Referral Tips

E-prescribe referrals

AllianceRx Walgreens Prime is helping to make prescribing easier and more efficient. E-prescribing can reduce the wait between the time a prescription is written and when the patient actually receives the medication. It also can effectively reduce the number of prescription errors attributable to hard-to-read handwriting or illegible faxes.

Refer prescriptions to AllianceRx Walgreens Prime

<table>
<thead>
<tr>
<th>Address</th>
<th>Phone #</th>
<th>NCPDP #</th>
<th>Fax #</th>
<th>E-Prescribing Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>AllianceRx Walgreens Prime 10530 John W. Elliott Drive Suite 100 Frisco, TX 75033</td>
<td>800-424-9002</td>
<td>4591055</td>
<td>800-874-9179</td>
<td>ALLIANCE RX WALGREENS PRIME-SPEC-TX</td>
</tr>
</tbody>
</table>

Easy referrals

To find AllianceRx Walgreens Prime in your ERx system, please try the following:

1. Search by phone or NCPDP number
2. If you are unable to locate us, you can:
   • Still reach us by calling 855-244-2555
   • Ask your system administrator to refresh the ERx system
3. Once you find AllianceRx Walgreens Prime in your system, add us to your favorites

E-prescribe example

E-prescribing Name

ALLIANCE RX WALGREENS PRIME-SPEC-TX

See reverse for information on faxed referrals.
Fax referrals

Fill out the referral form with patient information, clinical assessment and medication details. Fax the referral to the number below.

<table>
<thead>
<tr>
<th>Address</th>
<th>Phone #</th>
<th>Fax #</th>
</tr>
</thead>
</table>
| AllianceRx Walgreens Prime  
10530 John W. Elliott Drive  
Suite 100  
Frisco, TX 75033 | 800-424-9002 | 800-874-9179 |

Helpful tips to hasten the process

**REMEMBER** to include the true date by which the patient needs the medication in hand.

**DO NOT** write “urgent” or “stat,” as neither is an applicable date, and entering either will cause delays in your patient receiving medication.

**REMEMBER** to fill out the ICD-10 code carefully, as many pharma programs require it, as well as diagnosis, in order to ensure that a patient will be eligible to apply for assistance.

**REMEMBER** to include the patient’s current weight, as it may impact medication dosing.

Fax the completed referral form along with the following documentation:

- Copy of each side of the patient’s insurance card
- Copies of clinical information for patient, including lab values
- Chart notes from the patient’s last two visits