

Phone: (844) 431 - 7277

Fax: (844) 432 - 7277



Specialty Pharmacy Services Enrollment Form New York Prescribers, please submit an electronic prescription together with the Enrollment Form

Pre-Filled Syringe 40 mg/0.4mL 100 mg/mL Inject 100 mg SQ every 4 weeks Inject 300 mg SQ every 4 weeks Nucala Autoinjector 100 mg/mL Inject 100 mg SQ every 4 weeks Inject 300 mg SQ every 4 weeks Xolair Pre-Filled Syringe 75 mg/0.5mL 150 mg/mL 300 mg/mL Inject 75 mg SQ every _ weeks Inject 150 mg SQ every _ weeks Inject 300 mg SQ every _ weeks Inject 300 mg SQ every _ weeks Inject 375 mg SQ every _ weeks Inject 375 mg SQ every _ weeks Imject 75 mg SQ every _ weeks	PATIENT INFORMATIC	DN											
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Inject 375 mg SQ every _ weeks INJECTION TRAINING Patient received injection training Prescriber's office to provide injection technique Price Chopper Specialty to coordinate injection training By signing this form and utilizing our services, you are authorizing Price Chopper Specialty to serve as your prior authorization designated agent in dealing with medical and prescription insurance companies. Prescriber Signature: Date:	Autoinjector												
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Interchange is mandated unless the practitioner indicates 'Dispense as Written' or 'No Substitution' in accordance with the law. CONFIDENTIALITY STATEMENT: For information regarding Golub Corporation Privacy Policies, please visit our website at http://www.pricechopper.com/pharmacy/notice-of-privacy-practices or contact our Customer Communication Center at 1-800-666-7677, Option 3.