

2021

Over-the-Counter Benefit

Administered by Kelsey Pharmacies

This document was last updated on 04/01/2021. For more recent information or other questions, please contact KelseyCare Advantage Member Services at 713-442-9452 or toll-free at 1-866-534-0557 (TTY users can call 711) from 8:00 a.m. to 5:00 p.m. Monday through Friday or visit www.kelseycareadvantage.com.



2021 List of Approved Over-the-Counter Products

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Note to members: When this document refers to “we,” “us”, or “our,” it means KelseyCare Advantage. When it refers to “plan” or “our plan,” it means KelseyCare Advantage Essential, Essential+Choice, Essential Select, Rx, Rx+Choice or Rx Select. When it refers to “pharmacy” or “pharmacies,” it is referring to participating Kelsey Pharmacies.

This document includes a list of approved over-the-counter (OTC) products for our plan which is current as 04/01/2021. Items in the catalog may change throughout the year. For an updated list, please contact us. Our contact information, along with the date we last updated the list of approved over-the-counter products, appears on the front cover page.

You must use Kelsey Pharmacies to use your over-the-counter (OTC) benefit. Benefits may change on January 1, 2022, and from time to time during the year.

KelseyCare Advantage is proud to provide you access to approved over-the-counter (OTC) products in 2021. The over-the-counter (OTC) benefit will provide members with a quarterly allowance of \$25 which can be used towards purchasing KelseyCare Advantage approved over-the-counter (OTC) products.

The approved KelseyCare Advantage over-the-counter (OTC) products cover a wide range of needs such as **allergy relief products, cough and cold medicine, antacids, pain relievers, vitamins, minerals, first aid products** and more. Keep this catalog accessible as it will guide you as to what products will be covered and can be ordered using the allowance.

Approved over-the-counter (OTC) products will be detailed in this catalog. Confirm that you are reviewing the most current over-the-counter (OTC) catalog. These products can be purchased in-store, online through the Over-the-Counter portal on My Kelsey Online (MKO) or over the phone for in-store pick up or mail delivery.

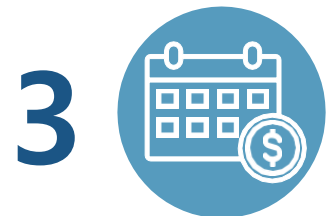
USING YOUR OVER-THE-COUNTER (OTC) BENEFIT



Review the over-the-counter (OTC) catalog for the list of approved over-the-counter products.



Visit a Kelsey Pharmacy in-person, contact your local Kelsey Pharmacy location or use the Over-the-Counter online portal available through your My Kelsey Online (MKO) to place an order. Phone numbers, hours of operation and addresses are provided on the back cover.



Your quarterly allowance is \$25, which includes sales tax as applicable. Unused amounts will not roll over to the next quarter or year.



MAIL DELIVERY

- Call Kelsey Pharmacy or order online through the Over-the-Counter portal available in My Kelsey Online (MKO) by 4 p.m. Monday through Friday to have your order mailed the following business day.
- Ordered products are delivered through standard mail and may take 7-10 business days for delivery.
- You will not be charged for any costs associated with mail delivery.
- If the total cost of your order is higher than the provided allowance, you will be responsible for paying the difference out of pocket. A Kelsey Pharmacy associate will assist with processing the remaining balance via phone. Your items will not be shipped until the remaining balance is covered.



IN STORE PICK UP

- Call Kelsey Pharmacy or order online through the Over-the-Counter portal available in My Kelsey Online (MKO) by 4 p.m. Monday through Friday to have your order prepared for in- store pick up after 1 p.m. the following business day.
- Items that are not picked up at the designated store within 14 days of order preparation will be returned to stock.
- Ensure that you confirm the operating hours of your local Kelsey Pharmacy (phone numbers are provided on the back cover of this catalog) or visiting www.kelsey-seybold.com/pharmacy ahead of your visit. Holidays and weekends may affect hours of operation.
- If the total cost of your order is higher than the provided allowance, you will be responsible for paying the difference out of pocket. A Kelsey Pharmacy associate will assist with processing the remaining balance via phone or you can pay the remaining balance at the Kelsey Pharmacy you have chosen to pick up your order.



IN-STORE PURCHASES

Approved over-the-counter (OTC) products as outlined in the catalog are available for purchase at all Kelsey Pharmacies in Houston and the greater Houston area.

- Locate and confirm the operating hours of your local Kelsey Pharmacy by calling the pharmacy (phone numbers are provided on the back cover of this catalog) or visiting www.kelsey-seybold.com/pharmacy ahead of your visit. Holidays and weekends may affect hours of operation.
- Visit your nearest Kelsey Pharmacy and look for items with a “KCA Approved” over-the-counter (OTC) sticker for in-store purchases. Store associates can assist with finding specific approved products.
- If the total cost of your in-store purchase is higher than the provided allowance, you will be responsible for paying the difference out of pocket at the point of sale.



UNUSED QUARTERLY CREDIT

Unused amounts of the quarterly permitted allowance will not roll over to the next quarter or the next year. Purchases above the credit limit will require out-of-pocket payments to finalize the purchase.



RETURN POLICY

- If a mail ordered item is defective, please contact Kelsey Pharmacy (phone numbers are provided on the back cover of this catalog) to discuss replacement options. No other returns or refunds will be granted for over-the-counter (OTC) purchases.
- Due to the personal nature of these products, no other returns or refunds will be granted for over-the-counter (OTC) purchases. Lost or stolen over-the-counter (OTC) items are not refundable and will not be replaced.



NOTICES

- Products that are covered by this supplemental benefit are for the eligible member, over-the-counter (OTC) items may be purchased for the eligible member only. Medicare prohibits the use of this benefit to order over-the-counter (OTC) products for family members and friends.
- Some items, under certain circumstances, may be covered under either Part B or Part D, these items are identified throughout the catalog. When you receive these items under Part B or Part D, you may not purchase these items through your Over-the-Counter (OTC) benefit.
- Some items may be used for a medical condition or general health maintenance. These products are considered Dual Purpose. Although over-the-counter products are not required to have a prescription, these products may be purchased only after the enrollee discusses the purchase with their personal provider(s). These items are identified throughout the catalog.
- Only generic products will be provided whenever possible.
- Items, quantities, sizes, manufacturers and prices may change depending on availability. Product brand references may not be exact equivalents as provided generic products.
- Sales tax may apply to some items, the price on this catalog may not be the final price. For more information you can contact our phone number provided at the end of this catalog or ask a store associate.



ALLERGY

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
3492857	Allergy Relief Nasal Spray 60 mcg	1 Item	FLONASE	\$11.99
3492865	Allergy Relief Nasal Spray 120 mcg	1 Item	FLONASE	\$18.99
3960754	Cetirizine 10mg	30 Tablets	ZYRTEC	\$12.99
3958873	Fexofenadine 180mg	15 Tablets	ALLEGRA	\$10.99
3290269	Loratadine 10mg	30 Tablets	CLARITIN	\$9.99
1850023	Saline Nasal Spray	1 Nasal Spray	OCEAN NS	\$4.29

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



COLD REMEDIES

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
2224277	Cough Drops, Sugar Free Black Cherry Flavor	25 Count	HALLS	\$1.79
2224319	Cough Drops, Cherry Flavor	30 Count	HALLS	\$1.79
2224335	Cough Drops, Honey/Lemon Flavor	30 Count	HALLS	\$1.79
2224293	Cough Drops, Menthol Flavor	30 Count	HALLS	\$1.79
1409606	Daytime Cold and Flu Liquid	8 oz	DAYQUIL	\$6.59
2196673	Dextromethorphan and Guaifenesin Liquid	8 oz	ROBITUSSIN DM	\$7.79
3289188	Guaifenesin Liquid	8 oz	ROBITUSSIN	\$7.79
1512201	Sugar Free Guaifenesin Liquid	4 oz	ROBITUSSIN SF	\$7.99
2196640	Sugar Free Dextromethorphan and Guaifenesin Liquid	4 oz	ROBITUSSIN DM SF	\$5.79
3798006	Mucus Relief (Guaifenesin) ER Tab 1200mg	14 Tablets	MUCINEX	\$12.59
3797982	Mucus Relief (Guaifenesin) ER Tab 600mg	20 Tablets	MUCINEX	\$12.69
3904604	Mucus Relief (Guaifenesin) ER Tab 600mg	40 Tablets	MUCINEX	\$17.99
1409564	Nighttime Cold and Flu Liquid	8 oz	NYQUIL	\$6.39
1409598	Nighttime Cold and Flu Liquid	12 oz	NYQUIL	\$7.59
1712454	Sore Throat Spray, Cherry Flavor	6 oz spray	CHLORASEPTIC	\$5.29

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



DIGESTIVE HEALTH

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
1377258	Adult Glycerin Suppository	12 Count	FLEET	\$2.19
1209782	Antacid (aluminum hydroxide and magnesium hydroxide)/Antigas (simethicone) Liquid	12 oz	MYLANTA	\$5.19
1209774	Antacid (aluminum hydroxide and magnesium hydroxide) Liquid, Cherry Flavor	12 oz	MAALOX	\$5.19
1595198	Antacid (aluminum hydroxide and magnesium hydroxide) Regular Strength (Liquid), Mint Flavor	12 oz	MAALOX	\$5.29
2066504	Antacid (Calcium Carbonate) Sugar Free Orange Flavor Chewable Tablets	80 Chewable Tablets	TUMS	\$4.69
1501402	Calcium Antacid Tabs Extra Strength Berry	96 Chewable Tablets	TUMS	\$3.49
1848522	Anti-Diarrheal (loperamide) Caplets*	12 Caplets	IMODIUM	\$5.99
3509437	Bisacodyl Tablet Gentle Laxative	25 Tablets	DULCOLAX	\$5.99
3497112	Enema Ready-To-Use	4.5 Oz	FLEET	\$1.49
3618162	Esomeprazole Magnesium Cap 20mg*	14 Capsules	NEXIUM	\$9.69
3618170	Esomeprazole Magnesium Cap 20mg*	42 Capsules	NEXIUM	\$22.99
2901908	Famotidine Tab 10mg*	30 Tablets	PEPCID	\$8.09
1779461	Famotidine Tab 20mg (Maximum Strength)*	25 Tablets	PEPCID	\$8.99
1779974	Famotidine Tab 20mg (Maximum Strength)*	50 Tablets	PEPCID	\$14.69

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



DIGESTIVE HEALTH (continued)

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
3564424	Fiber Powder	13 oz	METAMUCIL	\$10.99
2436673	Gas Relief (Simethicone) Chewable Tab 80mg	100 Chewable Tablets	GAS-X	\$4.79
3509494	Gas Relief (Simethicone) Softgel 125mg	50 Softgel Capsules	GAS-X	\$9.99
3509833	Hemorrhoidal Ointment	2 oz	PREPARATION H	\$8.99
2086551	Lansoprazole Cap 15mg*	42 Caplets	PREVACID	\$35.29
2251627	Lansoprazole Cap 15mg*	14 Capsules	PREVACID	\$9.59
1560861	Milk of Magnesia	12 Oz	PHILLIPS	\$4.99
3633278	Motion Sickness Tab Meclizine 25mg	8 Tablets	DRAMAMINE	\$3.99
1835008	Omeprazole Tab 20mg*	28 Tablets	PRILOSEC	\$17.99
1835453	Omeprazole Tab 20mg*	42 Tablets	PRILOSEC	\$23.59
1698067	Preparation H Suppository	24 Count		\$17.39
3574217	Hemorrhoidal Suppository	12 Count	PREPARATION H	\$4.29
1519909	Probiotic Capsules	28 capsules	ALIGN	\$20.99
3672268	Senna Laxative Tablet	100 Tablets	SENOKOT	\$6.99
1722503	Stomach Relief (bismuth subsalicylate) Caplets	40 Caplets	PEPTO-BISMOL	\$5.99
1455625	Stomach Relief (bismuth subsalicylate) Chewable Tablet	30 Chewable Tablets	PEPTO-BISMOL	\$4.79
3598935	Stomach Relief (bismuth subsalicylate) Regular Strength	8 oz	PEPTO-BISMOL	\$3.99
3785482	Stool Softener + Stimulant Laxative	100 tablets	PERI-COLACE	\$6.49
3783305	Stool Softener Softgel 100mg	100 Softgel Capsules	COLACE	\$8.99

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



DENTAL AND ORAL CARE

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
1732502	Anbesol Liquid Maximum Strength	0.41 Oz		\$8.79
1617323	Fixodent Denture Adhesive Cream Fresh	2.4 Oz		\$5.99

EAR AND EYE CARE

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
3988441	Allergy and Itch Relief Eye Drops	0.17 oz	ZADITOR	\$10.99
2092732	Debrox® Ear Drops Kit	0.5 oz		\$11.79
3943024	Lubricating Ultra Artificial Tears	0.5 oz	SYSTANE	\$10.49
1723139	Redness Relief Eyedrops	0.5 oz	VISINE	\$3.59

FOOT CARE

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
1982271	Antifungal (Tolnaftate) Cream 1%	0.5 oz	TINACTIN	\$7.39
1447960	Moleskin+ Padding Strip	3 Count		\$4.19

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



FIRST AID

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
1257104	Alcohol Prep Pads*	100 Count		\$1.99
1427343	Adhesive Bandage, Butterfly*	12 Count		\$1.59
1428267	Adhesive Bandage, Sheer*	60 Count		\$2.19
1722842	Calamine Ointment	6 oz		\$3.29
1982297	First Aid Bacitracin Ointment	1 oz		\$4.59
1741925	Gauze Band Stretch 3inx2.5yd*	2.5 Yards		\$2.89
1982453	Hydrocortisone 1%+ Aloe Vera Cream	1 oz	CORTISONE-10 WITH ALOE VERA	\$4.49
1982495	Hydrocortisone Ointment 1% Max Strength	1 oz	CORTISONE-10	\$4.49
3491396	Hydrogen Peroxide 3%	16 oz		\$1.69
1722974	Iodine Tincture Mild	1 oz		\$5.39
3491420	Isopropyl Alcohol 70%	16 oz		\$2.59
1143023	Small Ice Bag 9 in	1 Count		\$9.59
1741560	Sterile Gauze Pad 2x2 8ply*	25 Count		\$3.49
1741826	Sterile Gauze Pad 4x4 8ply*	10 Count		\$3.69
3432572	Tape Paper 2inx10yd *	10 Yards		\$7.99
3675394	Triple Anti-Biotic Ointment	1 oz	NEOSPORIN	\$6.99

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** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



PAIN RELIEVERS

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
3242062	Arthricream	3 oz	ASPERCREME	\$5.79
1981257	Acetaminophen Pain Relief Caplet Extra Strength 500 mg	50 Caplets	TYLENOL X/S	\$5.39
1981273	Acetaminophen Pain Relief Caplet Extra Strength 500 mg	100 Caplets	TYLENOL X/S	\$8.29
3998077	Acetaminophen Pain Relief Easy Tablet Extra Strength 500 mg	100 Tablets	TYLENOL X/S	\$7.89
2202943	Acetaminophen Pain Relief Tablet Regular Strength 325 mg	100 Tablets	TYLENOL	\$6.59
1343722	Tylenol Tablet Regular Strength 325mg	100 Tablets		\$9.99
2206951	Aspirin Enteric Coated Tablets 81mg	120 Tablets	BAYER LOW DOSE	\$5.39
1867381	Aspirin Tablet 325 mg	100 tablets	BAYER	\$2.89
3949674	Aspirin Enteric Coated Tablet 325 mg	125 Tablets	ECOTRIN	\$5.89
3760295	Ibuprofen Softgel Capsules 200 mg	40 Softgel Capsules	ADVIL	\$5.59
1981612	Ibuprofen Tab 200 mg	100 Tablets	ADVIL	\$7.79
1724624	Ibuprofen Tab 200 mg	50 Tablets	ADVIL	\$4.79
1724640	Ibuprofen Tab 200 mg	50 Caplets	ADVIL	\$4.79
1724657	Ibuprofen Caplet 200mg	100 Caplets	ADVIL	\$7.79
2081222	Muscle Rub Cream	1.25 oz	BENGAY	\$1.00
3635133	Muscle Rub	3 oz	BENGAY	\$4.89
3442126	Naproxen Sodium Tablet 220mg	50 Tablets	ALEVE	\$5.69
2025120	Naproxen Sodium Capsule 220 mg	50 Capsules	ALEVE	\$6.39

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



MISCELLANEOUS

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
3937034	Automatic Blood Pressure Machine**	1 Item		\$25.99
2203487	Digital Thermometer	1 Item		\$7.39
3752938	McKesson Offset-Handle Aluminum Cane - Bronze	1 Item		\$10.59
3752946	McKesson Heavy Duty Steel Cane	1 Item		\$24.09
2903268	Orange Glucose Tablets	50 Tablets		\$5.69
1416031	Petroleum Jelly	13 oz	VASELINE	\$4.19
1202746	Vaseline Pure Jelly	7.5 oz		\$4.99
2495240	Vaporub Ointment Jar	1.76 Oz Jar		\$7.49

NICOTINE REPLACEMENT

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
1135045	Nicotine Gum 4mg	50 Count	NICORETTE	\$25.29
1864610	Nicotine Lozenge Mint 4mg	72 Count	NICORETTE	\$33.59
1863893	Nicotine Lozenge Mint 2mg	72 Count	NICORETTE	\$33.59
3671203	Nicotine Patch 21mg	14 Patches	NICODERM	\$32.99
3671195	Nicotine Patch 14mg	14 Patches	NICODERM	\$32.99
3671187	Nicotine Patch 7mg	14 Patches	NICODERM	\$32.99

SLEEP AIDS

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
3960374	Sleep Aid Tab (Doxylamine) 25mg	32 Tablets	UNISOM	\$8.59

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.



VITAMINS, MINERALS AND SUPPLEMENTS

ID	Product Name	Count per Package	Reference Brand Product (if applicable)	Price
1519925	Calcium 600+ Vitamin D3 Tab**	300 Tablets		\$11.59
2090678	Viactiv Calcium+D Chocolate Tab**	60 Chewable Tablets		\$9.39
1588599	Certa-vite Senior Multivitamin Tab**	90 Tablets		\$6.79
3619236	Co Enzyme Q 10 - Bio-Quinone**	60 Tablets		\$15.29
1699636	Ferrous Sulfate FC 5Gr Tab **	100 Tablets		\$1.89
3788569	Fish Oil Softgel 1000mg **	100 Softgel Capsules		\$9.99
3910080	Folic Acid 400mcg Tab 250**	250 Tablets		\$6.99
1520006	Glucosamine Chondroitin Triple Strength + MSM**	80 Tablets		\$17.99
1568948	Eye Multivitamin Tablets**	120 Tablets	PRESERVISION	\$18.69
2207025	Magnesium Oxide Tablet 500mg**	100 tablets		\$3.59
1972629	Melatonin 5mg Tab	90 Tablets		\$8.19
3912938	Melatonin 3mg Tab	120 Tablets		\$7.19
1520048	One Daily Men Multi-Vitamin Tab **	100 Tablets		\$7.59
1520055	One Daily Women Multi-Vitamin Tab**	100 Tablets		\$7.59
1243187	Vitamin E Softgel 400 IU Nat/V 100**	100 Softgel Capsules		\$8.99
3945789	Vitamin B-12 1000mcg **	130 Tablets		\$6.59
1951862	Vitamin C Tab 500mg**	100 Tablets		\$3.99
1704493	Vitamin D Softgel 1000 IU **	120 Softgel Capsules		\$8.99
1524511	Zinc Tab 50mg **	100 tablets		\$3.49

* B/D Coverage: Under certain circumstances, this product may be covered under either Part B or Part D.

** Dual Purpose: These products may be purchased only after the enrollee discusses the purchase with their personal provider.

KelseyCare Advantage is offered by KS Plan Administrators LLC, a Medicare Advantage plan with a Medicare contract. Enrollment in KelseyCare Advantage depends on contract renewal.

Please contact our Member Services number at 713-442-CARE (2273) or toll-free at 1-866-535-8343 for additional information. (TTY users can call 711.) Hours are October 1 – March 31, 8:00 a.m. to 8:00 p.m. local time, seven days a week. From April 1-September 30, Monday through Friday, 8:00 a.m. to 8:00 p.m. local time. Messaging service used weekend, after hours and on federal holidays.

Esta información está disponible gratis en otros idiomas. Por favor póngase en contacto con nuestro número de Servicios para Miembros al 713-442-CARE (2273) o llame gratis al 1-866-535-8343. (Únicamente los usuarios de TTY deben llamar al 711). Estamos disponibles para recibir llamadas del 1 de octubre al 31 de marzo, de 8:00 a. m. a 8:00 p. m. hora local, los siete días de la semana. Del 1 de abril al 30 de septiembre, de lunes a viernes, de 8:00 a. m. a 8:00 p. m. hora local. El servicio de mensajería se utiliza los fines de semana, fuera del horario de atención y los feriados nacionales.

KELSEY PHARMACY LOCATIONS

CLEAR LAKE

1010 South Pond Drive
Webster, Texas 77598
P: (713) 442-4360
M-F: 8:00 a.m. to 6:00 p.m.
Saturday: 9:00 a.m. to 2:00 p.m.

CYPRESS

13105 Wortham Center Drive
Houston, Texas 77065
P: (713) 442-4055
M-F 8:30 a.m. to 5:30 p.m.

DOWNTOWN

The Shops at Houston Center
1200 McKinney Street, Suite 417
Houston, Texas 77010
P: (713) 442-6337
M-F: 7:30 a.m. to 5:30 p.m.

FORT BEND

(with Drive Thru)
11555 University Blvd.
Sugar Land, Texas 77478
P: (713) 442-9475
M-F: 8:00 a.m. to 6:00 p.m.
Saturday: 9:00 a.m. to 2:00 p.m.

KATY

22121 FM 1093
Richmond, Texas 77407
P: (713) 442-4179
M-F: 8:30 a.m. to 5:30 p.m.

KINGWOOD

25553 U.S. Highway 59
Porter, Texas 77365
P: (713) 442-2179
M-F: 8:30 a.m. to 5:30 p.m.

SPENCER R. BERTHELSEN, M.D., MAIN CAMPUS

2727 West Holcombe Blvd.
Houston, Texas 77025
P: (713) 442-0079
M-F: 8:00 a.m. to 7:00 p.m.
Saturday: 9:00 a.m. to 2:00 p.m.

MEYERLAND PLAZA

560 Meyerland Plaza Mall
Houston, Texas 77096
P: (713) 442-3200
M-F: 8:00 a.m. to 6:00 p.m.

PASADENA

5001 East Sam Houston
Parkway South
Pasadena, Texas 77505
P: (713) 442-7179
M-F: 8:30 a.m. to 5:30 p.m.

PEARLAND

2515 Business Center Drive
Pearland, Texas 77584
P: (713) 442-7272
M-F: 8:30 a.m. to 5:30 p.m.

SIENNA

7010 Hwy. 6
Missouri City, Texas 77459
P: (713) 442-6767
M-F: 8:30 a.m. to 5:30 p.m.

SPRING

15655 Cypress Woods Medical
Drive, Suite 150
Houston, Texas 77014
P: (713) 442-1779
M-F: 8:00 a.m. to 7:00 p.m.
Saturday: 9:00 a.m. to 2:30 p.m.

SUMMER CREEK (HUMBLE)

8233 N. Sam Houston Pkwy E.
Humble, Texas 77396
P: (713) 442-2079
M-F: 8:30 a.m. to 5:30 p.m.
Saturday: 9:00 a.m. to 2:00 p.m.

TANGLEWOOD

1111 Augusta Drive
Houston, Texas 77057
P: (713) 442-2450
M-F: 8 a.m. to 6 p.m.
Saturday: 9:00 a.m. to 2:30 p.m.

THE VINTAGE

(with Drive Thru)
10701 Vintage Preserve Pkwy.
Houston, Texas 77070
P: (713) 442-1579
M-F: 8:30 a.m. to 5:30 p.m.

THE WOODLANDS

106 Vision Park Blvd.
Shenandoah, Texas 77384
P: (713) 442-1975
M-F: 8:30 a.m. to 5:30 p.m.

WEST GRAND PKWY

2510 W Grand Pkwy N
Katy, TX 77449
P: (713) 442-2301
M-F: 8:30 a.m. to 5:30 p.m.