

MedSync Program Enrollment Form

Thank you for your interest in our **MedSync** program, a synchronized prescription refill service. Advantages of participating in the program include:

- ❖ Increased convenience—a single monthly trip to the pharmacy.
- ❖ Peace of mind from being able to get medications on time and in one order.
- ❖ More personal contact with your pharmacist to ask questions and discuss medications.
- ❖ Increased understanding of your medication, its purpose, potential side effects, and costs.
- ❖ Your prescription records can be more easily updated to reflect changes to therapy made by doctors or upon hospital discharge.

I understand the program advantages and the following conditions of participation to achieve the maximum benefits from the service at AllHealth Network Pharmacy and hereby agree:

- ❖ To accept a phone call each month from the pharmacy to discuss my prescription refills.
- ❖ To have prescriptions included in the **MedSync** program processed and filled for a one month supply, unless otherwise specified.
- ❖ To pick up medications on my assigned Appointment Date.
- ❖ To pay an extra co-pay **one time** for each medication **if necessary** in order to make all refills due on the same day.
- ❖ To keep an open dialogue with my pharmacist regarding doctor's appointments, hospital/urgent care visits, and changes in my health status.
- ❖ To allow our pharmacy staff discuss your medication profile as part of our **MedSync** program with your caregiver(s). If yes, initial here _____. Print name(s) of caregiver(s) in space provided below.

I have read this document, understand it, and have had all questions answered satisfactorily.

Patient Name (*Please print*)

Caregiver(s) Name(s) (if applicable) (*Please print*)

Patient Signature

Date

Pharmacist Signature

Date

****Patient may opt-out of **MedSync** at any time by informing your AHN Pharmacist in person or by phone. The pharmacist will document the opt-out-request (name, date, and time) on this Patient Agreement Form.**