



**SHIPPING INFORMATION**

Regular: No charge     Second business day: \$15\*     Next business day: \$22\*    \*Additional costs charged to you.

Shipping time does not include processing time. Shipping prices are subject to change.

We are unable to ship second business day or next business day orders to PO boxes.

Shipping address must be a physical location.

Alternate Shipping Address (if different than permanent address)

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City    State      Zip Code                          Phone Number  
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This is a change of address     This is a one time address     Seasonal address from \_\_\_\_\_ to \_\_\_\_\_

**PAYMENT INFORMATION**

Payment is due with each order and may be made by credit card, check or money order. Orders received without payment may delay processing. There is a \$20 returned check charge.

**Check or money order**

Please make check or money order payable to Prime Therapeutics and include your member ID on the memo line. Do not send cash.

Check                       Money Order

**Credit card information**

To authorize payment by credit card, provide the account number, expiration date and signature. We accept Discover, MasterCard, VISA and American Express. This card will be used for this and all future orders unless we are notified otherwise.

Credit Card Number    Expiration Date  
□□□□□□□□□□□□□□□□    □□/□□

Use credit card on file, with the last 4 digits of:    □□□□

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

Pharmacy law may permit pharmacists to substitute a less expensive FDA-approved generically equivalent medication for a brand-name medication unless you or your prescriber indicate otherwise. Some health plans require the patient to pay the difference between generic and brand name cost.

By returning this form to PrimeMail, you consent to the release and use of the patient’s health information to the patient’s health plans and health care providers/agents for health benefits management. Prime Therapeutics’ use or disclosure of individually identifiable health information, whether furnished by you or obtained from other sources such as medical providers, shall be in accordance with federal privacy regulations under HIPAA (Health Insurance Portability and Accountability Act of 1996).

PrimeMail may contact your physician for clarification and safety purposes, which may result in your physician prescribing a different, clinically appropriate product.

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