

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.

Company Name:	<u>ScriptGuideRX, Inc (SGRX)</u>
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___ 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:	Heather Hage-Kosalski
Title:	Sr Manager, Pharmacy Network Operations
Mailing Address:	15400 East Jefferson Ave GPP Mi 48230
Direct Phone Number:	313-821-3200 x202
Fax: Number	313-499-3211
Email Address:	hhagekosalski@sgrxhealth.com

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

Name:	WellDyne RX
Mailing Address:	P.O. Box 90369, Lakeland, FL 33804
Website:	https://www.welldyne.com/

C. Pharmacy Contracting Contact Information:

Name:	Heather Hage-Kosalski
Title:	Sr Manager, Pharmacy Network Operations
Mailing Address:	15400 East Jefferson Ave GPP, Mi 48230
Direct Phone Number:	313-821-3200 x 202
Fax: Number	313-499-3211
Email Address:	hhagekosalski@sgrxhealth.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:	ScriptGuideRX, Inc. (SGRX)
Mailing Address:	15400 East Jefferson GPP Mi 48230

Website:	www.sgrxhealth.com