

# NexGen Pharmacy Group

IN SERVICE DOCUMENTS







# NexGen Pharmacy Group

## IN-SERVICE DOCUMENTS

### TABLE OF CONTENTS

- 5 Welcome To NexGen Pharmacy Group!
- 6 Compounding Script Process
- 8 Physician's Online Tracking System
- 10 Patient Instructions
- 11 Frequently Asked Questions
- 12 Demographics & Refill Authorization
- 13 Office Instructions
- 14 Custom Script Pads
- 15 Posters & Forms



### Tired of chronic pain?

Don't want to add another pill to your daily routine?

Transdermal pain management is a great option to treat acute and chronic pain.

Individualization of formulation allows your physician to prescribe multiple medications and customize the dosage to provide faster relief without the major side effects of oral medications.

**Benefits of Topicals**

Single CoPay for Multiple Medications	Minimal Adverse Side Effects
Non-Narcotic	Minimal Drug Interaction Risk
Non-Addictive	Minimal Hepatic, Renal, & GI Exposure
Non-Sedating	Most Insurance Accepted

Ask your doctor if topical pain solutions are right for you.



#### Patient Instructions

By PRO

**As easy as 1-2-3!**  
Getting your prescriptions filled is as easy as 1-2-3. Once your prescription is processed, most are shipped the same day via overnight express in the continental USA!

- 1 Call the pharmacy right away! One simple call to the Pharmacy Hotline at (888) 999-1030 and your prescription will be processed. Remember to have your prescription insurance information handy to expedite your call.
- 2 Compounded medications are made just for you. Your insurance will be billed, then your medicine will be made especially for you.
- 3 Your medicine will be shipped right to your door! Please call the pharmacy at the number above if you have any questions or concerns. Our friendly pharmacy staff is ready to make sure you get the medicine you need right away.

**PHARMACY HOTLINE**  
**(888) 999-1030**  
MON-FRI 8AM-6PM CST

**IMPORTANT:**  
WHEN YOU RECEIVE YOUR PRESCRIPTION IT IS IMPORTANT THAT YOU USE YOUR MEDICATION AS DIRECTED BY YOUR PHYSICIAN. INSTRUCTIONS FOR APPLICATION WILL BE INCLUDED WITH YOUR PRESCRIPTION.  
\*CAUTION: AVOID CONTACT WITH YOUR EYES AND/OR MOUTH. CHECK IS NOT TO BE INGESTED.\*\*

For questions regarding prescription status, please call the Pharmacy Hotline at (888) 999-1030 Mon-Fri 8am-6pm CST.



# Welcome!

Welcome to the NexGen Pharmacy Group!

Congratulations for joining our team, we're delighted to partner with you to accomplish our mission statement, which is simply this;

*To educate the world, physicians and patients alike, on the benefits of topical compounds – equipping them with knowledge and understanding they need to make informed decisions regarding their health care.*

We are pleased to work with you to help more people in communities across the country gain access to topical compound formulations. We fully understand that there are many compounding teams that you could have joined, and the fact that you choose to join our team means in essence that you're saying, "I trust you." We don't take that trust lightly, and will work each and every day to ensure that we continue to earn your trust.

Finally, a project this size and scale, in an industry as dynamic and fluid as compounding is certain to involve change along the way. Our commitment is to ensure that you are a significant part of the process so that we can make NexGen Pharmacy Group the strongest pharmacy partner in the country!

In order to accomplish this goal, please know that I am available – any time day or night, if you have any questions, concerns, comments or suggestions. You can reach me on my cell phone (972) 835-7495 or via email at DrCorbo@aol.com.

Warm regards,



Dr. Frank A. Corbo, DC, CCRD  
Chief Executive Officer  
NexGen Pharmacy Group, LLC  
3550 Parkwood Blvd., Suite 111  
Frisco, Texas 75034  
(972) 835-7495 Cell  
(888) 999-6609 Toll Free  
(972) 767-5590 Fax

# Script Process

## Step 1:

The first step in the compound script process is for the physician to complete the recommended script. The physician then gives the script to the patient and informs them to notify to staff upon check out they have been prescribed a compounding script.


## Step 2:

Patient notifies staff that they have been prescribed a compounding script. Staff comments on the benefits of compounding and the excellent results other patient are having with compounding. Basic benefits to compounding are; a. no harmful effects to the GI tract, non-addictive, site specific pain relief, and specifically formulated for each the patient. Compound Script Patient instructions.

## Step 3:

Staff reviews the Compound Script Patient Instructions page and ensures completion of the Patient Demographics page. It is very important to review the Auto Refill Program (see importance of Auto Refill Program Form). Have the patient sign and date the Auto Refill Program form.

## Compound Script



**MedSport**

Dr. John Smith  
123 Main St.  
Suite 600  
Plano, TX 75000

Tel (888) 800-1234  
Fax (888) 800-5678  
NPI #22244555  
DCA #2345674

Patient: \_\_\_\_\_ D.O.B: \_\_\_\_\_

SSN: \_\_\_\_\_ CL # \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Rx. Insurance: \_\_\_\_\_ PCN: \_\_\_\_\_

Group: \_\_\_\_\_ ID: \_\_\_\_\_

SN: \_\_\_\_\_

Allergies: \_\_\_\_\_

Other current disease state(s), conditions or medications: \_\_\_\_\_

Local Pharmacy: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

\* Please cross out any unwanted medications in formulation.  Check here if your patient wishes to have prescription anticholinergics. We will call patients before we ship pills on Amb-Atro, Wixela, Sero, or Miconazole formulations.  Please Fill Patient Demographics I.E., Correct Address, Address Information, Notice and Prescription Cash. Medical and Medicare May Have Limitations With Respect to Coverage of Certain Compounds.

Dual Action		Neuropathic	
<input type="checkbox"/> <b>Q</b>	<input type="checkbox"/> <b>W</b>	<input type="checkbox"/> <b>Q</b>	<input type="checkbox"/> <b>P</b>
Gabapentin 300mg 1% Baclofen 25% Pregabalin 150mg 5% Gabapentin HCl Monohydrate 25%	Amitriptyline HCl 50% Serotonin Inhibitor 25% Fluoxetine HCl 25% Serotonin HCl Monohydrate 25%	Amitriptyline HCl 50% Tricyclics HCl 25% Amitriptyline HCl 25% Serotonin HCl Monohydrate 25%	Gabapentin 300mg 1% Pregabalin 150mg 5% Gabapentin HCl Monohydrate 25%
240gm = 90 day supply		240gm = 90 day supply	
<b>Anti-Inflammatory</b>		<b>Antifungal Gel</b>	
<input type="checkbox"/> <b>Q</b>	<input type="checkbox"/> <b>P</b>	<input type="checkbox"/> <b>Q</b>	<input type="checkbox"/> <b>P</b>
Fluorouracil HCl 10% Carbamide HCl 25% Hydrocortisone HCl Monohydrate 25%	Doxy D-Chlorine 0.2% Doxylin 0.2% Hydrocortisone HCl Monohydrate 25% Hydrocortisone 25%	Miconazole 5% Fluconazole 1% Fluconazole Propylene Glycol 1%	Fluorouracil HCl 1.0% Carbamide 2% Hydrocortisone Propionate 1% Hydrocortisone 2%
240gm = 90 day supply		240gm = 90 day supply	
<b>Bear</b>		<b>Wound Care</b>	
<input type="checkbox"/> <b>I</b>	<input type="checkbox"/> <b>J</b>	<input type="checkbox"/> <b>K</b>	<input type="checkbox"/> <b>L</b>
Tetracycline Chloride 0.1% Tetracycline 0.1% Lignocaine HCl 0.1% Lidocaine 0.1%	Fluorouracil Propylene Glycol 1% Lidocaine Hydrochloride 2% Tetracycline Chloride 0.1%	Shargrin 0.5% Miconazole 0.5%	Fluorouracil Propylene Glycol 0.1% Lidocaine Hydrochloride 0.1%
240gm = 90 day supply		240gm = 90 day supply	
<b>Miscellaneous</b>		<b>Antibiotic</b>	
<input type="checkbox"/> <b>M</b>	<input type="checkbox"/> <b>N</b>	<input type="checkbox"/> <b>O</b>	<input type="checkbox"/> <b>P</b>
Lidocaine 1% Lidocaine 2% Lidocaine 4% Lidocaine 5%	Lidocaine 1% Doxy D-Chlorine 0.2% Doxylin 0.2% Lidocaine 1%	Oxidation HCl 0.1%	Lidocaine 1% Lidocaine 2% Lidocaine 4% Lidocaine 5%
240gm = 90 day supply		240gm = 90 day supply	

Custom Formulation: \_\_\_\_\_

**Plump:** Apply 1-2 gms to affected area 2-4 times a day.

**Roll-On:** Apply roll-on to 40-60 mmol/min to well-affected areas to undervated 2-4 times a day. Finish rolling to be done.

(Not on only available for Dual Action, Neuropathic, Anti-Inflammatory)

**IMPORTANT! Do Not Use Miconazole on Pregnant Patients Without Consulting Provider**

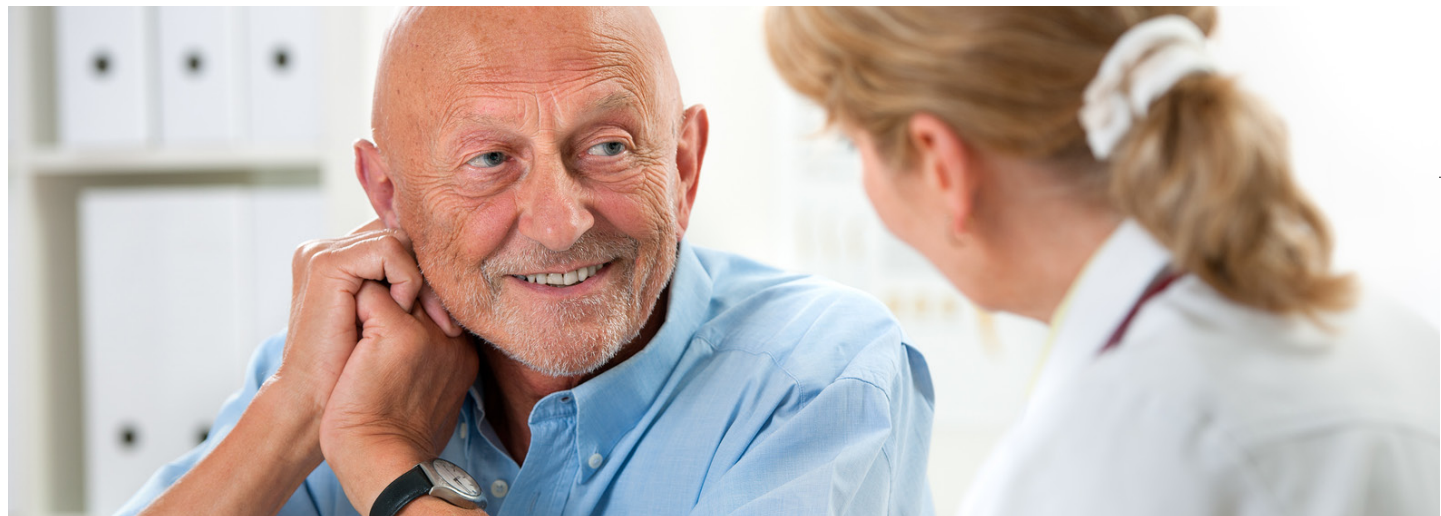
Quantity:  120gm  180gm  240gm  other \_\_\_\_\_ Refills: \_\_\_\_\_

AI# SIG: \_\_\_\_\_

Substitution Permitted \_\_\_\_\_ Dispense As Written \_\_\_\_\_ Date \_\_\_\_\_

## Step 4:

The Copyay conversion. It is very important to have the copyay conversation with each patient. The copyay conversation simply reviews the potential scenarios as it relates to the patient's copyay.





## Compound Rx Patient Instructions

## Patient Demo & Refill Form

Patient Instructions For Compound Pharmacy



### Your Personal Customer Service Team

Chronic pain affects more than 116 million people, or close to 30% of the U.S. adult population. While not traditional oral pain medications can bring relief – at times, catastrophic – side effects such as bleeding ulcers, kidney and liver failure, hearing loss, heart attack and stroke. Optimal treatments carry their own risks of abuse, overdose and death. Luckily, alternatives are available.

Personalized liquid pain medications deliver strong concentrations directly to the affected area. This can bring faster relief, with minimal detectable levels in the bloodstream and organs, where damage can occur. With multiple pain medications delivered through a single route, personalized treatments can address multiple issues at once, potentially saving you money and trips to the pharmacy.

**GREAT NEWS!** Your healthcare team has recommended liquid formulation for your condition. Now you may be wondering what exactly is compounding, and that's a great question.

**THE COMPOUND PRESCRIPTION PROCESS**

Although compounding is the process, most of our prescriptions are needed by your doctor's office within 24 hours and shipped to you by 48-72 hours.

When your prescription arrives, you'll find 3 things:

- First, is your personalized formulation prescribed by your physician.
- Second, are the instructions on how to use and/or apply your prescription.
- And finally, you may or may not receive a copayment service – and that's only if your insurance covers part, but not all of your prescription.

*If you do receive a copay amount, the good news is that while you pay your share, the majority of our copay is for them. \$20.*

If however your benefits is greater than \$20 – or if you are facing financial hardship in paying your copayment, please feel free to call our office. We're obligated to review copayment options and plans with you, and can see if you qualify for financial hardship assistance.

Our friendly customer service team is available Monday-Friday from 8am to 6pm central standard time to assist you with any questions you may have regarding your compound prescription.

**Customer Service Department**

"We're here for you."

Please don't hesitate to call our Patient Hotline. We're here to answer any questions you have regarding any part of the prescription process. From helping you to understand how to use your prescription, to your insurance benefits (including copay and prescription option) and more. We can even let you know your expedited shipment date.

**PHARMACY HOTLINE**  
(888) 984-1084  
MON-FRI 8AM-6PM CST

**IMPORTANT:**

When you receive your prescription it is important that you use your medication as directed by your physician. Instructions for application will be included with your prescription.

**Caution:** avoid contact with your eyes and/or mouth, unless noted, prescription is not to be ingested.

For questions regarding prescription status, please call the Pharmacy Hotline at (888) 984-1084 Mon-Fri 8am-6pm CST.

### Patient Refill Authorization

#### Ensure Quick Refills of Your Prescription.

In today's busy world, "paying phone tag" can delay shipping the refills your healthcare team has recommended for your condition *for days or even weeks*. How would you like your refills sent automatically each month right to your front door?

If you have a copayment and it is less than \$40 the refill process can be automated to save you time and to ensure your refill(s) arrive in a timely manner.

**You are not required to give authorization** for this refill process, it is a service provided to assist you in receiving timely refill(s) of your prescribed medication(s). If you prefer not to utilize this service you will be called to process your refill(s).

#### Refill Authorization

- I authorize RxPro Pharmacy or their pharmacy partner(s) to bill me for my compound prescription refill(s). The amount authorized will not exceed \$40 and will be the actual copayment amount that you have approved.
- If I do not have a copayment, my credit card on file will not be billed.
- By signing below I am authorizing RxPro Pharmacy or their pharmacy partner(s) to ship my medication to my address on file.
- I authorize RxPro Pharmacy or their pharmacy partner(s) to send refill(s) as authorized by my physician at 25 day intervals.
- I understand that I am able to cancel my refill(s) at any time by calling the pharmacy.

\_\_\_\_\_  
Patient's Name (Please Print)                      Signature                      Date

Pharmacy Hotline (888) 984-1084

## There are 3 potential scenarios:

### 1. No insurance coverage – Patient Approval Required

If the patient does not have prescription benefits, two options will be explained;

- A 30 gram complementary prescription will be sent to the patient at no charge. This is for formulations that are \$1 per gram or less.
- A 30 gram prescription will be offered at the cash price of \$1-10 per gram.

### 2. Insurance with copay – Patient Approval Required

If the patient has insurance and there is a copay associated with the prescription, the patient will be informed of the copay amount and an affordable solution for the copay will be discussed with the patient. Most copays are less than \$20.

### 3. Insurance without copay – Patient Approval Not Required

If the patient's insurance covers the prescription without a copay, the prescription will be sent to the patient.

**Most formulations are sent via overnight delivery and will be received in 24-48 hours after the pharmacy processes the prescription.**

## Step 5:

The staff faxes in Compound Script along with Patient Demographics information and insurance card to (800) 991-4324.

## Patient Instructions For Compound Pharmacy



### Customer Service Department

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Please don't hesitate to call our Patient Hotline. We're here to answer any questions you have regarding any part of the prescription process. From helping you to understand how to use your prescription, to your insurance benefits (including copay and prescription options) and more. We can even let you know your expedited shipment date.

#### PHARMACY HOTLINE

(888) 984-1084

MON-FRI 8AM-6PM CST

### IMPORTANT:

When you receive your prescription it is important that you use your medication as directed by your physician. Instructions for application will be included with your prescriptions.

<sup>\*\*\*</sup>Caution: avoid contact with your eyes and/or mouth; unless noted, prescription is not to be ingested. <sup>\*\*\*</sup>

## Your Personal Customer Service Team

Chronic pain affects more than 116 million people, or close to 30% of the U.S. adult population. Worse yet, traditional oral pain medications can bring severe — at times, catastrophic — side effects such as bleeding ulcers, kidney and liver failure, hearing loss, heart attack and stroke. Opioid treatments carry their own risks of abuse, overdose and death. Luckily, alternatives are available.

Personalized topical pain medications deliver strong concentrations directly to the affected area. This can bring faster relief, with minimal detectable levels in the bloodstream and organs, where damage can occur. With multiple pain medications delivered through a single cream, personalized treatments can address multiple issues at once, potentially saving you money and trips to the pharmacy.

**GREAT NEWS!** Your healthcare team has recommended topical formulation for your condition. Now you may be wondering what exactly is compounding, and that's a great question.

### THE COMPOUND PRESCRIPTION PROCESS

Although exceptions do happen, most of our prescriptions are received by your doctor's office within 24 hours and shipped to you in 48-72 hours.

When your prescription arrives, you'll find 3 things:

- First, is your personalized formulation prescribed by your physician
- Second, are the instructions on how to use and/or apply your prescription
- And finally, you may or may not receive a copayment invoice — and that's only if your insurance covers part, but not all of your prescription.

*If you do receive a copay invoice, the good news is that while copays vary from plan to plan, the majority of our copays are less than \$20.*

If however your invoice is greater than \$20 - or if you are facing financial hardship in paying your copayment, please feel free to call our office. We're delighted to review copayment options and plans with you, and can see if you qualify for financial hardship assistance.

Our friendly customer service team is available Monday-Friday from 8am to 6pm central standard time to assist you with any questions you may have regarding your customized prescription.



*Getting your prescription filled is as easy as 1-2-3. Once your prescription is processed, most are shipped the same day via overnight express to the continental USA!*

### 1. YOUR PRESCRIPTION

The process for fulfilling your individualized compounded prescription is similar to those processed at your local pharmacy, for example like at CVS. The main difference is that your prescription is made especially for you using a formulation process called, "compounding."

Compounded prescriptions are made at compound pharmacies. Often times, the compound pharmacy your doctor uses may be located in a different city or state, and therefore your prescription(s) will shipped to you.

### 2. YOUR COVERAGE

Most prescriptions are processed within 2-4 hours after they are received from your doctor's office. One of our friendly customer service representatives will contact you to discuss or confirm the following:

- Insurance coverage
- Copay amount (most are \$20 or less)
- Your desired delivery address
- Your refill options

### 3. YOUR SATISFACTION

Your complete satisfaction is our goal. If you have any questions regarding any part of the prescription process, please call our Pharmacy Hotline.

For questions regarding prescription status, please call the Pharmacy Hotline at (888) 984-1084 Mon-Fri 8am-6pm CST.



## Patient Refill Authorization

### Ensure Quick Refills of Your Prescription.

In today's busy world, *"paying phone tag"* can delay shipping the refills your healthcare team has recommended for your condition *for days or even weeks*. How would you like your refills sent automatically each month right to your front door?

If you have a copayment and it is less than \$40 the refill process can be automated to save you time and to ensure your refill(s) arrive in a timely manner.

**You are not required to give authorization** for this refill process, it is a service provided to assist you in receiving timely refill(s) of your prescribed medication(s). If you prefer not to utilize this service you will be called to process your refill(s).

#### Refill Authorization

- I authorize RxPro Pharmacy or their pharmacy partner(s) to bill me for my compound prescription refill(s). The amount authorized will not exceed \$40 and will be the actual copayment amount that you have approved.
- If I do not have a copayment, my credit card on file will not be billed.
- By signing below I am authorizing RxPro Pharmacy or their pharmacy partner(s) to ship my medication to my address on file.
- I authorize RxPro Pharmacy or their pharmacy partner(s) to send refill(s) as authorized by my physician at 25 day intervals.
- I understand that I am able to cancel my refill(s) at any time by calling the pharmacy.

---

Patient's Name (Please Print)

Signature

Date

Pharmacy Hotline (888) 984-1084





## Customer Service Department

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PHARMACY HOTLINE

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MON-FRI 8AM-6PM CST

## IMPORTANT:

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**GREAT NEWS!** Your healthcare team has recommended topical formulation for your condition. Now you may be wondering what exactly is compounding, and that’s a great question.

### THE COMPOUND PRESCRIPTION PROCESS

Although exceptions do happen, most of our prescriptions are received by your doctor’s office within 24 hours and shipped to you in 48-72 hours.

#### When your prescription arrives, you’ll find 3 things;

- First, is your personalized formulation prescribed by your physician
- Second, are the instructions on how to use and or apply your prescription
- And finally, you may or may not receive a copayment invoice – and that’s only if your insurance covers part, but not all of your prescription.

*If you do receive a copay invoice, the good news is that while copays vary from plan to plan, the majority of our copays are less than \$20.*

If however your invoice is greater than \$20 - or if you are facing financial hardship in paying your copayment, please feel free to call our office. We’re delighted to review copayment options and plans with you, and can see if you qualify for financial hardship assistance.

Our friendly customer service team is available Monday-Friday from 8am to 6pm central standard time to assist you with any questions you may have regarding your customized prescription.



*Getting your prescription filled is as easy as 1-2-3. Once your prescription is processed, most are shipped the same day via overnight express in the continental USA!*

### 1. YOUR PRESCRIPTION

The process for fulfilling your individualized compounded prescription is similar to those processed at your local pharmacy, for example like at CVS. The main difference is that your prescription is made especially for you using a formulation process called, “compounding.” Compound prescriptions are made at compound pharmacies. Often times, the compound pharmacy your doctor uses may be located in a different city or state, and therefore your prescription(s) will shipped to you.

### 2. YOUR COVERAGE

Most prescriptions are processed within 2-4 hours after they are received from your doctor’s office. One of our friendly customer service representatives will contact you to discuss or confirm the following:

- Insurance coverage
- Copay amount (most are \$20 or less)
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- Your refill options

### 3. YOUR SATISFACTION

Your complete satisfaction is our goal. If you have any questions regarding any part of the prescription process, please call our Pharmacy Hotline.

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# Patient Refill Authorization

## Ensure Quick Refills of Your Prescription.

In today's busy world, *"paying phone tag"* can delay shipping the refills your healthcare team has recommended for your condition *for days or even weeks*. How would you like your refills sent automatically each month right to your front door?

If you have a copayment and it is less than \$40 the refill process can be automated to save you time and to ensure your refill(s) arrive in a timely manner.

**You are not required to give authorization** for this refill process, it is a service provided to assist you in receiving timely refill(s) of your prescribed medication(s). If you prefer not to utilize this service you will be called to process your refill(s).

### Refill Authorization

- I authorize RxPro Pharmacy or their pharmacy partner(s) to bill me for my compound prescription refill(s). The amount authorized will not exceed \$40 and will be the actual copayment amount that you have approved.
- If I do not have a copayment, my credit card on file will not be billed.
- By signing below I am authorizing RxPro Pharmacy or their pharmacy partner(s) to ship my medication to my address on file.
- I authorize RxPro Pharmacy or their pharmacy partner(s) to send refill(s) as authorized by my physician at 25 day intervals.
- I understand that I am able to cancel my refill(s) at any time by calling the pharmacy.

---

Patient's Name (Please Print)


Signature

Date



# OFFICE USE ONLY

## 1. Compound Script



**South Florida Physical Medicine**  
Dr. Gabriele Knous

1470 Royal Palm Beach Blvd  
Royal Palm Beach, FL 33411  
Tel (561) 422-1819 • Fax (561) 422-1813

NPI #1689667990  
DEA #BK2794444

Patient: \_\_\_\_\_ D.O.B: \_\_\_\_\_

SSN: \_\_\_\_\_ D.L.P: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Rx. Insurance: \_\_\_\_\_ PCN: \_\_\_\_\_

Group: \_\_\_\_\_ ID: \_\_\_\_\_

SN: \_\_\_\_\_

Allergies: \_\_\_\_\_

Other current disease, status, conditions or medications: \_\_\_\_\_

Local Pharmacy: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

\* Please cross out any unwanted medications in formulations.  Check here if your patient wishes to have prescription auto-filled. We will call patients before we ship refills on Anti-Viral, Wound, Scar, or Miscellaneous formulations. Please Fax Patient Demographic, ID, Current Insurance, Address Information, Medical and Prescription Cards. Medicaid and Medicare May Have Limitations With Respect to Coverage of Certain Compounds.

Dial Action		Neurostatic	
<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D
Dicyclanil 2mg Baclofen 20mg Cyclobenzaprine HCl 20mg Tizanidine 2mg Bupropion HCl Monohydrate 300mg	Amitriptyline HCl 25mg Doxepin 25mg Cyclobenzaprine HCl 20mg Meprobamate 400mg Diphenhydramine HCl Monohydrate 50mg	Amitriptyline HCl 25mg Imipramine HCl 25mg Meprobamate 400mg Doxepin 25mg Bupropion HCl Monohydrate 300mg	Gabapentin 100mg Pregabalin 150mg Lyrica 300mg Gabapentin HCl Monohydrate 300mg Pregabalin 150mg
300mg - 30 day supply		300mg - 30 day supply	
Anti-inflammatory		Antibiotic	
<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> G	<input type="checkbox"/> H
Ibuprofen 400mg Cyclobenzaprine HCl 20mg Baclofen 20mg Bupropion HCl Monohydrate 300mg	Doxycycline 100mg Amoxicillin 500mg Doxycycline HCl Monohydrate 100mg Sulfamethoxazole 800mg	Mupirocin 2% Bacitracin 300mg Fusidic Acid 400mg Linezolid 600mg	Tetracycline HCl 1.575g Doxycycline 100mg Bacitracin 300mg Fusidic Acid 400mg Clotrimazole 100mg Miconazole 200mg
300mg - 30 day supply		300mg - 30 day supply	
Scar		Wound Care	
<input type="checkbox"/> I	<input type="checkbox"/> J	<input type="checkbox"/> K	<input type="checkbox"/> L
Tretinoin 0.05% Tretinoin 0.1% Tretinoin 0.2% Tretinoin 0.5% Tretinoin 1%	Fluorouracil 1% Lactic Acid 10% Tretinoin 0.05% Tretinoin 0.1% Tretinoin 0.2% Tretinoin 0.5% Tretinoin 1%	Povidone Iodine 10% Mupirocin 2% Bacitracin 300mg Fusidic Acid 400mg Linezolid 600mg	Fluorouracil 1% Lactic Acid 10% Tretinoin 0.05% Tretinoin 0.1% Tretinoin 0.2% Tretinoin 0.5% Tretinoin 1%
300mg - 30 day supply		300mg - 30 day supply	
Migraine		Wart Treatment	
<input type="checkbox"/> M	<input type="checkbox"/> N	<input type="checkbox"/> O	<input type="checkbox"/> P
Sumatriptan Succinate 50mg Rizatriptan 5mg Zolmitriptan 2.5mg Frodoxolone 100mg	Cantharidin 0.5% Cantharidin 1% Cantharidin 2% Cantharidin 5% Cantharidin 10%	Cantharidin 0.5% Cantharidin 1% Cantharidin 2% Cantharidin 5% Cantharidin 10%	Gabapentin 100mg Pregabalin 150mg Lyrica 300mg Gabapentin HCl Monohydrate 300mg Pregabalin 150mg
300mg - 30 day supply		300mg - 30 day supply	
Pain Patch		Antiemetic	
<input type="checkbox"/> Q	<input type="checkbox"/> R	<input type="checkbox"/> S	<input type="checkbox"/> T
Oxycodone 5mg/325mg Oxycodone 10mg/325mg Oxycodone 15mg/325mg Oxycodone 20mg/325mg	Ondansetron 4mg Ondansetron 8mg Ondansetron 16mg Ondansetron 24mg	Ondansetron 4mg Ondansetron 8mg Ondansetron 16mg Ondansetron 24mg	Gabapentin 100mg Pregabalin 150mg Lyrica 300mg Gabapentin HCl Monohydrate 300mg Pregabalin 150mg
300mg - 30 day supply		300mg - 30 day supply	

## 2. Patient Refill Authorization Form

### Patient Refill Authorization

**Ensure Quick Refills of Your Prescription.**

In today's busy world, *"paying phone tag"* can delay shipping the refills your healthcare team has recommended for your condition *for days or even weeks*. How would you like your refills sent automatically each month right to your front door?

If you have a copayment and it is less than \$40 the refill process can be automated to save you time and to ensure your refill(s) arrive in a timely manner.

**You are not required to give authorization** for this refill process, it is a service provided to assist you in receiving timely refill(s) of your prescribed medication(s). If you prefer not to utilize this service you will be called to process your refill(s).

**Refill Authorization**

- I authorize RxPro Pharmacy or their pharmacy partner(s) to bill me for my compound prescription refill(s). The amount authorized will not exceed \$40 and will be the actual copayment amount that you have approved.
- If I do not have a copayment, my credit card on file will not be billed.
- By signing below I am authorizing RxPro Pharmacy or their pharmacy partner(s) to ship my medication to my address on file.
- I authorize RxPro Pharmacy or their pharmacy partner(s) to send refill(s) as authorized by my physician at 25 day intervals.
- I understand that I am able to cancel my refill(s) at any time by calling the pharmacy.

Patient's Name (Please Print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Pharmacy Hotline (888) 984-1084

## 3. Patient's Rx Insurance Card



**Rx Card**

www.bcbskc.com

HOSPITAL ADMISSIONS REQUIRE PRIOR APPROVAL

JOHN A DOE  
YBC999999999 99  
GROUP: 2725000001 75.00 EMER ROOM  
20.00 OFFICE VISIT

BCBSKC RX 1-800-228-1436 *Preferred-Care*

BC PLAN: 240 BS PLAN: 740  
CUST SERV: 816-232-8396/800-822-2583

## 4. Patient's Driver's License (\*new)



## Compound Script Faxing Process

Please fax the following items to process the Compound Script:

1. Compound Script
2. Patient Demographics & Refill Auth. Form
3. Copy of Patient's Prescription Insurance Card
4. Copy of Patient's Driver's License (\*new)



(800) 991-4324

# Physician's Online Portal Tracking System

## Step 1:

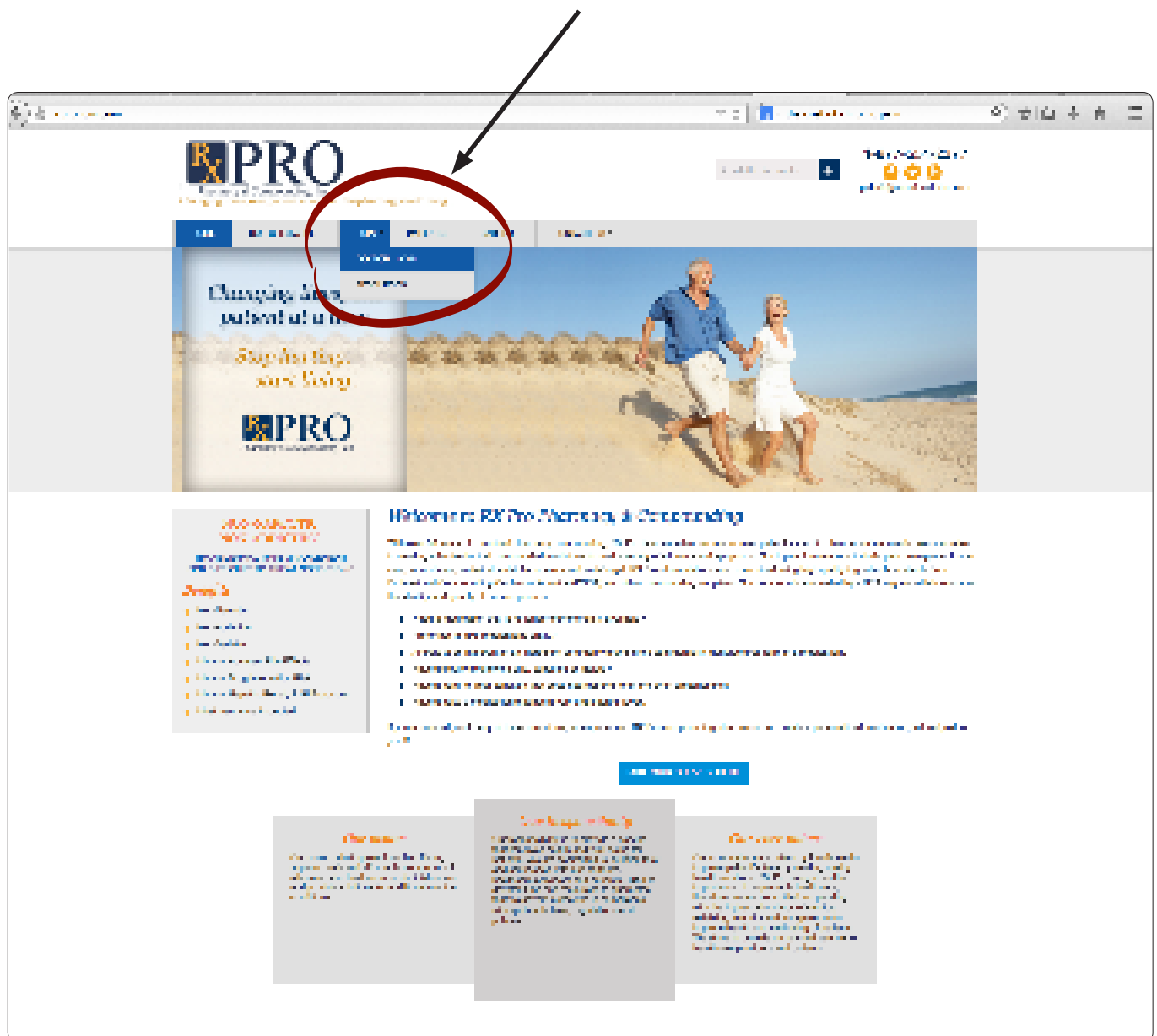
Your NexGen-RxPro representative will provide you with the User Name and Password information to sign into your personalized account.

## Step 2:

Login to: [www.RxProNow.com](http://www.RxProNow.com)

## Step 3:

Click “HCP” and then click the “Doctor Login” button





# Tired of chronic pain?

Don't want to add another pill to your daily routine?

Transdermal pain management is a great option to treat acute and chronic pain.

Individualization of formulation allows your physician to prescribe multiple medications and customize the dosage to provide faster relief without the major side effects of oral medications.

## Benefits of Topicals

- Single CoPay for Multiple Medications
- Non-Narcotic
- Non-Addictive
- Non-Sedating
- Minimal Adverse Side Effects
- Minimal Drug Interaction Risk
- Minimal Hepatic, Renal, & GI Exposure
- Most Insurance Accepted

Ask your doctor if topical pain solutions are right for you.





SPECIAL REPORT | THE EFFECTIVENESS OF TOPICAL PAIN FORMULAS

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EDUCATING THE WORLD ONE PATIENT AT A TIME

MAGAZINE

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