

Why take time out of your busy day to refill your prescriptions at one of our pharmacies when you can do it from the convenience of your home or office?

Save time and energy

Here are the most convenient ways to order most refills without standing in line.

- **On the Web.** Order refills online, 24 hours a day, by going to the member section of our Web site at members.kp.org. When using secure features for the first time, all you'll need to do is register online to receive your password, which we'll mail to your home in three to seven days. Some services are not available in all areas. Once you have your password, you can refill prescriptions by placing your cursor on "Appointments/Rx refills" and clicking on "refill prescriptions" from the menu.
- **Using our automated telephone system.** Call anytime to order your prescription refills. Just call the pharmacy refill phone number highlighted on your prescription label, or **1-888-218-6245**. Choose option 1 to have your prescription mailed. Be sure to have the following information ready: your Medical Record Number, your prescription number, your home telephone number, and your credit card number and expiration date.

- **By mail.** You can also order prescription refills using our preprinted mail-order form. Use the attached form or pick up additional forms at any of our pharmacies. Complete the form, drop it in the mail, and you should receive your prescription(s) within two weeks. If you pay by check, it may take another day or two for your refills to be mailed.

Postage paid

For more convenient service, order by phone or online and select the mail-order option! You don't pay any extra cost for first-class U.S. postage, and we mail to you anywhere in the United States. Your prescription(s) should arrive within two weeks.

Most medications can be mailed, but there are some restrictions. Please check with your local pharmacy if you have a question about whether or not your prescription can be mailed.

We know you best

We work hard to provide you personalized care. Our pharmacists use a computer system that provides them with your prescription records. This helps us determine that a prescription you receive does not adversely interact with another drug you're currently taking or cause an allergic reaction based on the allergies you've told us about.

Our pharmacists are on hand during business hours at the pharmacy or by phone to provide you with a consultation to answer any questions you may have about your prescription.

Out of refills?

If you have no refills left when you place your order, we can contact your physician to request additional refills. In most cases, we can send an email to your physician so that we can get your prescriptions filled quickly. Please allow an additional 48 hours when you have no refills remaining.

Who to call?

We're here to answer your pharmacy questions. You can call the pharmacy's number printed on your prescription label or find the number in *Your Guidebook to Kaiser Permanente Services*. If you have questions about your benefits, call our Member Service Call Center, seven days a week, from 7 a.m. to 7 p.m., at **1-800-464-4000** or TTY **1-800-777-1370**.

Prescription Refill Mail-Order Request Form

Step 2—Payment information

All orders must be paid in advance. **Do not send cash.**

- VISA
- MasterCard
- American Express
- ATM/check card (Visa/MC logo)
- Check enclosed (make payable to Kaiser Permanente)
- Amount enclosed \$ _____

Cardholder name _____
Account number _____
Expiration date _____
Cardholder signature _____

Step 3—Shipping information

There is no additional charge for delivery by first-class mail. Please allow 7 to 10 days for your order to be processed.

Name (Last, First, MI) _____
Address _____
City () State () ZIP code _____
Telephone (day) (evening) _____





Our pharmacy services

Making it simpler and more convenient for you to order your prescriptions



Member and Marketing Communications
5503-0563-01-r02



members.kp.org

Our pharmacy services

At Kaiser Permanente our goal is to provide you with outstanding service to complement the high-quality medical care we provide. Our pharmacies are committed to meeting your prescription drug needs, and we've developed ways to make ordering your prescription refills quick and simple. You don't even have to come into the pharmacy!



Prescription Refill Mail-Order Request Form

Fill in the information (please print clearly), tear off the form, and mail to the address below with your check or credit card information.

Do not send cash.

Kaiser Permanente CPP Pharmacy

P.O. Box 5060

Livermore, CA 94551-5060

Step 1—Member information

Use one box per member. If you have additional members and/or prescription refills, please attach a separate piece of paper.

Member #1

Medical Record Number	Prescription number	Drug name
Name (Last, First, MI):	1	
	2	
	3	
	4	

Member #2

Medical Record Number	Prescription number	Drug name
Name (Last, First, MI):	1	
	2	
	3	
	4	

Comments
