

## CWRU Member Enrollment Steps

YOUR PRESCRIPTION TO REDUCE RX COST AUGUST 2<sup>ND</sup>, 2018

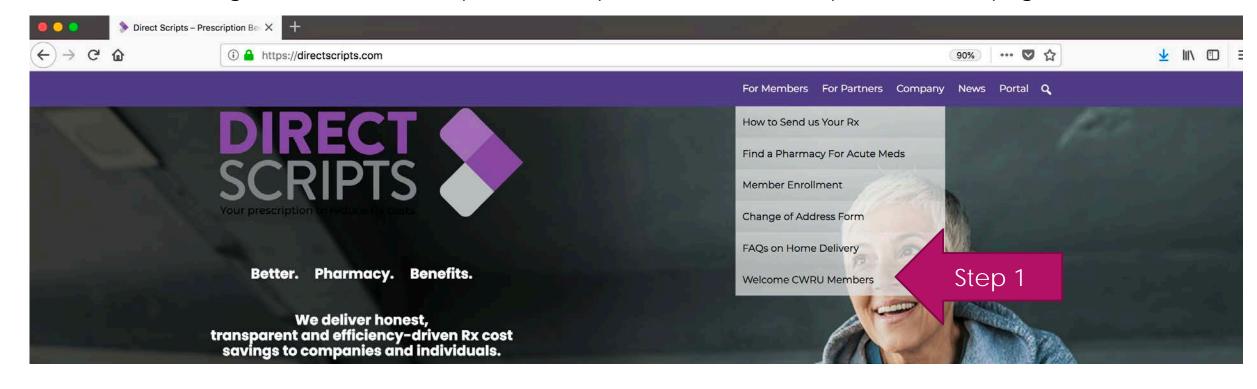


## Direct Scripts Home Delivery Setup

Each member over the age of 18 needs to complete their own enrollment form. A parent may complete their minor dependents' information when they complete their own form.

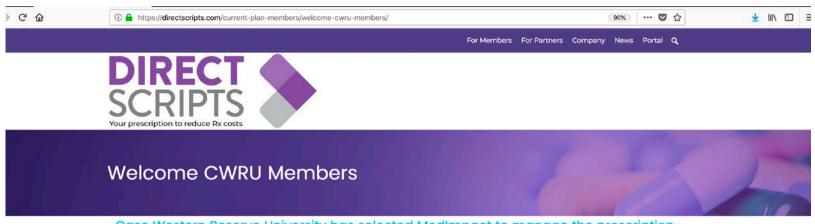
To get started go to directscripts.com.

\*Note. If member goes to cwru.directscripts.com, the process will start on step 2 on the next page.





## Step 2



Case Western Reserve University has selected MedImpact to manage the prescription drug benefit program effective August 1st, 2018.

The plan features an extensive retail network for your acute medication needs and convenient home delivery for your maintenance medications.





### Step 3 Complete Enrollment Form

#### **Enrollment Page**

The completion of the enrollment form below provides Direct Scripts the information necessary for us to process your prescriptions.

If you have maintenance prescriptions at a retail pharmacy with refills, you will be asked when you would like them transferred to Direct Scripts. Once you completion the form, you will be redirected to a page with instructions on how to send Direct Scripts your new maintenance prescriptions and what happens next.

#### Direct Scripts Mail Order Enrollment Form

All information is held in strictest confidence. At no given point is information disclosed or shared without client's written consent. The enrollment form provides the demographic information necessary for us to process your prescription at our mail order center. Upon receipt of your prescription, we will send you a welcome email to set up your online Direct Scripts account.

If you have maintenance prescriptions at a retail pharmacy with refills, you will be asked when you would like them transferred to Direct Scripts

Once you comple the form, you will be redirected to a page with FAQ's

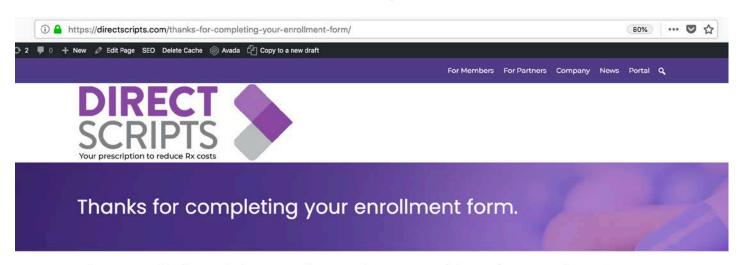


## Step 4 - Submit

By clicking the submit button, I agree to terms & conditions.	
*We offer regular text messaging and email to provide helpful information like the status of your prescription. Regular text messages and emails are not secured by a technical process called	
encyrption so there may be some level of risk the information could	
Do you have any other information you would like to share with us?	
like to share with us?	
110)	
I certify that all the information on this form is correct and I have read and agree t	o the above statements I
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mail to release all information on this form concerning preso	
permit Direct Scripts Mall to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations.	
permit Direct Scripts Mail to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tablet/screen or left-click and hold as you sign with your mouse.	
permit Direct Scripts Mall to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations.	
permit Direct Scripts Mall to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tablethcreen or left click and hold as you sign with your mouse.  Clear	
permit Direct Scripts Mall to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tablethcreen or left click and hold as you sign with your mouse.  Clear	
permit Direct Scripts Mall to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tablethcreen or left click and hold as you sign with your mouse.  Clear	
permit Direct Scripts Mail to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tabletiscreen or left click and hold as you sign with your mouse.  Clear  DateTime	
permit Direct Scripts Mail to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tabletiscreen or left click and hold as you sign with your mouse.  Clear  DateTime	
permit Direct Scripts Mail to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tabletiscreen or left click and hold as you sign with your mouse.  Clear  DateTime	
permit Direct Scripts Mail to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tablet/screen or left click and hold as you sign with your mouse.  Clear  DateTime  Fril, 03 Aug 2018 09-38AM	pription orders to my
permit Direct Scripts Mail to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tablet/screen or left click and hold as you sign with your mouse.  Clear  DateTime	pription orders to my
permit Direct Scripts Mail to release all information on this form concerning prescriber for the purpose of treatment, or healthcare operations. *  Sign by using a touch tablet/screen or left click and hold as you sign with your mouse.  Clear  DateTime  Fri, 03 Aug 2018 09:38AM	



# Step 5 - Landing Page After Completion



The completion of the enrollment form provides Direct Scripts the information necessary for us to process your prescriptions.

If you have maintenance prescriptions at a retail pharmacy with refills, we'll transfer the prescriptions on the time frame requested.

Once your prescriptions are due to be filled, we'll notify you and also send you a welcome email to our patient portal where you can provide method of payment.

If you would like to learn how to send Direct Scripts your prescription click here.



Questions?

#### VISIT

HTTPS://DIRECTSCRIPTS.COM/CURRENT-PLAN-MEMBERS/WELCOME-CWRU-MEMBERS/