



# Get your medication delivered right to you.

Get 3-month supplies of your maintenance medications shipped right to you from OptumRx®, our plan's home delivery pharmacy.

## A 3-month supply means:

- You can take fewer trips to the pharmacy.
- You're less likely to miss a dose since you will have an extra supply on hand.

## With home delivery, you also get:

- Free standard shipping.
- Access to a pharmacist by phone any time day or night.

### How to enroll:



#### ePrescribe.

Your doctor can send an electronic prescription to OptumRx.



#### Online.

Register or sign in at [myuhc.com](https://myuhc.com)® or download the Health4Me® app.



#### Phone.

Call the number on your health plan ID card, 24 hours a day, 7 days a week.



#### Mail.

Complete and mail the attached form with your prescription to OptumRx.

### How it works:

1

**Order a three-month supply** of your maintenance medication—the ones you take regularly.

2

**OptumRx fills your order** and mails it to you.

3

**Your medication arrives** within 4 to 7 days of placing your order.



Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies. OptumRx is an affiliate of UnitedHealthcare.

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Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by UnitedHealthcare Insurance Company, United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company. OptumRx is an affiliate of UnitedHealthcare Insurance Company.

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# NEW PRESCRIPTION MAIL-IN ORDER FORM

## 1 Member and physician information — please use black or blue ink. One form per member.

Member ID Number		
(Additional coverage, if applicable) Secondary Member ID Number		
Last Name	First Name	MI
Delivery Address		Apt. #
City	State	ZIP
Phone Number with Area Code		
Date of Birth (mm/dd/yyyy)	Gender <input type="radio"/> M <input type="radio"/> F	Email
Physician Name		
Physician Phone Number with Area Code		

## 2 Health history

**Medication Allergies:**  Aspirin  Erythromycin  Quinolones  Others:  
 None known  Cephalosporins  NSAIDs  Sulfa  
 Amoxil/Ampicillin  Codeine  Penicillin  Tetracyclines

**Health Conditions:**  Asthma  Glaucoma  High cholesterol  Others:  
 None known  Cancer  Heart condition  Osteoporosis  
 Arthritis  Diabetes  High blood pressure  Thyroid Disease

**Over-the-counter/herbal medications taken regularly:**

## 3 Payment and shipping information — do not send cash

Standard delivery is included at no charge. New prescriptions should arrive within about 10 business days from the date the completed order is received. Completed refill orders should arrive within about 7 business days. OptumRx will contact you if there will be an extended delay in delivering your medications.

You may log on to **optumrx.com** to see if drug pricing information is available before enclosing payment. Once shipped, medications may not be returned for a refund or adjustment.

**Ship overnight.** Add \$12.50 to order amount (subject to change).

**Check enclosed.** All checks must be signed and made payable to: OptumRx.

**Charge to my credit card on file.**

**Charge to my NEW credit card.**

New Credit Card Number:

Expiration Date (Month/Year):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Visa, MasterCard, AMEX and Discover are accepted.

For new prescription orders and maintenance refills, this credit card will be billed for copay/coinsurance and other such expenses related to prescription orders. By supplying my credit card number, I authorize OptumRx to maintain my credit card on file as payment method for any future charges. To modify payment selection, contact customer service at any time.

## 4 Mail this completed order form with your new prescription(s) to OptumRx, P.O. Box 2975, Mission, KS 66201. DO NOT STAPLE OR TAPE PRESCRIPTIONS TO THE ORDER FORM.



