



Mail Order Member Education

Members may choose to receive prescription medications via mail order pharmacy. This alternative to retail pharmacy is completely optional. Should you wish to enroll in mail order, please follow the steps below, and note that there will be no changes in your plan setup:

1. On page 2 of this document, you will find contact information for the mail order pharmacy. Please contact this pharmacy to set up an account with them. You can complete this step in one of the following methods:
 - a. Set up a profile on their website
 - b. Call their customer service number
2. Have a list of the medications and prescribing doctors ready to input when asked.
3. Provide the pharmacy with your TrueScripts Processing information:
 - a. RxBin: 025862
 - b. RxPCN: TSAC
 - c. RxGroup: 00004926
 - d. Your Member ID number printed on your card
4. If you have current refills at another pharmacy, you can ask that the mail order pharmacy call and request that they are transferred over to your new pharmacy.
5. A new prescription may be needed from your healthcare provider for 90-day fills at the retail pharmacy or mail order. The pharmacy can reach out to your provider to request this script. Since your provider should be able to call this into your pharmacy of choice, an office visit typically will not be required.
6. If the pharmacy informs you that your insurance is not contracted with TrueScripts, please request that they call TrueScripts for us to assist further. You may also contact our Member Care Team, who will be happy to provide you with assistance and **Amazing Care**.

Mail Order Pharmacy Network

To enroll in mail order, please visit a website below:



260 Logistics Avenue, Suite B
Jeffersonville, IN 47130
PHONE: 1-800-607-6861 FAX: 1-800-633-0334
E-Scribe: NCPDP 025862
pharmacy.costco.com

**Membership not required to utilize mail order*



P.O. Box 2718
Portland, OR 97208
PHONE: 1-800-552-6694 FAX: 1-800-723-9023
NABP 3812674 - NPI 1528003910
ppsrx.com



by **amazon** pharmacy

250 Commercial Street, Suite 2012
Manchester, NH 03101
PHONE: 1-866-332-1668 FAX: 603-935-9108
E-Scribe: NCPDP 3061582
pillpack.com
(PillPack Dispenses 30-Day Supply Only)



28 Conneaut Lake Rd
Greenville, PA 16125
PHONE: 844-522-CARE (2273) FAX: 844-308-1485
E-Scribe: NCPDP 6005943
carefilltc.com

**Care-fill mail order is not yet available in CA.*