



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:

<input type="radio"/> None known	<input type="radio"/> Aspirin	<input type="radio"/> Erythromycin	<input type="radio"/> Quinolones	<input type="radio"/> Others:
<input type="radio"/> Amoxicil/Ampicillin	<input type="radio"/> Cephalosporins	<input type="radio"/> NSAIDs	<input type="radio"/> Sulfa	
	<input type="radio"/> Codeine	<input type="radio"/> Penicillin	<input type="radio"/> Tetracyclines	

Health Conditions:

<input type="radio"/> None known	<input type="radio"/> Asthma	<input type="radio"/> Glaucoma	<input type="radio"/> High cholesterol	<input type="radio"/> Others:
<input type="radio"/> Arthritis	<input type="radio"/> Cancer	<input type="radio"/> Heart condition	<input type="radio"/> Osteoporosis	
	<input type="radio"/> Diabetes	<input type="radio"/> High blood pressure	<input type="radio"/> 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. Prescriptions from OptumRx should arrive within 5 business days after we receive the complete order. 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.

<input type="radio"/> Ship overnight. Add \$12.50 to order amount (subject to change). <input type="radio"/> Check enclosed. All checks must be signed and made payable to: OptumRx. <input type="radio"/> Charge to my credit card on file. <input type="radio"/> Charge to my NEW credit card.	<p>New Credit Card Number</p> <div style="border: 1px dashed gray; height: 20px; width: 100%;"></div> <p>Expiration Date (Month/Year)</p> <div style="border: 1px dashed gray; padding: 2px;"> / </div> <p style="text-align: right; font-size: small;"> Visa, MasterCard, AMEX and Discover are accepted. </p>
<p>Signature: _____ Date: _____</p>	

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.



It's easy and may save you money. OptumRx delivers your medication right to your mailbox.

Why choose OptumRx® home delivery?

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

How does it work?

- 1 Order a 3-month supply of your maintenance medication —the ones you take regularly.
- 2 OptumRx fills your order and mails it to you.

How long does it take to get my home delivery order?

Prescriptions from OptumRx should arrive within 5 business days after we receive the complete order.

How can I start using home delivery?



ePrescribe

Your doctor can send an electronic prescription to OptumRx.



Online

Register or sign in at **myuhc.com**® or download the UnitedHealthcare app.



Phone

Call the number on your health plan ID card, TTY **711**, 24 hours a day, 7 days a week.



Mail

Complete order form on reverse side and send to:
OptumRx
P.O. Box 2975
Mission, KS 66201



Questions? Call the number on your health plan ID card. TTY **711**.



Select medications may not be available as a 90 day supply.

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