

Meds-to-Beds

Payment type:

Check Cash

Credit Card: _____

OTC Items:

By signing below, I acknowledge that I have received Meds-to-Beds discharge services on medications my provider is prescribing for me. I received the prescription(s) listed above today and authorize release of prescription information to all authorized parties. I authorize payment for the prescription directly to OU Children's Pharmacy and acknowledge that any false claims or documents may be prosecuted by law. All information provided on this form is correct to the best of my knowledge.

Signature: _____

Date: _____

For Medicare patients only: If you disagree with the information given to you by the pharmacy, you have the right to file a complaint.

OU Children's Pharmacy

1200 Childrens Ave., Suite 2A
Oklahoma City, Oklahoma 73104
Phone: (405) 271-2156

Hours of Operation:

9 a.m. to 7 p.m. Monday-Friday
10 a.m. to 5 p.m. Saturday and Sunday
Meds-to-Beds delivery hours: 9 a.m. to 6 p.m. Monday-Friday



Benefits of the Meds-to-Beds Program

- You concentrate on the most important thing – your recovery.
- The delivery service for this program is free.
- It's one less step for your family members to worry about – they can turn their full attention on you.
- The pharmacy works with providers on medications not covered by your insurance.
- Your family members can be involved in the medication process in your hospital room.
- There's added privacy.
- It's easier to adhere to your drug regimen.



Meds-to-Beds

A convenience designed specifically for you

We deliver your discharge prescriptions to your room before you leave the hospital.

The Meds-to-Beds Program allows you to concentrate on your healing

The Meds-to-Beds Program provides you with a convenient packaging system that combines your medication regimen into easy-to-use pouches. Each personal pouch clearly identifies your name, along with every pill, the correct dosage and the time of dosing. As part of the patient discharge process, the OU Children's Pharmacy staff will deliver discharge prescriptions directly to you before you leave the hospital. Designed with your health in mind, this program eliminates a stop at the pharmacy on the way home.

Frequently asked questions

- **Can these prescription costs be added to my hospital bill?**
Prescriptions filled by the Meds-to-Beds program are considered an outpatient pharmacy service and cannot be added to your hospital bill. We will collect your copay when services are rendered.
- **Do you accept my prescription plan?**
We accept most insurance plans and will directly bill your prescription to your insurance provider. However, you will be responsible for any copay required when services are rendered.
- **What types of payment are acceptable for this program?**
The Meds-to-Beds program accepts personal checks, cash, debit cards, and credit cards.
- **What if I forget to bring my prescription insurance card to the hospital?**
We will gladly call your current pharmacy and retrieve your insurance information.
- **Where is OU Children's Pharmacy located?**
OU Children's Pharmacy is located at the Children's Atrium (Suite 2A), just next to the information desk.



- **How do I know when my prescription(s) is ready?**
Once your prescription is filled, a staff member will deliver it to your bedside (during business hours). A pharmacist will be available to counsel you on the medications.
- **How do I participate in the Meds-to-Beds program?**
Let your case manager, nurse, or doctor know you'd like OU Children's Pharmacy to deliver your new prescriptions prior to discharge. We'll take care of all the details.
- **What happens when I'm back home and my 30-day supply has run out?**
You can call OU Children's Pharmacy to refill your prescription or you can have your prescription transferred to a pharmacy of your choice. OU Children's Pharmacy can also mail most medications.

This service is provided in partnership with  **Medicine**

Meds-to-Beds

Patient's Name: _____

Male Female

Date of Birth: _____

Driver's License/ID#: _____

Driver's License: _____
State Exp. Date

Room Number: _____

Drug Allergies: _____

Phone Number: _____

Prescription Insurance Information:

Bin: _____

PCN: _____

ID: _____

Group: _____

If you don't have your prescription insurance card, please provide your current pharmacy name and phone number, if possible:

All eligible medications will be adherence packaged unless otherwise indicated.

I request my prescriptions, where applicable, to be placed in a pill bottle.

Yes No

I would like a consultation on my medications:

Yes No

I understand that the packing of my prescriptions is not childproof:

Yes No

I understand that the Meds-to-Beds is an optional service and not required:

Yes No

Let your nurse know you're interested in the OU Meds-to-Beds program. If possible, please have your prescription insurance card and copay method available.

Phone: (405) 271-2156