

PRESCRIPTION REFILL SLIP

Aetna Rx Home Delivery
P.O. Box 829518
Pembroke Pines, FL 33082-9913

**No refills remain. Obtain a new prescription from your physician or
take the enclosed renewal form to your physician for signature.**

Pt Name:
Dr Name:
Drug:

RX #:
Member ID:

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ORDERING REFILLS - The most convenient method to order your refill is via our website at www.aetna.com/aetnarxhomedelivery, or using our automated system at 1-800-227-5720; otherwise detach and return this refill slip with your Order form.

Pt Name:
Dr Name:
Drug:

RX #:
Member ID:

Quantity: **Refills Remain:**
Next Refill Date:
Expiration Date:



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