



SIMPLIFY. SAVE. RELAX.

NextRx, your health plan's preferred mail service pharmacy. For all your routine medication needs.



GET THE MOST OUT OF YOUR PHARMACY BENEFIT.

- Using NextRx mail service pharmacy for all your routine medications is convenient and easy. Free shipping, timely delivery, easy refills, access to a licensed pharmacist, and an opportunity to save on your prescriptions. Life is a little easier with personal services and savings.

Call **888-613-6091** for your free, personal cost savings estimate.

nextRxSM

PRESCRIPTION SAVINGS OPPORTUNITIES.

If you are taking prescription medications on a regular basis, you may save time and money with NextRx. While every prescription drug plan is different, NextRx mail service generally fills a 90-day supply of medication for the cost of a 60-day supply from a retail pharmacy. That means you may save an amount equal to one co-payment every three months. Plus, unless directed otherwise, NextRx dispenses generic medications that usually cost 30 to 60 percent less than the brand name counterparts.

Switch. Save. Relax.

CONVENIENT, PERSONALIZED SERVICE.

With NextRx, you receive accurate, quality medications – delivered right to your door. Standard shipping is free.

To help you stay on track with your medication therapy, NextRx will call you when it's time to refill your medication. You also get unlimited phone access to a licensed pharmacist for one-on-one counseling and information on your prescription or over-the-counter medications.

QUICK AND EASY REFILLS.

Once you start using NextRx, you can refill your prescriptions quickly and easily online at mynextrx.com or through an automated phone service from anywhere and at any time that's convenient for you. You will also receive a phone call to remind you when it's time to refill your medication.

HELPFUL, FRIENDLY SERVICE.

Ready to request a free cost savings estimate or need help obtaining a prescription from your doctor? A NextRx pharmacy associate is ready to assist. Call 888-613-6091, Monday through Friday, 8 a.m.-11 p.m. and Saturday 8 a.m.-7 p.m. ET (TTY 800-221-6915). If you have questions on your benefit coverage or need assistance with an existing prescription, call the number on your prescription bottle or health plan benefit card.



HOW TO ORDER YOUR PRESCRIPTION

Talk to a NextRx pharmacy associate and get your free, personal cost savings estimate. Then, when you're ready to place an order, choose a method that's most convenient for you.

By Mail: Use the order form below to order new prescriptions or refills by mail. Mail your order form and the original prescription to NextRx PO Box 746000 Cincinnati, OH 45274-6000.

By Fax: If you don't have the original prescription, you will need to complete the form included and ask your doctor to fax it, along with an original prescription, to NextRx at 800-905-9815. NextRx must receive faxed prescriptions directly from the physician's office.

By Phone: To order new prescriptions by phone, call a NextRx pharmacy associate at 888-613-6091. Call the phone number provided on your prescription bottle when you're ready to order a refill.

Mail your completed order form, original prescription(s) and payment to: **NextRx, PO Box 746000, Cincinnati, OH 45274-6000.**

If you have multiple prescriptions, include all prescriptions with the order form. You may duplicate the order form as needed.



SECTION 1: MEMBER INFORMATION

Provide policy or cardholder information as found on the health plan or benefit card. Please do not write on the back of form.

Name of Your Health Plan **Identification Number**

Policy or cardholder last name **First name** **Initial** **Date of birth (MM/DD/YYYY)** / /

SECTION 2: SHIPPING INFORMATION

Orders ship within seven days of receipt of valid order. Controlled and refrigerated medications cannot ship to a PO box. Schedule II controlled substances require signature on delivery.

New address Y N **Permanent address** Y N **Street address** **Apartment/suite**

City **State** **ZIP code** **Daytime phone # (including area code)**

E-mail address **Evening phone # (including area code)**

SECTION 3: PAYMENT INFORMATION

Payment is required before an order will ship. Do not send cash. Make checks and money orders payable to NextRx. There is a \$25 fee for returned checks. Credit cards are charged for the entire order and used for future orders unless a new payment method is specified. Overnight shipping does not expedite prescription processing time.

Payment method: Check Visa MasterCard American Express Discover Overnight Shipping (add \$20)

Account number **Expiration date** **Signature/date**

Amount enclosed: **Coupon Code:**

SECTION 4: PRESCRIPTION INFORMATION

Federally approved, generic-equivalent medications will be dispensed for brand name medications unless otherwise directed by the patient, physician, or health plan. If you require brand medications, please use the comments section below and list the names of the medications. Brand may be subject to higher cost.

Patient last name **First name** **Initial** **Patient date of birth (MM/DD/YYYY)** / / **Patient gender** M F

Drug allergies (check all that apply): Penicillin Aspirin Codeine Sulfa
 Other (list all, including over-the-counter medications)

Medical history (check all that apply): Diabetes Glaucoma High blood pressure Arthritis
 Thyroid Heart condition Asthma Other (list all)

New prescription: medication name	Doctor last name	Taken before	PLACE ON PROFILE
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> (will order when needed)
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

Refill orders: Rx refill #	Medication name	Refill orders: Rx refill #	Medication name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Comments