90
Lidocaine 2% viscous solution (100ml bottle) [†]	3
Megestrol 20mg tab	90

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Walmart's Prescription Program Details

1. Walmart's Prescription Program (the "Program") is available at all Walmart and Neighborhood Market pharmacies in the United States ("Walmart Retail Pharmacies"), except in North Dakota, as set forth below in Sections 3 and 4. The Program is also available through Walmart Mail Service ("Walmart Mail Service"), as set forth below in Section 5.
2. The Program applies only to certain generic drugs at commonly prescribed dosages. Higher dosages cost more. You may obtain a list of generic drugs and dosages covered under the Program at Walmart Retail Pharmacies (the "Retail Drug List") and through Walmart Mail Service (the "Mail Service Drug List") on Walmart.com or at Walmart Retail Pharmacies. The Retail Drug List and Mail Service Drug List may change and also may vary by state. Not all formulations of a drug (for example, enteric-coated, extended or timed release formulations) are covered under the Program. Program pricing not available when a covered drug is dispensed as part of a compound.
3. Under the Program at Walmart Retail Pharmacies, \$4 is the price for up to a 30-day supply of certain covered generic drugs at commonly prescribed dosages (the "\$4 Retail Program"). \$10 is the price of a 90-day supply of certain covered generic drugs at commonly prescribed dosages (the "\$10 Retail Program"). Not all drugs covered by the \$4 Retail Program are covered by the \$10 Program. Prices for quantities between a 30-day supply and a 90-day supply of drugs covered by both the \$4 Retail Program and \$10 Retail Program are prorated based on the \$4 Program price, but will not exceed \$10. Prices for quantities greater than a 90-day supply of drugs covered by the \$10 Retail Program are prorated based on the \$10 Program price. Prorated pricing is not available under the Program for prepackaged drugs. For pricing policies relating to prepackaged drugs (such as tubes, vials or bottles), see Section 6.
4. Under the Program at Walmart Retail Pharmacies, \$9 is the price for up to a 30-day supply of certain women's health and other covered generic drugs at commonly prescribed dosages (the "\$9 Retail Program"). \$24 is the price for a 90-day supply of certain women's health and other covered generic drugs at commonly prescribed dosages (the "\$24 Retail Program"). Not all drugs covered by the \$9 Retail Program are covered by the \$24 Retail Program. Prices for quantities between a 30-day supply and a 90-day supply of drugs covered by both the \$9 Program and \$24 Retail Program are prorated based on the \$9 Program price, but will not exceed \$24. Prices for quantities greater than a 90-day supply of drugs covered by the \$24 Retail Program are prorated based on the \$24 Program price. Prorated pricing is not available under the Program for prepackaged drugs. For pricing policies relating to prepackaged drugs, see Section 6.
5. Under the Program through Walmart Mail Service, \$10 is the price for mail delivery of a 90-day supply of certain generic drugs at commonly prescribed dosages ("\$10 Mail Service Program"). \$24 is the price for mail delivery of certain women's health and certain other covered drugs at commonly prescribed dosages (\$24 Mail Service Program). Not all drugs covered by the \$10 Retail Program are covered by the \$10 Mail Service Program; not all drugs covered by the \$24 Retail Program are covered by the \$24 Mail Service Program. See Mail Service Drug List for a list of drugs covered by the \$10 Mail Service Program and \$24 Mail Service Program. Walmart Mail Service covers both initial fills and refills. Delivery of covered drugs is available only through Walmart Mail Service and is not available at Walmart and Neighborhood Market retail pharmacies. Delivery under the Program through Walmart Mail Service is limited to U.S. addresses by First-Class Mail; expedited delivery is also available for an additional charge. Some health plans do not cover Walmart Mail Service or 90-day supplies. Prices for quantities greater than a 90-day supply of drugs covered by the \$10 Mail Service Program and the \$24 Mail Service Program are prorated based on the \$10 and \$24 Program price, respectively. Prices for quantities less than a 90-day supply are not prorated under either the \$10 Mail Service Program or the \$24 Mail Service Program. Prorated pricing is not available under the Program for prepackaged drugs. For pricing policies relating to prepackaged drugs, see Section 6.
6. Prepackaged drugs are covered under the Program only in the unit sizes specified on the Retail Drug List and Mail Service Drug List. Prepackaged drugs are dispensed based on the quantities prescribed and unit sizes in stock at the dispensing pharmacy. Unit sizes not specified on the Retail Drug List or Mail Service Drug List are not covered under the Program. Multi-unit purchases are charged at a per unit price, based on the price per unit size dispensed, unless otherwise specified. Prepackaged drugs dispensed in unit sizes not specified on the Retail Drug List and Mail Service Drug List may be priced higher, even if equivalent quantities of the drug are available in specified unit sizes. Prorated pricing is not available under the Program for prepackaged drugs.
7. Prices of certain drugs covered by the Program may be higher in some states, as noted on the Retail Drug List and Mail Service Drug List.
8. 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.
9. You may pay less or more than the Program price, depending on the terms of your health plan. 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.
10. For purchases made at Walmart Retail Pharmacies, prescriptions must initially be filled in person, and refills must be picked up in store. There are no substitutions. Purchases made through Walmart Mail Service may be ordered at Walmart Retail Pharmacies, by phone or through walmart.com.
11. These Program Details are subject to change without advance notice. Changes to these Program Details may be made only in writing.

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