



# Frequently Asked Questions

## 1. Who is FairoRx?

FairoRx is a Pharmacy Benefit Manager (PBM). We partner with employers to administer prescription benefits for their covered enrollees and dependents.

## 2. Who do I contact with questions about my prescription benefits?

The member services team at FairoRx is here to assist you by answering questions related to your prescription benefits such as drug coverage, copays and out-of-pocket amounts, prior authorizations, network pharmacies, mail order, and more!

Contact FairoRx

-  Phone: 833.464.9600
-  Chat: [www.FairoRx.com](http://www.FairoRx.com)
-  Email: [contactus@fairosrx](mailto:contactus@fairosrx)

## 3. How do I create a FairoRx member portal account?

Creating a FairoRx member portal account is easy! Please have your prescription/medical ID card available as you will need information from your card for account registration. Follow these simple steps:

1. Go to [www.FairoRx.com](http://www.FairoRx.com), click on Member Login, then select Sign Up.
2. Enter the member's name, date of birth, Rx group number, and member ID.
3. Choose a username.
4. Provide an email address, mobile number (optional), and password.
5. You're done!

## 4. How do I find pharmacies in my network?

FairoRx has over 65,000 pharmacies in our nationwide network. Members can find participating pharmacies by using the Pharmacy Locator tool on the FairoRx member portal or by calling member service at (833) 464-9600.

## 5. How do I determine my copay or out-of-pocket amount?

To determine your copay or out-of-pocket amount, please refer to your benefit documents, use the Copay Calculator tool on the FairoRx member portal, or call member services at (833) 464-9600.

## 6. How do I know if my drug is covered?

To determine if a drug is covered under your prescription benefits, please refer to your benefit documents, use the Copay Calculator tool on the FairoRx member portal, or call member services at (833) 464-600.

## **7. What is a formulary?**

The formulary is a list of generic and brand-name medications used to help you determine your copay. A group of doctors and other experts choose the drugs on formulary based on their effectiveness, safety, and cost. The formulary can be accessed by logging into your FairoRx member portal account and selecting Benefit Details.

## **8. What if my medication is not listed on the formulary?**

Depending on your benefits, if a brand medication is not listed on the formulary, the brand is considered non-preferred or may be excluded. For lower cost and formulary alternatives, please contact member services at (833) 464-9600.

## **9. What is a prior authorization?**

Certain medications require approval before they are covered. To determine if a medication requires prior authorization, please go to the FairoRx member portal under Benefit Details and refer to the FairoRx Prior Authorization Drug List or contact member services at (833) 464-9600.

## **10. How do I know if my medication has quantity limits?**

To determine if a medication has quantity limits, please go to the FairoRx member portal under Benefit Details and refer to the FairoRx Quantity Limits document or contact member services at (833) 464-9600.

## **11. How do I sign up for Mail Order?**

Members can register for mail order by completing one of the following:

- Go to [www.FairoRx.com](http://www.FairoRx.com) to create or log in to your FairoRx member portal account. Select the Prescription Information feature and then click on Visit Mail Order OR
- Print, complete, and mail your Mail Order Registration Form. The form can be found at [www.FairoRx.com](http://www.FairoRx.com) under the Member section.

## **12. How can I order mail order refills?**

Mail order refills can be ordered through the FairoRx member portal or automated phone system at (833) 464-9600.

## **13. How do I file for reimbursement if I paid out of pocket for my prescription?**

If you paid out of pocket for your prescription(s), and need to file for reimbursement, please complete a Prescription Reimbursement Request Form. The form can be found at [www.FairoRx.com](http://www.FairoRx.com) under the Member Resources section. Please note that your original pharmacy receipt must be submitted with your reimbursement request.