

# TEMPORARY PTRx MEMBER I.D.

For Cypress-Fairbanks I.S.D. Medical Insurance Plan Members

Your medical plan coverage with Cypress-Fairbanks I.S.D. includes a pharmacy plan benefit through PTRx, the district's contracted pharmacy provided. The pharmacy plan benefits are included with your medical plan with no additional premium required.

PTRx will mail your member ID card directly to your home approximately 15 to 20 days after you have completed the online benefit enrollment process.

Below is a temporary PTRx Pharmacy Plan ID card that you can take to your local pharmacy to use to fill your prescription.

**YOUR EFFECTIVE DATE OF COVERAGE:**



The 1<sup>st</sup> day of the month following your employment date;

or

if you enrolled in coverage during the Annual Enrollment Period, September 1.

**YOUR MEMBER ID NUMBER:** Your CFISD Employee Number + preceding zeros to equal a 9-digit number.

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| <b>PTRX</b>   | <b>CYPRESS-FAIRBANKS ISD</b>                                     |  |
| Helping You Save Money on Prescription Medication   |  |   |
| Bin: <b>610593</b>  | PCN: <b>SXC</b>  | Group: <b>PTRX</b>  |
| <b>Member ID: Use Employee ID Number</b>  |  |   |
| <b>Precede with zeros to equal a 9-digit number</b>   |  |   |
| <b>PTRX Help Desk</b>   | <b>(877) 4MY-PTRX</b>  |   |
| For Members and Providers:<br><a href="http://www.ptrx.com">www.ptrx.com</a>  | 877-469-7879<br><a href="mailto:help@ptrx.com">help@ptrx.com</a> |   |
| Your plan requires that you obtain maintenance prescriptions through:   |  |   |
|  <b>SaveDirectRx Mail Order Pharmacy</b> |  |   |
| Pharmacy Direct: (888) 637-5121<br><a href="http://www.SaveDirectRx.com">www.SaveDirectRx.com</a>                           | Fax: (888) 637-5191<br>For Medical Offices Only                  |   |