

Maine Bureau of Insurance  
Bulletin 377  
Any Willing Pharmacy Reporting Form  
**Network Administrators**

E-mail your response as a PDF attachment to [Barbra.L.Garboski@maine.gov](mailto:Barbra.L.Garboski@maine.gov).

Company Name:	<u>Costco Health Solutions, Inc.</u>
---------------	--------------------------------------

\_\_\_ Check here if your company does **NOT** provide or administer network pharmacy benefits in Maine.

**A. Compliance Officer with Responsibility for Maine Pharmacy Operations:**

Name:	Christopher Pierce
Title:	Assistant Secretary
Mailing Address:	Attn: Licensing
	PO Box 35005
	Seattle, WA 98124
Direct Phone Number:	(425) 427-7986
Fax: Number	n/a
Email Address:	cpierce@costco.com

**B. Please identify any mail order pharmacies that participate in your network.** *(copy and paste table as needed for additional participant)*

Name:	Costco Mail Order Pharmacy
Mailing Address:	1. 260 Logistics Ave, Suite B Jeffersonville, IN 47130
	2. 215 Deininger Circle Corona, CA 92878
	3. 802 134 <sup>th</sup> St SW Bldg C Suite 140 Everett, WA 98204
	#3 relocating as of May 30, 2025 new address: 6801 Seaway Blvd Everett, WA 98203
Website:	Pharmacy.costco.com

**C. Pharmacy Contracting Contact Information:**

Name:	Lisa Simpson
Title:	Licensing Specialist
Mailing Address:	Attn: Licensing
	PO Box 35005
	Seattle, WA 98124
Direct Phone Number:	(425) 313-6275
Fax: Number	n/a
Email Address:	lsimpson@costco.com

**D. Please identify any pharmacy benefit administrators (PBMs) that administer pharmacy benefits through your pharmacy network.** *(copy and paste table as needed for additional participant)*

Name:	Costco Health Solutions, Inc.
Mailing Address:	730 Lake Drive
	Issaquah, WA 98027

Website:	Costcohealthsolutions.com