CHARTWELL Pharmacy

CYSTIC FIBROSIS

Chartwell Specialty Pharmacy
Phone: 1-800-366-6020 | Fax: 412-920-1869

MEDICATIONS

- Bethkis
- Kalydeco
- Kitabis
- Orkambi
- Pulmozyme
- Symdeko
- TOBI Podhaler
- Tobramycin

SENDING A REFERRAL TO CHARTWELL?

Simply send the referral through **eScribe**, selecting the "**1001 Oakdale Rd**" option.

Or, fax the following information:

- Script/Referral Form
- Patient History
- Insurance Information
- Allergies
- Lab Results

INSURANCES

- AARP/Optum RX Part D
- ACCESS (PA)
- Advantra/Coventry/First Health Part D*
- Aetna
- Aetna Part D*
- Avalon SecureRx Part D
- Capital Blue Cross Medicare
- Cigna Part D
- Envision RX Part D
- Geisinger Medicaid
- Geisinger Part D
- Geisinger Specialty/Navitus
- Highmark Freedom Blue Part D
- Highmark Security Blue Part D
- Highmark Wholecare (Diamond & Ruby)
- Optum Specialty Network
- PACE
- PDMI
- Procare/MC-21
- Script Care
- Silverscript Part D
- Tredium Solutions
- Truescripts
- UPMC
- Wellcare Part D

*Premier Preferred Network Only

Expect More From Your Pharmacy Experience.

99% OVERALL PATIENT SATISFACTION

URAC ACCREDITED Specialty Pharmacy Expires: 08/01/2027

ACHC

ACHC

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NABP Accredited Compounding Pharmacy

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Please contact us about insurances or medications that are not listed.

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