



**Physician To Complete
About the Patient**

Patient's Name: _____

Relationship to Member:

- Member • Spouse • Child

Check One:

- Employee • Medicare B • Cobra • Retiree

Patient's Sex: _____ Patient's Age: _____

Patient's Height: _____ Patient's Weight: _____

Primary Diagnosis (Please indicate by ICD-9 Code or detailed description): _____

Secondary Diagnosis: _____

Check all that apply:

Health Conditions:

- Does patient smoke? • Yes • No
- Diabetes Type I • Diabetes Type II
 - Controlled • Not Controlled
- Gestational Diabetes
- Diabetes - Other _____
- Retinopathy • Neuropathy • Nephropathy
- Thyroid (• High • Low) • Hypertension
- Other Conditions _____

Drug Allergies:

- None • Codeine • Sulfa • PCH
- Allergies - Other _____

Diabetes Program Baseline

Please list date of last test and result

Date	HbA1c	HDL/LDL	Blood Pressure
		/	/
		/	/
		/	/
		/	/
		/	/

Q. Is it safe to order medical supplies through the mail?

A. YES! Every prescription is screened and filled by registered pharmacists to ensure accuracy in quantity and potency. BLN guarantees that every prescription shipped to you meets the highest pharmaceutical standards of quality, safety and effectiveness.

Q. How does this program save me money?

A. Through the BLN program there is no out-of-pocket expense to you and you may receive up to a 90 day supply at one time, with no claims to file. You will save time and money because you can order your supplies at home and they will be delivered to you via first class mail or UPS.

Q. What happens when I finish the initial prescription my doctor ordered?

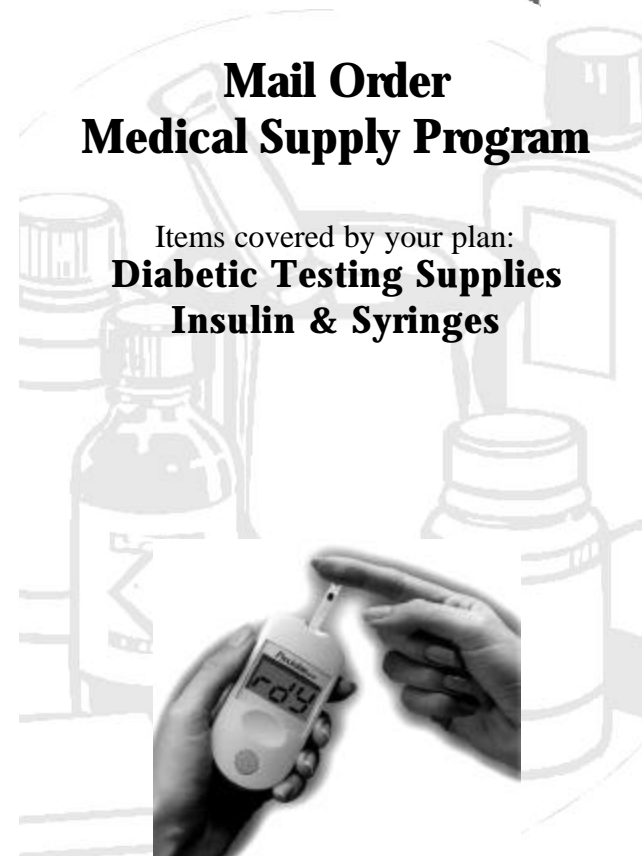
A. If your doctor authorized refill(s) on the original prescription, BLN will forward to you a refill form indicating the number of refills remaining along with your package of supplies. When you require a refill simply 1) mail us the refill form, or 2) you may call us to order your refill.

Q. How long will it take to receive my order?

A. Your order will be delivered by first-class mail or UPS. You should allow 7-10 days from the time you place your order. However, to ensure that you do not leave yourself without an adequate supply, please allow at least two-weeks from the time you mail your order to BLN.

**Mail Order
Medical Supply Program**

Items covered by your plan:
**Diabetic Testing Supplies
Insulin & Syringes**



“Client name Here”

Managed Benefit Plans, Inc.

Call 800-854-5729

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Better Living Now, Inc. Specialized Medical Supply Program

Introduction

"Client Name Here" is proud to introduce, effective June 1, 2002 a new program provided through Better Living Now, Inc. designed to reduce and even eliminate your out of pocket expense on Diabetes Testing supplies and other Chronic Care Medical Supplies.

Through the Better Living Now program you may obtain up to a ninety (90) day supply of covered products at one time...and they will be delivered right to your door!

Diabetes Supply Program

If you or any of your eligible dependents have been diagnosed with Diabetes you may obtain your necessary blood glucose supplies through Better Living Now at no out-of-pocket expense to you. Please have your Doctor complete the "About the Patient" section of this brochure and indicate the Diabetes diagnosis. Once enrolled in the Better Living Now Diabetes Program the Plan will provide up to a 90 day supply of necessary supplies (i.e. test strips, lancets, lancing devices, alcohol prep pads, Insulin, Syringes).

In addition, you will receive informative newsletters, patient information and a 1-800 patient support line.

Call 800-854-5729

Better Living Now, Inc. Specialized Medical Supply Program

How Do I Order?

How to use the Mail Order Pharmacy and Medical Supply Program

1. When you visit your physician ask him/her to complete the attached "About The Patient" form and write you a new prescription for each supply you require. Make sure your physician writes the prescription for a 90 day supply with up to three (3) refills. For Diabetic supplies make sure your physician writes the number of times a day you test your blood sugar.
2. Attach your original prescription(s) and the completed "About The Patient form" to the completed Better Living Now order form. Please make sure to include your current delivery address.
3. Mail your original prescription(s) and the completed order form in the postage paid envelope to:
Better Living Now, Inc.
PO Box 5394
Hauppauge, New York 11788

Refills may be ordered either by mail or by phone. Remember to place your order at least two weeks before your current supply runs out to allow mailing time. Normally you can expect to receive your refill within 7-10 days from the date your order is post-marked.

How Do I Order Refills?

To order your refill through the mail, simply mail us your refill request form to the above address. To order your refill by phone, please call our Customer Service department at 1-800-854-5729 or you can e-mail your refill request to: sales@betterlivingnow.com.

Call 800-854-5729

BLN Order Form

When placing an order, please:

1. Complete the following information completely and accurately. Missing or incomplete information may slow the processing of your order.
2. Enclose this order form with your prescription order from your doctor and mail to:

Better Living Now, Inc.
PO Box 5394
Hauppauge, NY 11788-0119

Or Fax your order to (631) 348-7704. Please note, we cannot accept faxed prescriptions for Syringes.

3. A BLN representative will process your order immediately.

If you have any questions or need assistance, please call us at 1-800-854-5729.

Member ID# (SS#/Medicare#/Medicaid#) Case#

Last Name First Name

Daytime Phone#

Street Address

City State Zip Code

Patient's Name Patient's Date of Birth

Patient's Relationship to Member Patient's Sex (M or F)

Your Doctor's Name Phone#

Client Name Here

Your Insurance Carrier Name

Insurance Carrier Phone#

Insurance Carrier Contact Person

Call 800-854-5729

Tear Off Here