

Enrollment Form for Walgreens Specialty Pharmacy, LLC

How to place your initial order with Walgreens Specialty Pharmacy:

- 1) Print and complete the Enrollment Form. Please print clearly.
- 2) Attach ORIGINAL prescription provided by your physician or ask your physician to fax the prescription to Walgreens Specialty Pharmacy at 1-866-515-1356.
- 3) Mail Enrollment Form and ORIGINAL prescription to Walgreens Specialty Pharmacy, 41460 Haggerty Circle, South, Canton, Michigan 48188.

If you have questions or concerns, please call the Walgreens Specialty Pharmacy Customer Care Team toll free at 1-866-515-1355. Our hours are Monday through Friday, 8 a.m. to 8 p.m. and Saturday 8 a.m. to 5 p.m.

Step 1: Demographic Information

Subscriber's Name _____ Date of Birth ____/____/____
 Policy # _____ Group # _____
 Patient Name _____ Date of Birth ____/____/____
 Delivery Address _____
 Day Phone Number w/area code _____ Evening Phone Number w/area code _____
 E-mail Address _____
 Physician's Name _____ Phone Number w/area code _____
 Check One: Original prescription enclosed Physician will fax prescription

Step 2: Delivery Information

Requested Date of Delivery ____/____/____ (You will be contacted by Walgreens Specialty Pharmacy if the delivery date cannot be accommodated. Deliveries are available Tuesday through Friday.)
 Medication(s) Requested _____

 Supplies Needed* No Yes If yes, please check supplies needed:
 Alcohol Wipes Sharps Container Pen Needles Injection Syringes Mixing Syringes Inject-Ease

*Please note: Walgreens Specialty Pharmacy provides standard supplies as a courtesy and cannot accommodate special requests. The quantity of supplies sent is based on the days supply of medication dispensed.

Step 3: Payment Information

1) Paying by Credit Card (check one) Visa MC Discover AMEX
 Credit Card # _____ Exp Date ____/____/____
 Security Code _____ (3 digits on back of card for Visa and 4 digits on front of card for AMEX)
 Cardholder's Signature _____
 Check here to authorize Walgreens Specialty Pharmacy to bill and debit your credit card for future orders.
 Call Walgreens Specialty Pharmacy at 1-866-515-1355 to set up autopay by phone.

2) Paying by Check via Phone (check one) Checking Savings
 Account Number _____ Routing Number _____
 Signature _____ Name of Financial Institution _____
 Check here to authorize Walgreens Specialty Pharmacy to bill your checking/savings account for future orders.
 Call Walgreens Specialty Pharmacy at 1-866-515-1355 to set up autopay by phone.

3) Paying by Check or Money Order via Mail
 Please make your check or money order payable to Walgreens Specialty Pharmacy, and mail to: Walgreens Specialty Pharmacy, 41460 Haggerty Circle, South, Canton, Michigan 48188.