

# AdventHealth Rx Plus and Expedien Pharmacy Account Registration and Activation Guide

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## Introduction

Rx Plus and Expedien Pharmacy have integrated into Epic Willow Ambulatory. This change is designed to improve your experience and make it easier to refill prescriptions. **To get started, you'll need to reset your account.**

To *Make It Easy*, this guide will help you understand how to navigate the AdventHealth app and Rx Plus Pharmacy website so you can create or reset your account and access the services you need.

If you have questions, please contact your AdventHealth Rx Plus Pharmacy Team:

[Email: RxPlus.Pharmacy@AdventHealth.com](mailto:RxPlus.Pharmacy@AdventHealth.com)

Phone: 1-866-943-4535

Fax: 1-407-805-8545

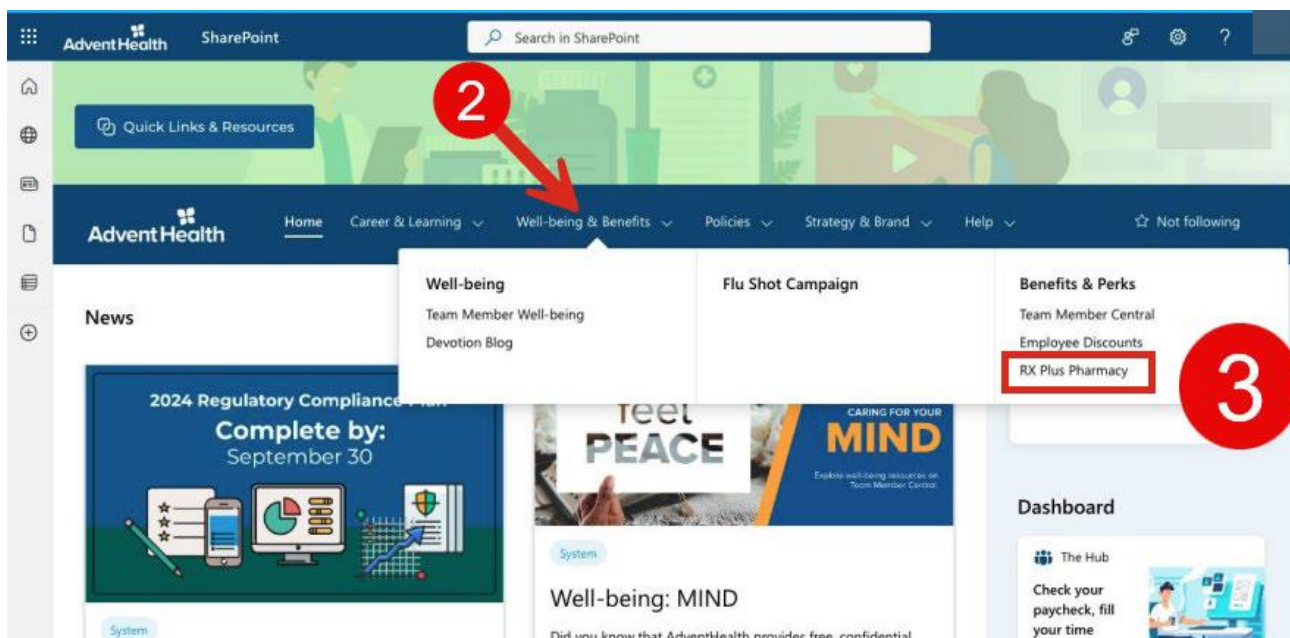
MyAdventHealthRX.com

## New Member Registration Experience

1. Navigate to [Connect/SharePoint](#).
2. Hover over **Well-Being and Benefits**.
3. Click **Rx Plus Pharmacy**.

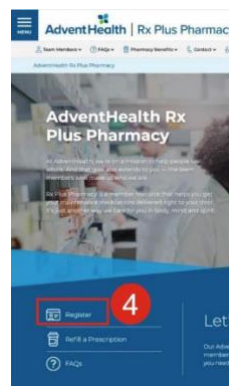
**Note:** AdventHealth team members (first-time users) can visit the **Rx Plus Pharmacy** page on Connect/SharePoint.

Non-employee members (first-time users) will go directly to the [Rx Plus Pharmacy website](#).



4. Click **Register**.
5. Enter New Patient Registration Information.

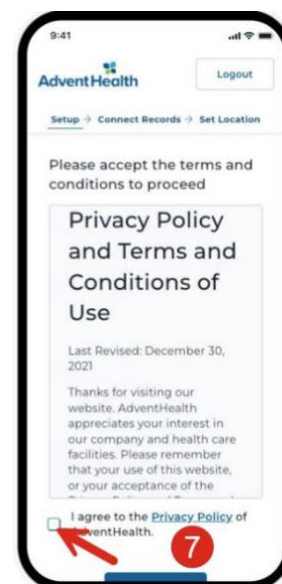
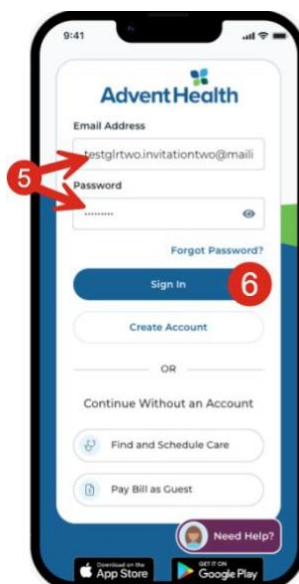
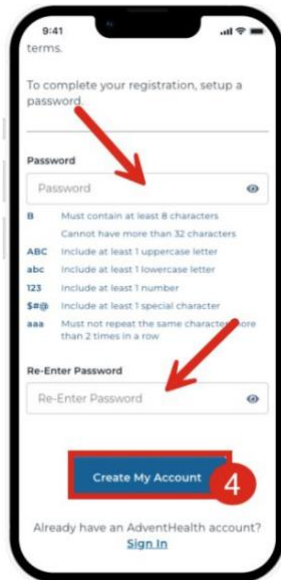
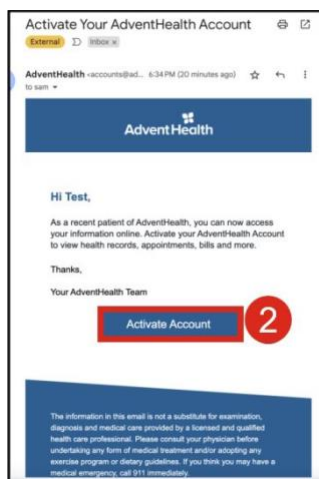
**Tip:** An Rx Plus Pharmacy team member will verify the information and send an invite for the **AdventHealth app**.

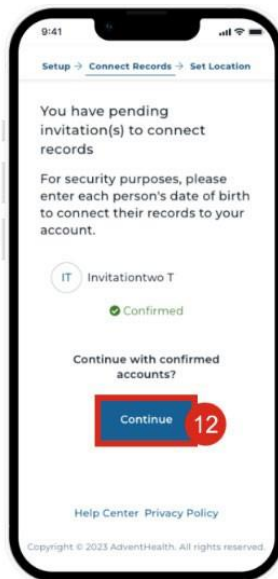
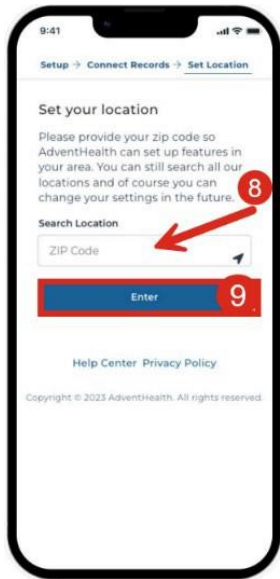


# Rx Plus Pharmacy Invitation to AdventHealth App: Method 1 (via Email)

## Activate Account (Method 1 - Email)

1. Access email invitation.
2. Click **Activate Account**.
3. Create Password.
4. Click **Create My Account**.
5. Enter email address and password.
6. Click **Sign In**.
7. Click the box to agree to **Privacy Policy**.



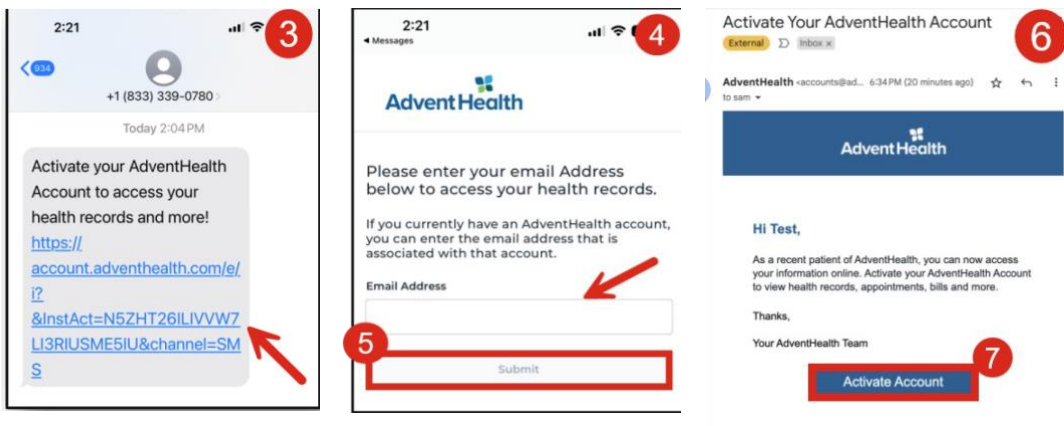


8. Enter **ZIP Code**.
9. Click **Enter**.
10. Enter **Date of Birth**.
11. Click **Confirm**.
12. Click **Continue**.

## Rx Plus Pharmacy Invitation to AdventHealth App: Method 2 (via Text)

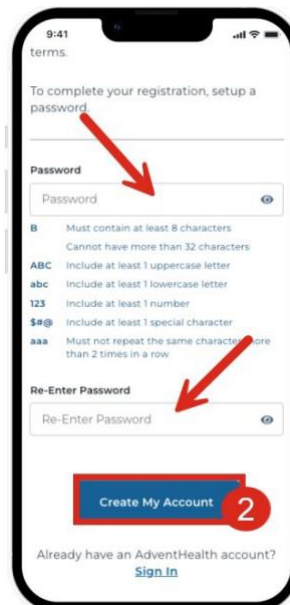
### Users Receive the Following Text & Email (Method 2 – Text)

1. Invitation sent by Rx Plus Pharmacy.
2. Users receive the following text (shown below).
3. Click the link in the text message.
4. Enter email address.
5. Click **Submit**.
6. Navigate to **email**.
7. Click **Activate Account**.



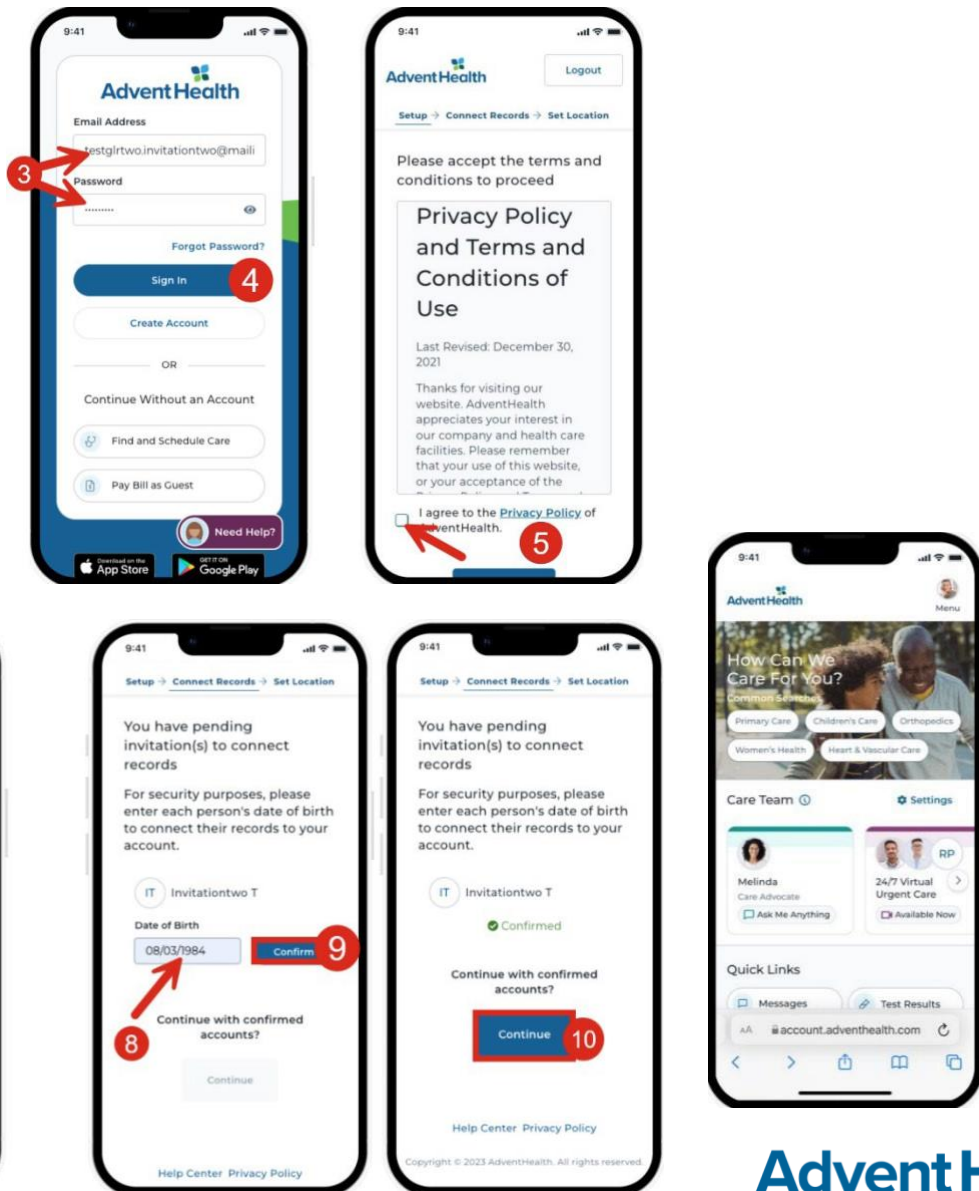
### Activate Account (Method 2 – Text)

1. Create a password.
2. Click **Create My Account**.



3. Enter email address and password.
4. Click **Sign In**.
5. Click the box to agree to **Privacy Policy**.
6. Enter **ZIP Code**.
7. Click **Enter**.
8. Enter **Date of Birth**.
9. Click **Confirm**.
10. Click **Continue**.

**Tip:** The OBJ HYPERLINK "<https://account.adventhealth.com/login>" OBJ **AdventHealth app** OBJ homepage will display upon successful account activation.



## Refill a Prescription Experience

1. Navigate to [Rx Plus Pharmacy Website](#).
2. Click [Refill a Prescription](#).

**Tip:** This will launch the AdventHealth account login page. Members can also open the [HYPERLINK](#) "https://account.adventhealth.com/login" [AdventHealth app](#) directly.

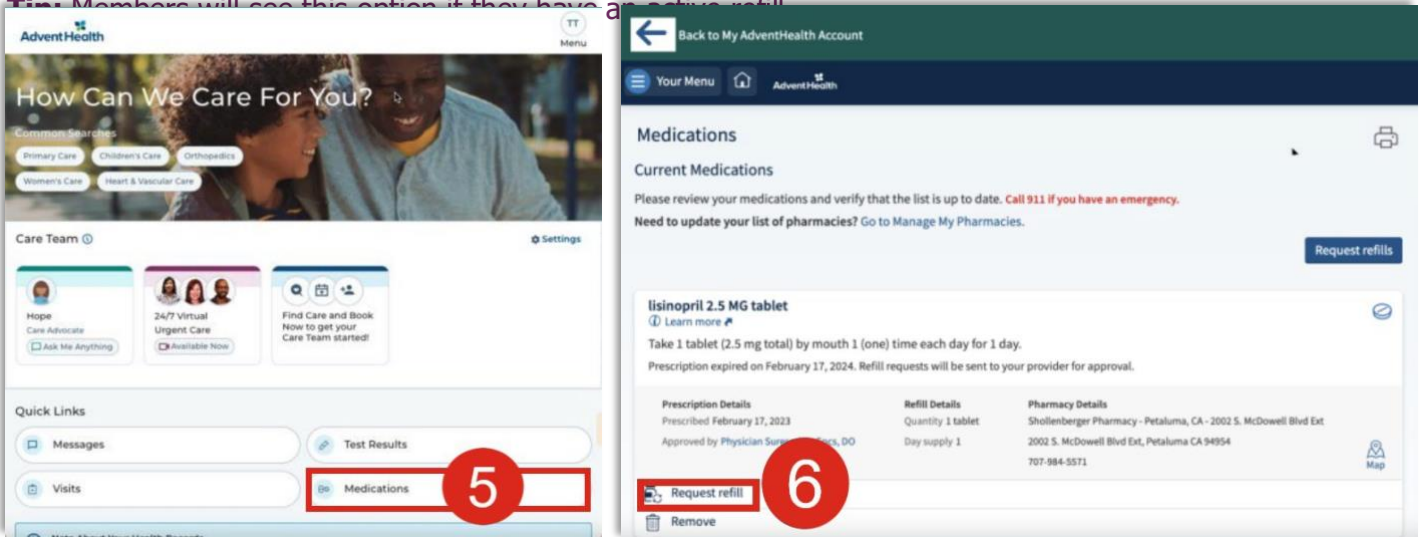


3. Enter email address and password.
4. Click [Sign In](#).

5. Click **Medications**.

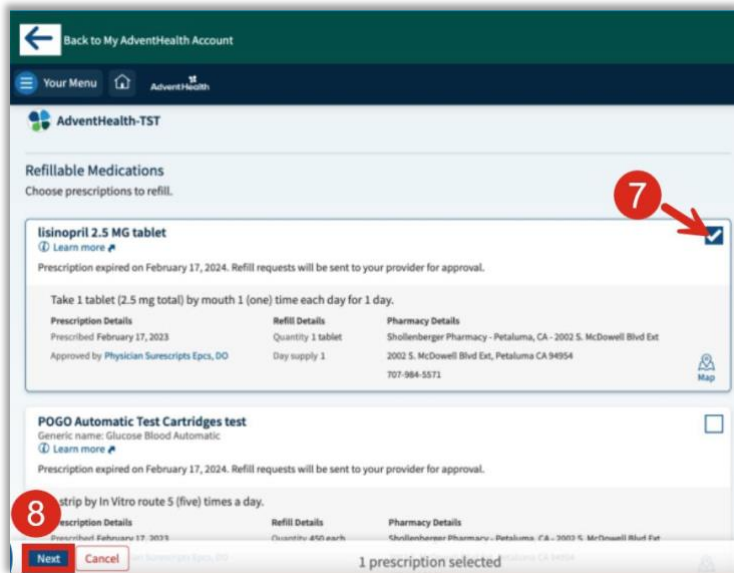
6. Click **Request Refill**.

**Tip:** Members will see this option if they have a medication to refill.



7. Click **checkbox** for medication refill.

8. Click **Next**.





9. Select **Delivery Method**.

10. Select **Ship To** address.

11. Click **Next**.

12. Click **Submit**.

Back to My AdventHealth Account

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### Pharmacy

Please choose how you would like to receive your refills and enter any comments or concerns you have for your selected prescriptions.

#### Selected Refills

lisinopril 2.5 MG tablet  
Quantity: 1 tablet  
Day supply: 1  
Enter comments for this prescription

#### Delivery Method

Pick up at a pharmacy

Deliver by mail

#### Pharmacy Info

Pharmacy  
AdventHealth RX Plus Mail Order Pharmacy  
AdventHealth RX Plus Mail Order Pharmacy  
Pharmacy Hours: M-F 8:00am-8:00pm

#### Ship to

Home address  
1234 ORLANDO, ORLANDO FL 32803

Other  
Please enter your address in the delivery comments below

Delivery comments

**Next** Back Cancel

1 prescription selected

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### Review Your Request

#### Requested Medications

lisinopril 2.5 MG tablet  
Quantity: 1 tablet  
Day supply: 1  
Last fill cost: **Not available**  
Enter comments for this prescription

#### Request Details

<b>Cost Information</b> Total last fill cost: <b>Not available</b> Estimated total: <b>Not available</b> The cost will be updated on the Medications page once it is available. Please check back later or contact your pharmacy if you have questions.	<b>Shipping Address</b> 1234 ORLANDO ORLANDO FL 32803	<b>Pharmacy</b> AdventHealth RX Plus Mail Order Pharmacy 5050 Wesley Road Suite 110 Apopka FL 32712 Hours: M-F 8:00am-8:00pm Phone number: 866-943-4535
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The following people will be able to view this message online:

Myself (Teddy Mychart)  Thirteend Apphp  Sam Beyer

**Submit** Back Cancel

1 prescription selected

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### Thank you!

Your refill request has been submitted.  
Here is a summary of your request.

#### lisinopril 2.5 MG tablet

Quantity: 1 tablet  
Day supply: 1  
Last fill cost: **Not available**

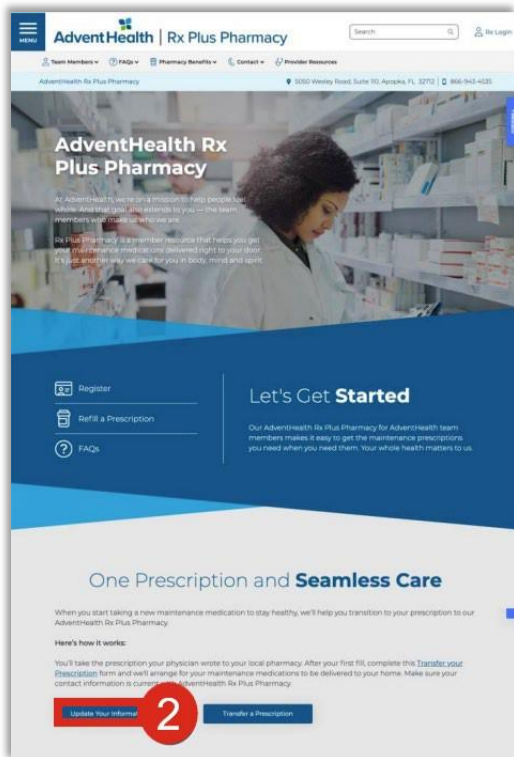
This refill has been sent to your provider for approval before the pharmacy can fill it. You need to contact the pharmacy to confirm the delivery and payment details.

<b>Cost Information</b> Total last fill cost: <b>Not available</b> Estimated total: <b>Not available</b> The cost will be updated on the Medications page once it is available. Please check back later or contact your pharmacy if you have questions.	<b>Shipping Address</b> 1234 ORLANDO ORLANDO FL 32803
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## Update My Information

1. Rx Plus Pharmacy members will visit the **Rx Plus Pharmacy website**.
2. Click **Update Your Information**.
3. Update information.
4. Click **Submit Form**.



### Update Information Form

Account Verification

First Name\*  Last Name\*

Date of Birth\*

Additional Information 3

Please select what you would like to update\*

- Method of Payment
- Address
- Email
- Phone Number
- Drug Allergies
- Insurance Information

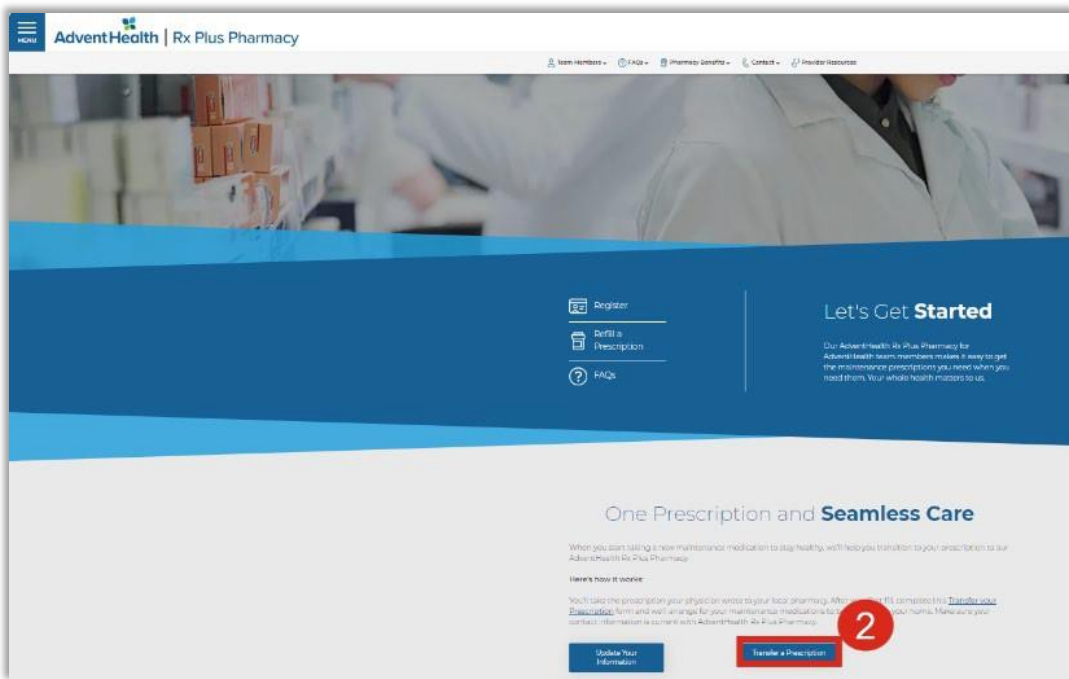
Preferred Contact Method

Additional Comments

**Submit Form** 4

## Request a Prescription Transfer

1. Navigate to the [Rx Plus Pharmacy website](#).
2. Click [Transfer a Prescription](#).



3. Enter relevant information in **Prescription Transfer Request Form**.
4. Click **Submit Form**.

The image shows a screenshot of a web form titled "Medication and Pharmacy Information". The form contains several input fields and radio button options. A red circle with the number "3" is placed over the "Rx Number" field. At the bottom of the form, a red circle with the number "4" is placed over the "Submit Form" button.

Medication and Pharmacy Information

Rx Number\*

Pharmacy name where prescription is on file\*

Pharmacy Phone Number\*

Pharmacy City and State\*

Name and Strength of Medication\*

Prescribing Provider\*

Please indicate if you would like us to obtain/transfer and hold the medication on your medication file with Rx Plus Pharmacy or if you would like us to obtain/transfer and fill the medication:

Hold\*

Yes

No

Fill and Ship\*

Yes

No

Please indicate if you have a manufacturer's copy assistance or discount card on file at the local pharmacy that you would like transferred over.\*

Yes

No

Additional Comments/Instructions\*

Submit Form

**If you have questions, please contact your AdventHealth Rx Plus Pharmacy**

**Team:**

**Email: [RxPlus.Pharmacy@AdventHealth.com](mailto:RxPlus.Pharmacy@AdventHealth.com)**

**1-866-943-4535 PHONE | 1-407-805-8545 FAX |  
MyAdventHealthRX.com**