

First Fill Temporary Pharmacy Card

Making it easy to get your workers compensation prescriptions filled.

Employer:


Immediately upon receiving notice of injury, fill in the information below and give it to your employee.

Injured Employee:

1. If you need a prescription filled for a work-related injury or illness, go to a Tmesys network pharmacy.
2. Give this page to the pharmacist.
3. The pharmacist will fill your prescription at no cost.

**Questions?
Call 1.866.599.5426**

¿Necesitas ayuda en español? Llame al 1.866.599.5426

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|---|------------|---|---|--|------------|--------------|--------------|--------|-----------|--------------|-----|------------------|
|  | | Provider Logo Size: .394% x .875+ Remove if not using | Employer Logo Size: .394% x .875+ Remove if not using | | | | | | | | | |
| Prescription Card CARRIER / TPA: <u>Claims Management of Missouri</u> EMPLOYER: _____ | | | | | | | | | | | | |
| INJURED WORKER NAME: _____ | | | | | | | | | | | | |
| SOCIAL SECURITY NUMBER: _____ DATE OF INJURY: _____ | | | | | | | | | | | | |
| Notice to Cardholder: This card should be presented to your pharmacy to receive medication for your work-related injury. It is only valid within 30 days of your date of injury. For information regarding the program or to find nearby pharmacies call 866.599.5426 . | | | | | | | | | | | | |
| <p>Attention Pharmacists: Call 800.964.2531 to establish First Fill benefit eligibility and obtain the ID# for online adjudication of approved benefits for the injured worker.</p> <p>Tmesys is the designated PBM for this patient.</p> <p>Tmesys Pharmacy Help Desk 800.964.2531</p> <table border="1"> <tr> <td></td> <td>NDC</td> <td>Envoy</td> </tr> <tr> <td>RxBin</td> <td>004261</td> <td>or 002538</td> </tr> <tr> <td>RxPCN</td> <td>CAL</td> <td>or Envoy Acct. #</td> </tr> </table> | | | | | NDC | Envoy | RxBin | 004261 | or 002538 | RxPCN | CAL | or Envoy Acct. # |
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| RxPCN | CAL | or Envoy Acct. # | | | | | | | | | | |

(To create a card for your wallet, cut along outer line and fold in half.)

Pharmacist:

1. Call the Tmesys Pharmacy Help Desk at **800.964.2531**.
2. Provide the information from the card.
3. The Help Desk will provide an ID number for adjudication.

Finding a Network Pharmacy

Use one of these easy methods to find a network pharmacy:

Visit your local **Walgreens** or **Rite Aid Pharmacy**

Call us: **866.599.5426**

Use our pharmacy locator online: www.tmesys.com.