

How to Register on the myMedicationAdvisor® web site.

1. On the Welcome page, click on the **“REGISTER NOW”** button.
2. On the User Registration page, select your **“Employer/Plan Administrator”** by clicking on the arrow to use the drop-down menu, and click on one of the following based on your health plan name **“West Suburban HG...”**
 - **BC Network Blue NE**
 - **BC Medex OBRA 90**
 - **BC Network Blue NE Tiered Network Rate Saver**
 - **Tufts EPO or POS**
 - **Tufts Navigator Tiered Network EPO Rate Saver**
 - **Harvard Pilgrim EPO or PPO**
 - **Harvard Pilgrim Medicare Enhanced**
 - **Harvard Pilgrim EPO Rate Saver**
3. On the following User Registration page, **enter all information requested in red**; these are required items.
4. Enter your **“Employer/Plan Administrator key code”** by typing one of the following key codes in the appropriate box.

BC Network Blue NE:
WS432NB

BC Medex OBRA 90:
WS321MX

BC Rate Saver:
WS234RS

Tufts EPO/POS:
WS567THP

Tufts Rate Saver:
WS765TRS

Harvard Pilgrim EPO/PPO:
WS789HPH

Harvard Pilgrim Medicare:
WS678HPM

Harvard Pilgrim Rate Saver:
WS987HRS

5. When you have completed entering your registration information, click on the **“Submit”** button.

MY MEDICATION ADVISOR

Welcome!

This web site is being brought to you by your employer. Access to the myMedicationAdvisor® web site requires registration and log-in to protect your privacy. [Why?](#)

The myMedicationAdvisor® web site is designed to promote the safe and proper use of medications. It also offers ways to save money on medications and helps you get the most out of your pharmacy benefit.

The information and tools on this web site can help you and your family:

- save money on medications,
- take medications correctly and safely, and
- better communicate with your doctor and pharmacist.

1 REGISTER NOW

Already Registered? Please Log In.

LOGIN (username)

PASSWORD

LOGIN

Forgot Password

The myMedicationAdvisor® web site is where you can obtain the medication list(s), forms, and instructions you need for any special medication buying program(s) offered by your employer or health plan.

Not sure why this site is for you? Get a sneak peek without registering!

SNEAK PEEK

Please be advised that by completing the log-in process you are accepting our [Terms and Conditions of Use](#) and [Privacy Policy](#). In addition, any use of this site constitutes your agreement to the same.

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MY MEDICATION ADVISOR

User Registration

? Already Registered [Member Log-in](#)

Employer Plan Administrator

Why do we need to know your Employer/Plan Administrator? [Click here](#)

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User Registration

? Already Registered [Member Log-in](#)

* All items in red are required.

*Enter a valid e-mail address as you wish to use:

Why do we want your e-mail address? [Click here](#) [Click here](#)

*Confirm User name:

*Enter the Password you want to use:

*Confirm Password:

*Security question: Choose a Question:

*Security question answer:

Be sure to record this question and answer, as it will be required if you lose your User name or Password.

*Employer/Plan Administrator: **Employer/Plan Administrator**

*Employer/Plan Administrator key code: **4**

*Health Plan ID Number (required for some employers):

Enter your full ID number as it appears on your Health Plan ID card but with no spaces or hyphens (dashes) between characters.

First name: (optional)

Last name: (optional)

Address: (optional)

City: (optional)

State: (optional)

Zip code: (optional)

You must read and accept the following [Terms & Conditions](#) of use and [Privacy Policy](#) to continue the registration process.

I have read, understand, and accept the Terms & Conditions of use and Privacy Policy.

Email Notification: Yes, you may contact me with a brief, voluntary survey asking my opinions of this site and its services.

5 Submit

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