



by  pharmacy

<https://www.pillpack.com/>

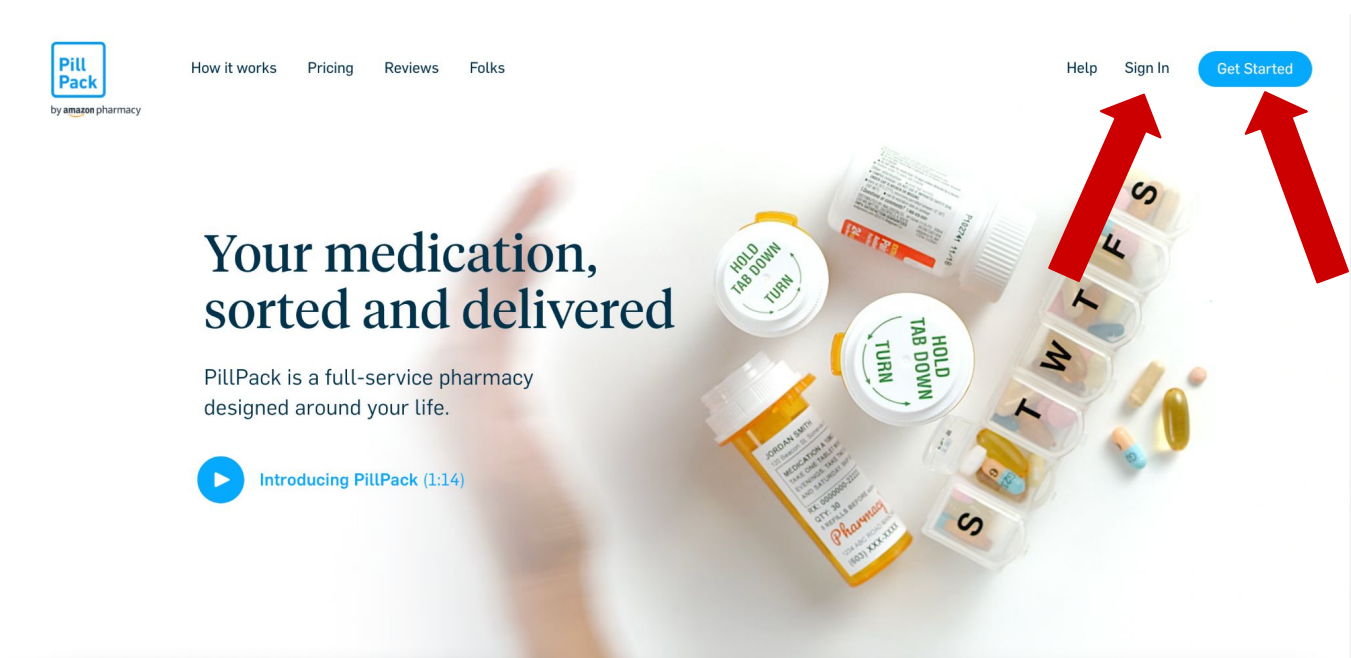
## Pill Pack Prescription

### What is PillPack?

PillPack is an American online pharmacy that sorts your medication by date and time, along with your other pharmacy items. PillPack delivers your medication monthly with free shipping while working with your doctors and insurance.

### Instructions

1. First type the PillPack website (<https://www.pillpack.com/>) in your search bar. Then, you need to create an account in order to set up a prescription. To create an account, click “Get Started.” If you have an existing account, click “Sign In.”




**Pill Pack**  
by amazon pharmacy

How it works Pricing Reviews Folks Help Sign In **Get Started**

## Your medication, sorted and delivered

PillPack is a full-service pharmacy designed around your life.

 [Introducing PillPack \(1:14\)](#)

## 2. Complete the section by filling in the needed information

**PillPack**  
by elexis pharmacy

Help 866-332-1868 Sign In

### Get started

You're just a few moments away from switching to a better, simpler pharmacy. Let's start with some contact information and selecting a password.

[▶ Signing Up To PillPack \(2:40\)](#)

Legal First Name  Legal Last Name

Email Address

Password

8+ characters


Phone Number

(555) 555-5555

How did you hear about PillPack?  
Select One...

Optional

☐ Invite a Caregiver  
Share account access with a family member, friend, or health professional. [Learn more](#)

☐ I'm not a robot 

By continuing, you agree to PillPack's [Terms of Use](#), [Child Safety Waiver](#), [Notice of Privacy Practices](#), and [Privacy Notice](#).

Next

- Click “Invite a Caregiver” if you are signing up for a loved in order to gain access to the PillPack account.
- Type in your email, and a link to create a caregiver account will be sent to your email.




How did you hear about PillPack?  
Select One...

Optional

☒ Invite a Caregiver  
Share account access with a family member, friend, or health professional. [Learn more](#)

Caregiver Email Address

An invitation will be emailed to your caregiver when you have finished signing up.

☐ I'm not a robot 

By continuing, you agree to PillPack's [Terms of Use](#), [Child Safety Waiver](#), [Notice of Privacy Practices](#), and [Privacy Notice](#).

- Open the link, and complete the next section by filling in the needed information.



## Caregiver account

Caregivers can help manage PillPack service. They are included on emails, phone calls, and they can access's PillPack dashboard.

PillPack Customer

Caregiver First Name	Caregiver Last Name
Karran	Singh

Caregiver Phone Number

(201) 914-9064

☒ Set as Preferred Phone Number  
PillPack will call this phone number about the care receiver's account

Password

\*\*\*\*\*  
Secure password

[Show password](#)

Next

3. Enter your shipping information according to where you want your prescription to be delivered.



## Your shipping address

We ship your medication right to your door. Where would you like to receive your first shipment?

Street Address 1


Street Address 2 (Optional)

ZIP Code

City State

Next

4. Fill in the following information, and provide information about your allergies and health conditions if you have any.



## About you

As your new pharmacy, we need to know more about you and your health. We only use this information to provide you with the best service possible, and never share it with anyone else.

Date of Birth  
MM / DD / YYYY

Sex  
☐ Male ☐ Female

Last 4 digits of your Social Security Number  
1234

We need this in order to check your insurance eligibility.


Add allergies ☐ No allergies

Add health conditions ☐ No conditions

Next

The form is annotated with a red circle around the input fields for Date of Birth, Sex, Last 4 digits of your Social Security Number, Add allergies, and Add health conditions. Two red arrows point to the 'Add allergies' and 'Add health conditions' input fields.

5. Enter your doctor's last name and phone number to complete this section.



## Add your doctors

We reach out to your doctors to gather your prescription information. We also work with them to handle refills and any changes to your medication.

### Search for your doctor

Last Name

Phone Number  
(555) 555-5555

Search

6. Look up your insurance, add your insurance card yourself, or continue without insurance.



## Look up your insurance

PillPack is compatible with most major plans, including most forms of Medicare Part D.

We can try to automatically find your insurance information using your account information.

Look up my insurance

No, I'll add my insurance card myself



Step 4 of 8

Have a question? Call us at 855-575-5725



## Add your insurance

Let's confirm your insurance. Use the information located on your insurance card to complete this step. PillPack is compatible with most major plans, including most forms of Medicare Part D.

ID Number

Sometimes labeled Member ID or Enrollee ID

Rx BIN

Rx Group

4-digit number

Sometimes labeled RxGrp

Rx PCN

Optional

Insurance Phone Number

(555) 555-5555

Optional

Next

Continue without insurance

7. Enter information about any vitamins or pharmacy items that you want in your prescription along with your medication.



## Add vitamins

Add any vitamins, over-the-counter medications, or supplements that you'd like added to your PillPack or sent in a separate bottle.

### Add VITAMIN C

Cancel

Strength / Form

500 MG, available in packets

Packaging

In my PillPack

In separate bottle

How many per day?

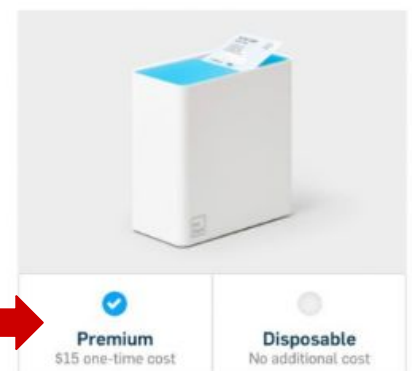
✓ Please Choose a Packet Quantity

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9

8. Choose a dispenser for your prescription to come in. Choose either premium or disposable. Two color options are also provided.

## Choose a dispenser

Our dispenser keeps your medication right on your countertop. Select a premium dispenser in the color of your choice, or opt for a recyclable dispenser sent with every shipment.



Premium

\$15 one-time cost



Disposable

No additional cost

Choose a color



Next

9. Enter your payment method, and billing address if necessary.

- Add a health savings account or flexible spending account if you choose to.
- Add a coupon code if you choose to.

Click “Finish Signing Up” once you have completed filling in all the requested information.

Contact PillPack:

<https://help.pillpack.com/hc/en-us/requests/new>  
855-745-5725

**Congratulations on completing all the steps to sign up for your PillPack prescription!**