

## PRICING RESEARCH REQUEST FORM

DATE \_\_\_\_\_

### Pharmacy Information

<b>Pharmacy Name :</b>	
<b>NCPDP#:</b>	<b>NPI#:</b>
<b>Contact Name:</b>	<b>Email:</b>
<b>Phone Number:</b>	<b>Fax Number:</b>

### Claim Information

<b>Rx Number:</b>		<b>Fill Date:</b>
<b>Amount Submitted:</b>	<b>Dispensing Fee:</b>	<b>Total Paid:</b>
<b>Member Name:</b>		<b>Member Id:</b>
<b>Drug Name &amp; Strength:</b>		
<b>NDC Number:</b>		
<b>Qty Dispensed:</b>	<b>Days' Supply:</b>	<b>U&amp;C Price:</b>

Prescription Copy, and Invoice must accompany this request. Incomplete requests will not be processed. Send completed form, along with required supporting documentation via email at [genericreimbursement@pharmpix.com](mailto:genericreimbursement@pharmpix.com) or thru our fax # (787)522-5253. As stated in the Provider Manual, requests will be reviewed as soon as possible, but no later than 10 business days from date in which request was received by PharmPix. Prescriptions with 30 days of process in our system will be considerate for evaluation for cost revision.

### For PharmPix use:

Date received \_\_\_\_\_ Date reviewed \_\_\_\_\_ By (initials) \_\_\_\_\_  
 Approved/Denied \_\_\_\_\_ Notification Date \_\_\_\_\_ By (initials) \_\_\_\_\_

The information transmitted is intended only for the person or entity to which it is addressed and may contain lawyer/client and/or corporate, privileged confidential material. Any review, retransmission, dissemination, printing or other use of, or taking of any action in reliance upon, this information by persons or entities other than the intended recipient is strictly prohibited. Anyone who voluntarily and/or willingly alter, manipulates, use and/or make public these contents and/or attachments could face criminal charges and will be liable for civil damages. If you receive this in error, please immediately contact (reply) the sender by e-mail or by telephone at 787-522-5252, Then delete and destroy all copies, printed or e-mailed, of this communication and its attachments thereof on hand and from your system.



**ACCREDITED**  
Pharmacy Benefit Management  
Expires 12/01/2016