

Instructions to set up an account on Anthem website

The Anthem website can be accessed at:

<http://www.anthem.com/health-insurance/home/overview>

Begin the registration process by clicking the “Register Now” option.

The screenshot shows the Anthem website homepage. At the top, there are navigation links for Providers, Employers, Agents/Brokers, State Sponsored, and Federal Employee Program (FEP). The main navigation bar includes "Shop For Insurance", "Health & Wellness", and "Customer Support". A callout box with the text "Click here to begin the registration process." points to the "Register Now" button in the Member Log In section. Other elements include a "Get a Free Instant Quote" section, "In the News" section, and a footer with various links and social media icons.

Downloading picture http://www.anthem.com/images/common/graphics/sitenav/5_MyHealthAdvant_rotation.jpg...

Complete all of the information on this page.

The screenshot shows the "New Account Registration" page. It features a progress bar with four steps: Step 1: Personal Information, Step 2: Username & Password, Step 3: Email Setup, and Step 4: Confirm Registration. The "Login Information" section is highlighted, showing fields for "Create Username:" and "Create Password:". A callout box with the text "Complete the requested information. Pay close attention to the User Name requirements." points to the Username field. The page also includes a "Login Security Question" section and a "HELPFUL HINTS" section with advice on creating a strong password.

Enter your email address.

MEMBER LOG IN [Guided Tour](#)

Username

Password

[Register Now](#) [LOG IN](#)

[Learn more about Secure Log In](#)

[Forgot Username](#) or [Password](#)

Account Registration

Step 1: Personal Information | **Step 2:** Username & Password | **Step 3:** Email Setup | **Step 4:** Confirm Registration

Email is fast and easy

We need your email address in order to set up your online profile. Also, check the boxes to get emails instead of paper mail to save you time and hassle.

* **Email Address:**

Email me information about new products and services, benefit updates, and notices that I am required to get by law to this email address.

Your privacy is very important to us.

We will never sell or share your email address. It will only be used for sending you email messages about your plan or coverage. You can request a paper copy anytime. For more info, read our [Privacy Policy](#).

[CANCEL](#) [SAVE & CONTINUE](#)

USEFUL TOOLS

- [FIND A DOCTOR](#) (Dentist, Pharmacy, or Hospital)
- [PRESCRIPTION BENEFITS](#)
- [CHECK CLAIM STATUS](#)

Once you register, did you know that you could:

- Access your plan and benefit information.
- Check the status of a claim.
- Find a doctor or hospital in your network.
- "Go Green" for 24/7 convenience with less paper!

SHOP FOR INSURANCE: Health Insurance > Medicare > Dental Insurance > Vision Insurance > Life Insurance >

OTHER ANTHEM WEBSITES: Providers > Employers > Agents/Brokers > State Sponsored > Federal Employee Program (FEP) >

CUSTOMER SUPPORT: Contact Us > FAQs > Download Forms > Feedback

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This is your confirmation page. Make sure all of your information is correct before you click the confirm button.

MEMBER LOG IN [Guided Tour](#)

Username

Password

[Register Now](#) [LOG IN](#)

[Learn more about Secure Log In](#)

[Forgot Username](#) or [Password](#)

Account Registration

Step 1: Personal Information | **Step 2:** Username & Password | **Step 3:** Email Setup | **Step 4:** Confirm Registration

Step 1: Personal Information [Edit](#)

Member ID Number:

FirstName:

Middle Initial:

Last Name:

Date of Birth:

Step 2: Username & Password [Edit](#)

Username:

Password:

Security Question #1: What school did you attend for the third grade?

Security Answer:

Step 3: Email Setup [Edit](#)

Email Address: @yahoo.com

Email me information including legally required plan notices, special offers, new products, and offerings: No

[CANCEL](#) [CONFIRM](#)

USEFUL TOOLS

- [FIND A DOCTOR](#) (Dentist, Pharmacy, or Hospital)
- [PRESCRIPTION BENEFITS](#)
- [CHECK CLAIM STATUS](#)

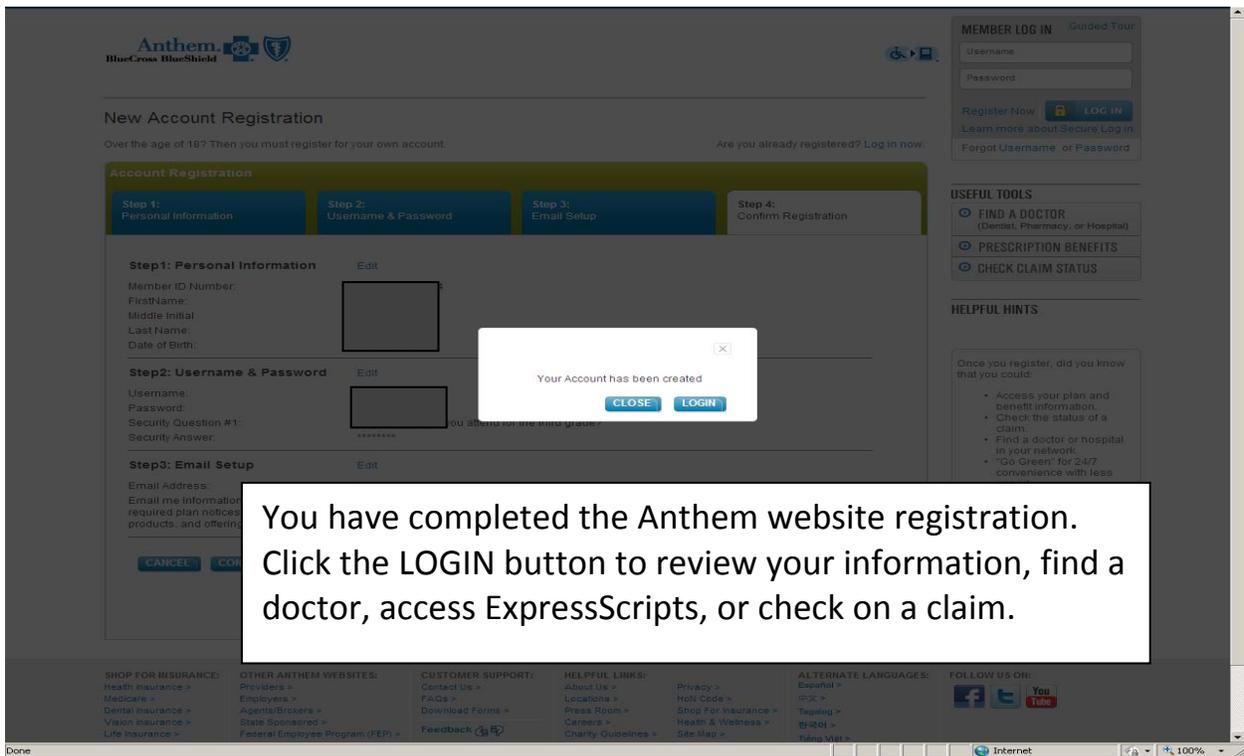
HELPFUL HINTS

Once you register, did you know that you could:

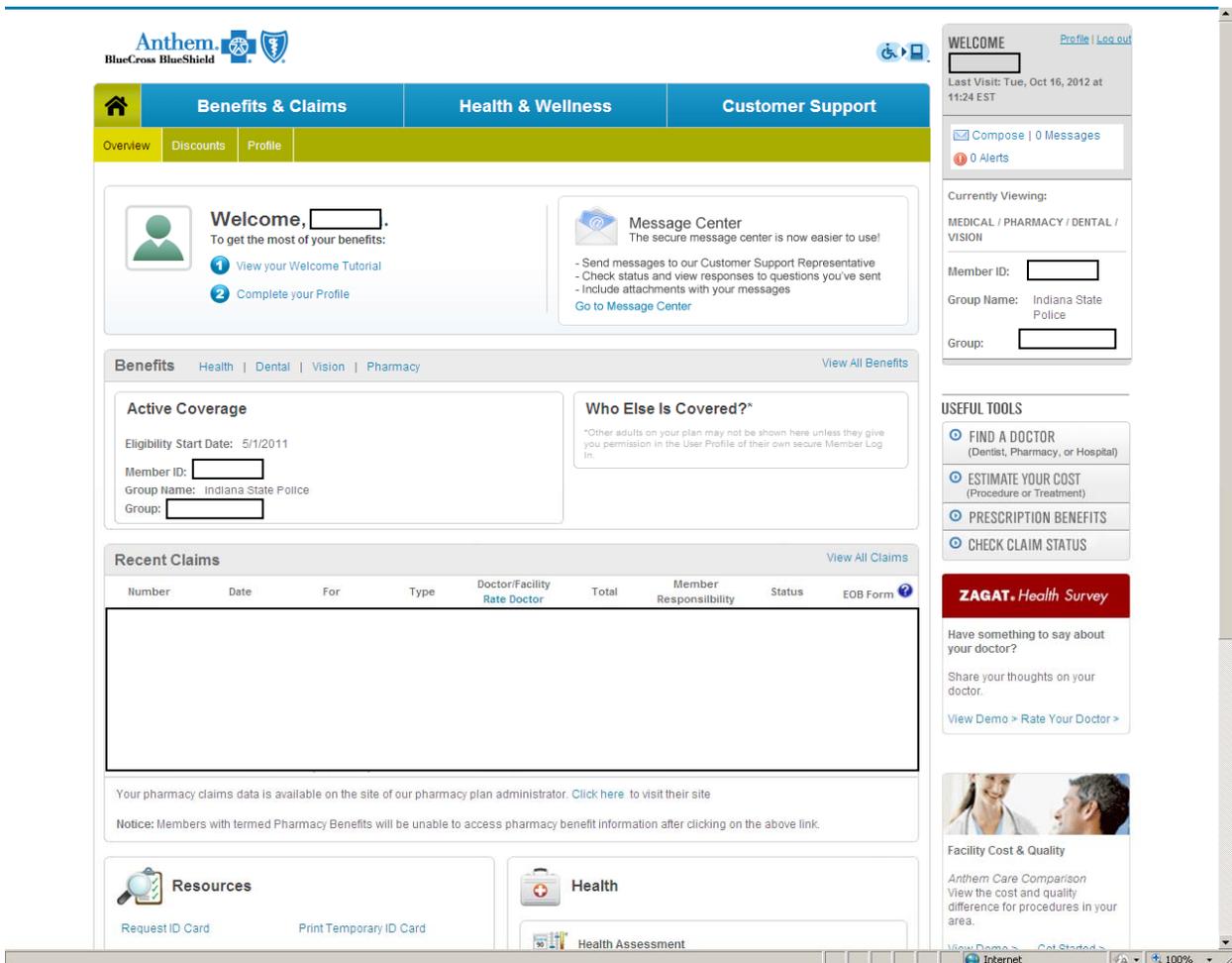
- Access your plan and benefit information.
- Check the status of a claim.
- Find a doctor or hospital in your network.
- "Go Green" for 24/7 convenience with less paper!

SHOP FOR INSURANCE: Health Insurance > Medicare > Dental Insurance > Vision Insurance > Life Insurance >

OTHER ANTHEM WEBSITES: Providers > Employers > Agents/Brokers > State Sponsored > Federal Employee Pro



Your Login page will look like the page below.



Instructions to set up mail order prescriptions.

Click on the Prescription Benefits option on the right side of the page.

Click Prescription Benefits

The prescription option will access the Express Scripts web page.

Click either I Have Read or Read Later

To begin home delivery, click on **Fill a New Prescription** or **Switch to Home Delivery** in the first column.

The screenshot shows the Anthem Blue Cross Blue Shield website. The top navigation bar includes 'Benefits & Claims', 'Health & Wellness', and 'Customer Support'. Below this, there are tabs for 'Overview', 'Health', 'Pharmacy', 'Dental', and 'Vision'. The 'Pharmacy' tab is active. The main content area is divided into three columns: 'Pharmacy Self Service', 'Pharmacy Benefits', and 'Other Pharmacy Resources'. The 'Pharmacy Self Service' column contains links for 'Place an Order', 'Order a Refill', 'Renew a Prescription', 'Fill a New Prescription', 'Switch to Home Delivery', 'Check Status', 'Check Order Status', and 'Check on Renewal Request'. A callout box with a black border and white background points to the 'Fill a New Prescription' and 'Switch to Home Delivery' links, containing the text: 'Click Fill a New Prescription or Switch to Home Delivery'. To the right, there are sections for 'Covered Members', 'USEFUL TOOLS' (including 'FIND A DOCTOR', 'ESTIMATE YOUR COST', 'PRESCRIPTION BENEFITS', and 'CHECK CLAIM STATUS'), and 'I Need Additional Information' (including 'Submit a New Prescription', 'Save With Home Delivery', and 'Member Education Center').

Click **Fill a New Prescription**. You can then click **prescription order form** to get a blank order form or complete a web prescription order form.

The screenshot shows the Express Scripts website. The top navigation bar includes 'Shopping Cart', 'Home', 'FAQ', 'Contact Us', and 'Sign Out'. The main content area is titled 'Fill a New Prescription'. It contains a list of steps: '1. Print a prescription order form.' and '2. Mail or fax it to us with your new prescription.' Below this, there are two columns: 'To Mail Your Prescription' and 'To Fax Your Prescription'. The 'To Mail Your Prescription' column contains the text: 'Send your written prescription for up to a 90-day supply of medication (or the maximum allowed by your plan) and your completed order form to: Express Scripts, P.O. Box 99584, St. Louis, MO 63166-6584'. The 'To Fax Your Prescription' column contains the text: 'After you've completed the patient sections of the order form, ask your doctor to fill out the rest and fax it to: 1-800-875-6356. Note: Faxes must be sent from a doctor's office, not your home or work. We cannot accept prescriptions for Class II medications by fax.' A callout box with a black border and white background points to the 'prescription order form' link in step 1, containing the text: 'Click Fill a New Prescription, then click prescription order form'. At the bottom, there is a 'Feedback' link.

Select either Option 1 or Option 2 on this screen.

EXPRESS SCRIPTS® Shopping Cart Home FAQ Contact Us Sign Out Adjust Font Size

Hello []

Fill a New Prescription

You can print an order form in two ways:

Option 1
[Print a blank order form now](#) (PDF file) and complete it by hand.

Option 2
Print a **completed** order form by selecting a patient below.

Patient
[]

[Next >>](#)

PDF files require [Adobe Acrobat Reader](#)

Print a blank order form or select a patient and click the Next button.

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[-]
Feedback

Complete the information on this page and click Create Order Form.

Fill a New Prescription

To help us process this patient's orders, please provide the information below.

* Required

Name, Date of Birth & Gender

Patient Name: []

Date of Birth: []

Gender *

Male

Female

Home Address

This is where we will ship future orders. To verify or change your billing address, [call us](#).
Away from home for awhile? [Set up a temporary change of address](#)

Address Line 1 * []

Address Line 2 []

City * [] State * [IN] ZIP Code * []

Contact Information

Be sure to provide your correct phone number in case we need to contact you about your prescriptions.

Daytime Phone (Area code and number) [] Preferred

Evening Phone (Area code and number) [] Preferred

Cell Phone (Area code and number) [] Preferred

[Create Order Form](#) [Back](#)

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[+]
Feedback

When you select option #2 above and select a patient, the order form will automatically be filled with your personal information. Click the Print your form to see the form. Please note that you will need to set up a payment method before you submit the new prescription.

EXPRESS SCRIPTS® Shopping Cart Home FAQ Contact Us Sign Out Adjust Font Size

Hello [Redacted]

Fill a New Prescription

Your personalized order form is ready.

[Print your form](#) (PDF File)

Click Print your form

How to Mail or Fax Us Your Prescription

The instructions below are also on your order form.

To Mail Your Prescription
Send your written prescription for up to a 90-day supply of medication (or the maximum allowed by your plan) and your completed order form to:
Express Scripts
P.O. Box 96584
St. Louis, MO 63166-6584

To Fax Your Prescription
After you've completed the patient sections of the order form, ask your doctor to fill out the rest and fax it to:
1-800-875-6356
Note: Faxes must be sent from a doctor's office, not your home or work. We cannot accept prescriptions for Class II medications by fax.

Once we receive your order, we'll fill and ship your prescription in 3-5 business days, plus time for delivery.

Note: If you have a credit or check card on file with us, that card will be used for payment.

- [Print another order form](#)
- [Home](#)
- [Sign Out](#)

PDF files require [Adobe Acrobat Reader](#)

NOTE: If you have a credit or check card on file with us, that card will be used for payment.

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Feedback

Done Internet 100%

Below is an example of a Web Prescription Order Form. There are two ways to submit a new prescription. Have your Doctor write a prescription and send your new prescription along with the form to Express Scripts via US mail. You can have your Doctor fill out the bottom portion of the form and have your Doctor fax the form to Express Scripts.



EXPRESS SCRIPTS®

WEB PRESCRIPTION ORDER FORM

To MAIL your prescription:

1. Have your Doctor write a prescription.
2. Send your new prescription along with this form to:
Express Scripts
P.O. Box 66584
St. Louis, MO 63166-6584

To FAX your prescription:

1. Have your Doctor fill out the bottom portion of this form.
2. Doctor can fax to: 800-875-6356
Class II medications cannot be faxed.
Faxed prescription can only be processed if submitted by a Doctor.

PATIENT

Member ID:

Last Name: FirstName:

Date of Birth: Phone:

Address:

Email:

Allergies:

Health Conditions:

Over-the-Counter (OTC) Medications:

DOCTOR/PRESCRIBER

DEA:

Name:

Address:

Phone:

Fax:

PATIENT OPTIONS

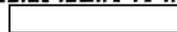
I want non-child resistant caps for all future

I want a copy of my bottle label in large print on a separate sheet of paper.

Check here for rush shipment. Your order once received and filled, will be shipped overnight for \$21



2161



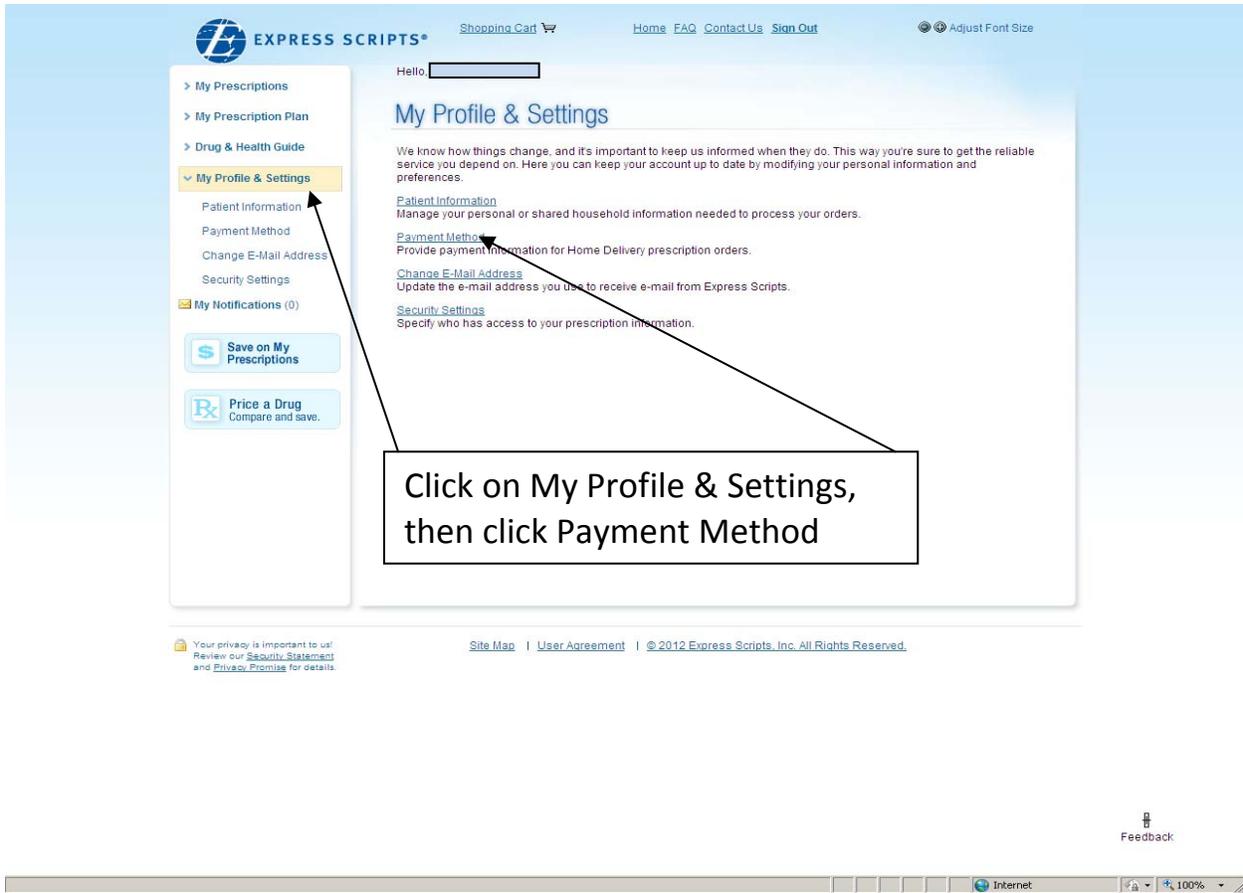
RX FORM				
Patient Name: <input type="text"/>			Date: ___/___/___	
Drug Name/Form	Strength	Qty	Directions for Use	Refills

Doctor/Prescriber Signature - Substitution Doctor/Prescriber Signature - Dispense as Written

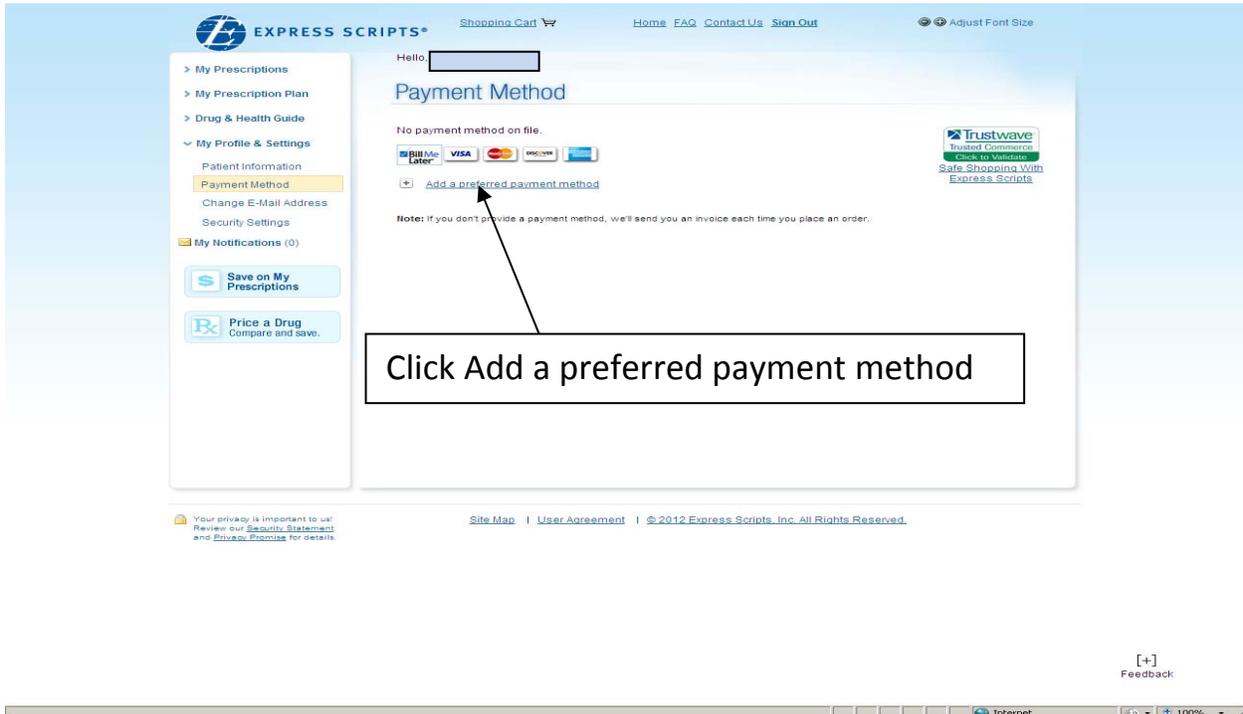
IMPORTANT CONFIDENTIALITY NOTICE: This and any documents accompanying this transmission may contain confidential health information that is legally privileged. This information is intended only for the use of the individual or entity named above. The authorized recipient of this information is prohibited from disclosing this information to any other party unless required to do so by law or regulation. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or action taken in reliance on the contents of these documents is strictly prohibited. If you have received this information in error, please notify the sender immediately and arrange for the return or destruction of these documents.

Express Scripts Inc. STL WEB FAX FRM Rev 11/21/2008

To set up a payment method, click on My Profile & Settings. Click Payment Method.



Click Add a preferred payment method.



Make a selection of Bill Me Later or Credit and Debit Cards. Complete the requested information. Click Save Preferred Payment Method.

EXPRESS SCRIPTS® Shopping Cart Home FAQ Contact Us Sign Out Adjust Font Size

Hello []

Payment Method

Provide your preferred payment method for Home Delivery orders below. [How is a preferred payment method used?](#)

Bill Me Later®

Pay with **Bill Me Later** [See terms](#)

When using Bill Me Later® for orders over \$150, I'd like 6 Months No Payments + No Interest if paid in full.

Credit and Debit Cards

Pay with a credit or debit card [Details about when your card is charged](#)

Card Type
Select One

Card Number
[]

Expiration Date
Month [] Year []

[Trustwave](#)
Trusted Commerce
Click to Validate
Safe Shopping With
Express Scripts

Save Preferred Payment Method Cancel

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[+] Feedback

Once you have completed the Payment Method process, you can return to the My Prescriptions option at the top left column. From there you can view your order status, order refills of another prescription, or view your prescription history.

EXPRESS SCRIPTS® Shopping Cart Home FAQ Contact Us Sign Out Adjust Font Size

Hello []

Check Order Status

[Recent Orders \(0\)](#) [Past Orders \(0\)](#)

We didn't find any Express Scripts Pharmacy orders.

Can't Find an Order You Submitted?

- If your doctor **faxed** your order, allow 2 business days before checking status online.
- If you **mailed** your order, allow 3 to 5 business days before checking status online.
- If you've waited 2 to 5 business days and still don't see your order, we may need more information to process your order. We will contact you or your doctor for this information, then continue to process your order once we receive all necessary information.

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[+] Feedback