



Wyoming Medication Donation Program

Medication Formulary Available in 90 Day Supply

Allergies

Montelukast 10mg

Asthma & COPD

Albuterol 0.083% nebulizer solution

Ipratropium / Albuterol 0.5mg/3mg neb solution

Ipratropium 0.02% nebulizer solution

Cholesterol

Atorvastatin 10mg

Atorvastatin 20mg

Atorvastatin 40mg

Fenofibrate 54mg

Pravastatin 40mg

Simvastatin 10mg

Simvastatin 20mg

Simvastatin 40mg

Men's Health

Finasteride 5mg

Tamsulosin 0.4mg

Gastrointestinal Health

Esomeprazole 20mg

Esomeprazole 40mg

Metoclopramide 5mg

Omeprazole 10mg

Pantoprazole 40mg

Sucralfate 1gm

Diabetes

Glipizide 5mg

Glipizide 5mg ER

Glipizide 10mg ER

Metformin 500mg

Metformin 850mg

Metformin 1,000mg

Depression

Citalopram 20mg

Fluoxetine 10mg

Fluoxetine 20mg

Thyroid Conditions

Levothyroxine 25mcg

Levothyroxine 50mcg

Levothyroxine 88mcg

Levothyroxine 100mcg

Levothyroxine 112mcg

Levothyroxine 125mcg

Levothyroxine 137mcg

Levothyroxine 150mcg

Levothyroxine 175mcg

Levothyroxine 200mcg

Gout

Allopurinol 100mg

Allopurinol 300mg

Women's Health

Estradiol 1mg



Heart Health & Blood Pressure

Aspirin 81mg
Aspirin 325mg
Atenolol 25mg
Atenolol 50mg
Atenolol 100mg
Captopril 12.5mg
Carvedilol 3.125mg
Carvedilol 6.25mg
Carvedilol 12.5mg
Chlorthalidone 25mg
Clonidine 0.1mg
Clonidine 0.2mg
Digitek/Digoxin 0.125mg
Digitek/Digoxin 0.25mg
Doxazosin 1mg
Ezetimibe 10mg
Furosemide 20mg
Furosemide 80mg
Metolazone 2.5mg
Metolazone 5mg
Metoprolol Tartrate 25mg
Prazosin 2mg
Prazosin 5mg
Propranolol 10mg
Propranolol 20mg

Vitamins & Supplements

Acidophilus/Risa-Bid
Calcium Carbonate 600mg
Calcium + Vitamin D 600mg/400mg
Multivitamin
Potassium Chloride 8mEq
Potassium Chloride 10mEq
Potassium Chloride 20mEq
Vitamin B-12 1000mcg
Vitamin D 1000 unit
Vitamin D 2000 unit tablets
Vitamin D 5000 unit

90 Day Supply Program Details

1. The patient must have a *current* application on file with the Medication Donation Program. Applicants are eligible for one year and must renew annually. Renewal notices are sent to active patients one month prior to expiration.
2. The patient must have a *complete* application on file at the Medication Donation Program. This includes proof of income, proof of residency, and social security number which is used to verify prescription insurance status.
3. Medications labeled with "DOH" are NOT available for Medicare Part D patients. Medications listed without the "DOH" label ARE available to Medicare Part D patients.
4. Prescriptions using a substitute dosage are not eligible for 90 day supply. For example, if the patient needs atorvastatin 80mg daily and none are available, the prescription may be filled with directions to take two 40mg tablets daily. This will be filled for a 30 day supply.
5. The original Rx must be written for a 6 month supply or longer which indicates to our staff that the patient is stable on the medication.
6. Dispensing Sites cannot order the "DOH" medications to have on hand. However, their patients may access the "DOH" medications via the mail through standard WMDP procedures.
7. This formulary is subject to change. Changes will be posted on the website.

