

Fill your prescriptions with home delivery.

How it works.

- **1** Order up to a three-month supply of your maintenance medications ones you take regularly.
- **OptumRx**® **fills your order**, mails it to you and lets you know when to expect your delivery.
- **Your medication arrives** within 4 to 7 days of placing the order. OptumRx will notify you if there will be a delay in your order.

Four easy ways to enroll:

ePrescribe.

Or your doctor can send an electronic prescription to OptumRx.

Online.

Log in to the website on your member ID card.

Phone

Call the toll-free number on your member ID card.

Mail.

Complete the attached order form and mail it to **OptumRx, P.O. Box 2975, Mission, KS 66201.**

Manage your medication home delivery on the go.

Order and track your prescriptions online or with our app.

The benefits of home delivery.



Your medication is delivered right to your mailbox, saving you a trip to the pharmacy.



Your maintenance medication could cost less.



Pay nothing for standard shipping.



Phone, text¹ and email reminders help you remember every dose and every refill.



OptumRx specializes in the delivery, clinical management and affordability of prescription medications and consumer health products. We are an Optum® company — a leading provider of integrated health services. Learn more at **optum.com**.

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OptumRx provides this service at no additional cost. Standard message and data rates charged by your carrier may apply.



NEW PRESCRIPTION MAIL-IN ORDER FORM

Member and p	hysician	inform	atio	n — pleas	e use	blac	k or blue	ink. On	e form pe	er member.
Member ID Number										
(Additional coverage, if a	applicable) S	econdary N	Vemb	oer ID Number	r					
Last Name				First Name					MI	
Delivery Address										Apt. #
City				State ZIP			ZIP			
Phone Number with Are	a Code			1						
Date of Birth (mm/dd/yyyy)		Gender O M O	F	Email						
Physician Name		1		1						
Physician Phone Number	with Area (Code								
Health history	,									
Medication Allergies: O None known O Amoxil/Ampicillin		sporins	O Erythromycin O NSAIDs O Penicillin			O Quinolones O Sulfa O Tetracyclines		O Others:		
Health Conditions: O None known O Arthritis	O Asthma O Cancer O Diabetes		O Glaucoma O Heart condition O High blood pressure		(O High cholesterol O Osteoporosis O Thyroid Disease		O Others:		
Over-the-counter/herb				•		• • • • •	710 2 12 22 2			
Payment and	shipping	inform	atio	n — do no	ot sen	d ca	sh			
Standard delivery is included order is received. Completextended delay in deliver	ded at no ch	narge. New ders should	presc	criptions should	d arrive	within	about 10 bu			
You may log on to optul may not be returned for	a refund or a			ng information	า is avail	able b	efore enclosi	ing paymen	ıt. Once shipp	ed, medications
Ship overnight. Add \$12.50 to order amount (subject to change). New Credit Card Number										
Check enclosed. All checks must be signed and made payable to: OptumRx.				Expiration Date (Month/Year) Expiration Date (Month/Year) Visa, MasterCard, A and Discover are ac						
○ Charge to my credit ○ Charge to my NEW							1	Gire	I DISCOVER GIE	accepicu.
Signature:								Da	ate:	
For new prescription orderelated to prescription or payment method for a	ders. By supp	plying my c	credit o	card number, I	I autho	rize O	ptumRx to	insurance a maintain r	nd other such	
Mail this comp Mission, KS 66										

