

Aetna Rx Home Delivery[®]

A Pharmacy That Fits Your Life

Aetna Rx Home Delivery is Aetna's mail order prescription drug service.

Prescription medications can be ordered through Aetna Rx Home Delivery to treat chronic conditions or diseases such as:

- Arthritis
- Asthma
- Diabetes
- Heart conditions
- High cholesterol
- Hypertension

Aetna Rx Home Delivery offers you

- **Convenience** — Quick, confidential shipping of your maintenance medications right to your home, place of work or any other location of your choice.
- **Ease of Use** — Our simple, **two-step process** makes ordering your maintenance medications easy.
- **Quality Service** — Registered pharmacists check orders for **accuracy** and are available 24 hours a day, 7 days a week in case of emergency.
- **Cost Savings** — Depending on your Aetna pharmacy benefits plan, you could **save money** by using Aetna Rx Home Delivery, and standard shipping is always free.

Get Started Today!

Start taking advantage of the benefits of Aetna Rx Home Delivery by following these two easy steps.

Step 1: Obtain a prescription from your doctor for each maintenance medication (typically a 90-day supply) that your family member is taking.

Step 2: Complete and mail the attached Aetna Rx Home Delivery **Order Form** and **Patient Registration Form** along with your new prescription(s) and payment to Aetna Rx Home Delivery.

OR: Have your doctor fax your prescription(s) and completed **Order Form** to 1-800-416-9264.

Note: Your shipment of medication(s) may be delayed if we do not receive payment in full at time of order or if your forms are not filled out completely.

Home Delivery of your Prescription Medications

Refilling Prescriptions

Ordering refills is easy. There are three methods to choose from:

1. By Mail

Complete the **Order Form** or the **Reorder Form** and mail with payment in full to the address listed on your form.

Order Forms are available online at www.AetnaRxHomeDelivery.com and the **Reorder Forms** will be included with your mail order shipments. Be sure to indicate on the forms which prescription(s) you would like to refill.

2. By Phone

Call Aetna Rx Home Delivery toll free at **1-866-612-3862** (TDD: **1-800-201-9457**). Provide your Aetna member ID number, your prescription number and your credit card number.

3. Online

Visit www.AetnaRxHomeDelivery.com, log in and complete the information requested. You can also track your prescription orders through this website.

When a prescription has no refills remaining, you will receive a **Prescription Renewal Form** with your final refill shipment. Complete either the **Prescription Renewal Form** or the **Order Form** (available online at www.AetnaRxHomeDelivery.com). Mail the form, new prescription and payment to Aetna Rx Home Delivery.

OR:

Have your doctor fax your prescription(s) to **1-800-416-9264**.

Customer Service

- To check the status of an order, place a refill or speak to a pharmacist, call us toll free at **1-866-612-3862** (TDD: **1-800-201-9457**). Customer service representatives are available: Monday – Friday, 7 a.m. – 11 p.m.; Saturday from 8 a.m. – 9:30 p.m. and Sunday from 8 a.m. – 6 p.m., Eastern Time.
- Pharmacists are available 24 hours a day, 7 days a week to answer questions and provide emergency assistance, if needed.
- **Standard delivery is free.** For rush requests, we can ship your medications overnight to the address of your choice (for an additional cost).
- For questions about your pharmacy benefit, please call the Member Services number on your member ID card.

Important Information

- Prescriptions for medications to treat an acute condition, such as an infection, should be filled at your local participating retail pharmacy.
- You may only obtain medication amounts authorized by your doctor. For example, if your doctor writes your prescription for a 30-day supply with two refills, you will only receive one 30-day supply at a time. If your doctor writes a prescription for a 90-day supply with two refills, you will receive one 90-day supply at a time.
- In accordance with applicable law and our pharmacy policies, Aetna Rx Home Delivery can only dispense the brand-name version of certain medications, unless your doctor specifically prescribes the generic alternative by name. If you have questions, call us toll free at 1-866-612-3862 (TDD: 1-800-201-9457).
- Generally, your medication(s) will be delivered to you postage-paid 7 – 10 days from when we receive your order. If we need to contact you or your prescribing physician about your order, delivery may take longer. If you prefer rush delivery, medication(s) can be shipped overnight for an additional charge.
- In order for Aetna Rx Home Delivery to dispense Schedule II medications in any quantity greater than a 30-day supply, your doctor must write the diagnosis on the prescription. Some examples of Schedule II medications are Ritalin® (methylphenidate hcl), OxyContin® (oxycodone SR) and MS Contin® (morphine SR).
- To obtain estimated price information for your maintenance medications, go to Aetna Navigator™, Aetna's online self-service member website (www.aetna.com), and use the Estimate the Cost of Care tool, or call the toll-free number on your Aetna member ID card.

www.AetnaRxHomeDelivery.com

OxyContin and MS Contin are registered trademarks of Purdue Pharma L.P. Ritalin is a registered trademark of Novartis.

"Aetna" is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies. The Aetna companies that offer, underwrite or administer benefits coverage include: Aetna Health Inc., Aetna Health of California Inc., Aetna Health of the Carolinas Inc., Aetna Health of Illinois Inc., Aetna Health Insurance Company of New York, Corporate Health Insurance Company and/or Aetna Life Insurance Company.

Aetna Rx Home Delivery refers to Aetna Rx Home Delivery, LLC, a subsidiary of Aetna Inc., a licensed pharmacy providing mail-order pharmacy services. Aetna's negotiated charge with Aetna Rx Home Delivery may be higher than Aetna Rx Home Delivery's cost of purchasing drugs and providing mail-order pharmacy services.

This material is for informational purposes only and is neither an offer of coverage nor medical advice. It contains only a partial, general description of plan benefits or programs and does not constitute a contract.

Order Form

Simply follow these easy steps to start using Aetna Rx Home Delivery®:

New Prescriptions

1. Complete Sections A, B and C of the Order Form.
If you are using Aetna Rx Home Delivery for the first time, or if your patient information has changed, also complete the Patient Registration Form.
2. Enclose your prescription(s) and method of payment.

Please ship all orders to:

Aetna Rx Home Delivery
P.O. Box 417019
Kansas City, MO 64179-9892

Refills

For Existing Aetna Rx Home Delivery Customers Only

1. Complete Sections A, B and C of the Order Form.*
OR
Complete the Reorder Form that was sent to you with your last shipment.
2. Enclose your method of payment.

Refill orders can also be placed by visiting

www.AetnaRxHomeDelivery.com or calling **1-866-612-3862**.
(TDD: 1-800-201-9457).

If your order requires special instructions, please provide:

Method of Delivery: Standard Overnight (additional charges apply)

Child-Proof Caps Yes No

Other (please specify)

SECTION A

Name

Subscriber Aetna ID Number

Home Address

City State Zip Code

Check here if home address is new

Home Phone Work Phone Cell Phone E-mail

Shipping Address (If different than home address)

Name

Address

City State Zip Code

SECTION B

Name	Medication	Prescribing Physician Name & Phone	New (X)	Refill Prescription Number (10 digits)
Total				

SECTION C

Method of Payment: Make check or money order payable to Aetna Rx Home Delivery or use your credit card. Please do not send cash.

MC/VISA/AmEx/Discover credit card number Expiration Date

Cardholder Name Signature

Total amount enclosed (if paying by check or money order)

*If any of your information has changed, please fill out the Patient Registration Form on the back of this page.
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Patient Registration Form

Fill out the following section if this is your first order with Aetna Rx Home Delivery or if this information has changed.

Please complete the following for EACH family member covered under your Aetna pharmacy benefit. Select "None" for family members with no allergies or health conditions. For your convenience, this information will be included as part of your family's profile with Aetna Rx Home Delivery. We will use this information to check for potential drug interactions and allergies to medications.

FAMILY MEMBER NAME	Allergies							Health Conditions							
	Date Of Birth	Gender (M/F)	None	Penicillin (1)	Chocolate (2)	Sulfa (3)	Aspirin (4)	Thyroid (5)	Diabetes (6)	Glaucoma (7)	Heart Conditions (8)	High Blood Pressure (9)	Ulcer	Epilepsy	Other (please specify)

If you or a family member has diabetes, indicate the type of supplies being used below:

Name	Monitor	Lancets	Test Strips
Name	Monitor	Lancets	Test Strips
Name	Monitor	Lancets	Test Strips
Name	Monitor	Lancets	Test Strips

Please note: By submitting this form, you authorize the release of all the foregoing information to Aetna Rx Home Delivery, LLC, and its affiliates.

Aetna Rx Home Delivery
P.O. Box 417019
Kansas City, MO 64179-9892
Tel: 1-866-612-3862
(TDD 1-800-201-9457)

