



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.

CARRIER / TPA		EMPLOYER	
PMA Companies			
INJURED WORKER NAME			
SOCIAL SECURITY NUMBER		DATE OF INJURY	
<p>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>			
<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>			
Tmesys is the designated PBM for this patient.			
<p>Tmesys Pharmacy Help Desk 800.964.2531</p>			
	RxBin	NDC	Envoy
	RxPCN	004261 or 002538	002538
		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 listed above.
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.pmsionline.com/pharmacy-center.