



# Specialty Medication Request Form

Aetna Specialty Pharmacy®  
503 Sunport Lane  
Orlando, FL 32809

Customer Service: 1-866-782-ASRX (1-866-782-2779) Fax Order Submission: 1-866-FAX-ASRX (1-866-329-2779)

**For your convenience, this medication request may be submitted via E-PRESCRIBE to Aetna Specialty Pharmacy**

Aetna Specialty Pharmacy will verify benefits and contact members to confirm delivery before medication is shipped.

**Today's Date:** \_\_\_\_\_ **Date Needed:** \_\_\_\_\_

### A. PATIENT INFORMATION (AS IT APPEARS ON MEMBERSHIP CARD)

First Name:		Last Name:		DOB:	
Address:			City:		
State:	ZIP:	Weight:	Height:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Primary Phone:			Alternate Phone:		
Allergies:					

### B. INSURANCE INFORMATION

<b>Carrier Name:</b> _____	Does patient have other coverage? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Member ID #:</b> _____	If yes, Carrier Name: _____
<b>Group #:</b> _____	Member ID#: _____
<b>Insured:</b> _____	Insured: _____
<b>Medicare:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, ID #: _____	<b>Medicaid:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, ID #: _____

### C. PHYSICIAN INFORMATION

First Name:		Last Name:		(Check One): <input type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> NP <input type="checkbox"/> PA	
Address:			City:		
State:	ZIP:	DEA #:	NPI #:		
Phone:		Fax:	Office Contact:		

### D. DIAGNOSIS

<b>Primary ICD Code:</b> _____	<b>Other ICD Code:</b> _____
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### E. PRESCRIPTION

Please refer to the insurance carrier's participating provider precertification list to verify precertification requirements.

Medication	Strength	Directions	Quantity	Refills

**Ship to:**  Physician's Office  Patient  Other address:

Interchange is mandated unless practitioner handwrites the words "**MEDICALLY NECESSARY**" for each medication.

**Prescriber's Signature (Required by Law):** \_\_\_\_\_

Aetna Specialty Pharmacy refers to Aetna Specialty Pharmacy, LLC, a subsidiary of Aetna Inc., which is a licensed pharmacy that operates through specialty pharmacy prescription fulfillment. This pharmacy is a for-profit entity.