



Optum
 PO Box 152539
 Tampa, FL 33684-2539

MAKING IT EASY... TO GET WORKERS' COMPENSATION PRESCRIPTIONS FILLED.

Optum has been chosen to manage your workers' compensation pharmacy benefits for your employer or their insurer. Below is your First Fill card that will allow you to receive your injury-related prescriptions at your local pharmacy. Please fill out the card based on the instructions below.



Employer:

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

Injured Employee:




If you need a prescription filled for a work-related injury or illness, go to an Optum Tmesys® network pharmacy. Give this temporary card to the pharmacist. The pharmacist will fill your prescription at no cost to you.



If your workers' compensation claim is accepted, you will receive a more permanent pharmacy card in the mail. Please use that card for other work-related injury or illness prescriptions.



Most pharmacies, including Walgreens, our preferred provider, and all major chains, are included in the network. To find a network pharmacy call 1-866-599-5426 or visit tmesys.com.

Questions? Need Help?
 **1-866-599-5426**

WORKERS' COMPENSATION PRESCRIPTION DRUG PROGRAM		
Sedgwick CARRIER/TPA	Los Angeles Unified School District EMPLOYER	
INJURED WORKER NAME _____		
EMPLOYEE ID NUMBER _____	DATE OF INJURY (YYMMDD) _____	
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. To locate a pharmacy: tmesys.com .		

Attention Pharmacists: Call 1-800-964-2531 to establish First Fill benefit eligibility and obtain the ID number for online adjudication of approved benefits for the injured worker.

Tmesys is the designated PBM for this patient.

**Tmesys Pharmacy Help Desk
 1-800-964-2531**

	<u>NDC</u>	or	<u>Envoy</u>
RxBIN	004261		002538
RxPCN	CAL	or	Envoy Acct. #
LAUSD Issuer Name	_____		

(To create a card for your wallet, cut along top and bottom lines and fold in half.)

NOTE: This First Fill card is only valid for your workers' compensation injury or illness.

The following entities comprise the Optum Workers Compensation and Auto No Fault division: PMSI, LLC, dba Optum Workers Compensation Services of Florida; Progressive Medical, LLC, dba Optum Workers Compensation Services of Ohio; Cypress Care, Inc. dba Optum Workers Compensation Services of Georgia; Healthcare Solutions, Inc., dba Optum Healthcare Solutions of Georgia; Settlement Solutions, LLC, dba Optum Settlement Solutions; Procura Management, Inc., dba Optum Managed Care Services; Modern Medical, dba Optum Workers Compensation Medical Services, collectively and individually referred as "Optum."





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HACEMOS MÁS SENCILLO...

EL ABASTECIMIENTO DE LAS RECETAS MÉDICAS DEL PROGRAMA DE COMPENSACIÓN POR ACCIDENTES LABORALES.

Optum ha sido elegido para administrar los beneficios farmacéuticos de su programa de compensación por accidentes laborales para su empleador o su asegurador. Más adelante incluimos su tarjeta First Fill que le permitirá recibir las recetas médicas relacionadas con su lesión en su farmacia local. Llene esta tarjeta siguiendo las instrucciones que se indican a continuación.

Empleador:



Inmediatamente después de recibir un aviso sobre una lesión, llene la información indicada y entregue este formulario al empleado.

Empleado lesionado:



Si necesita que se le abastezca su receta médica para una lesión o enfermedad relacionada con su trabajo, visite una farmacia de la red Optum Tmesys®. Entregue esta tarjeta temporal al farmacéutico. El farmacéutico abastecerá su receta médica sin costo alguno.



Si se acepta su reclamación del programa de compensación por accidentes laborales, recibirá una tarjeta permanente por correo. Use esa tarjeta para otras recetas médicas de lesiones o enfermedades relacionadas con su trabajo.



La mayoría de farmacias, incluyendo Walgreens, nuestro proveedor preferido, y todas las grandes cadenas de farmacias, forman parte de la red. Para encontrar una farmacia de la red, llame al 1-866-599-5426 o visite tmesys.com.

**¿Tiene alguna pregunta?
 ¿Necesita ayuda?**



1-866-599-5426

  	
WORKERS' COMPENSATION PRESCRIPTION DRUG PROGRAM	
Sedgwick PORTADORA	Los Angeles Unified School District EMPLEADOR
NOMBRE DEL TRABAJADOR LESIONADO	
NUMERO DE EMPLEADOR	FECHA DE ALA LESION (AAMMDD)
<p>Aviso para el titular de la tarjeta: Presente esta tarjeta a la farmacia para recibir los medicamentos para la lesión relacionada con su trabajo. Para ubicar una farmacia, visite tmesys.com.</p>	

Attention Pharmacists: Call 1-800-964-2531 to establish First Fill benefit eligibility and obtain the ID number for online adjudication of approved benefits for the injured worker.

Tmesys is the designated PBM for this patient.

Tmesys Pharmacy Help Desk
1-800-964-2531

	<u>NDC</u>	or	<u>Envoy</u>
RxBIN	004261	or	002538
RxPCN	CAL	or	Envoy Acct. #
LAUSD Issuer Name			

NOTA: Esta tarjeta First Fill solo es válida para una lesión o enfermedad cubierta por su programa de compensación por accidentes laborales.

Retail pharmacy network*

Our pharmacy network includes nearly 65,000 pharmacies, almost 90% of all retail pharmacies. This includes all major chains and most neighborhood independent pharmacies. Below are just a few of our network pharmacies.

A&P Supermarkets	Family Fare Pharmacy	KMart	Raley's Drug Center
Acme Pharmacy	Food City Pharmacy	Knight Drugs	Ralph's
Albertsons Anchor Pharmacy	Food Lion Pharmacy	Kopp Drug	Rite Aid
Baker's Pharmacy	Fred Meyer Pharmacy	Kroger	Safeway Pharmacy
Bartell Pharmacy	Fred's Pharmacy Fresh	Lewis Family Drug	Sam's Club
Basha's	Market Pharmacy Fry's	Longs Drugs	Save Mart Pharmacy
Big Y	Pharmacy Gemmel	Lucky Pharmacy May's	Savon
Bi-LO	Pharmacy Giant Eagle	Drug Store Medicine	Schnucks Pharmacy
BJ's Pharmacy Carrs	Pharmacy Giant	Shoppe Meijer	Shaw's Pharmacy
Costco	Pharmacy Gristedes	Pharmacy Osco	Shopko Pharmacy
CVS	Pharmacy H-E-B	Pathmark Pharmacy	ShopRite
Dahl's Pharmacy	Pharmacy Hannaford	Peoples	Snyder Drug Emporium
Dillon Pharmacy	Harris Teeter	Pick 'N Save Pharmacy	Stop & Shop
Discount Drug Mart	Hy-Vee	Piggly Wiggly	Target
Duane Reade Eagle Pharmacy	Kerr Drug	Price Chopper	Thriftway Drugs
Family Pharmacy	King Kullen Pharmacy	Price Cutter	Walgreens
	Kings Pharmacy Kinney Drugs	Publix	Walmart
		QuickChek Pharmacy	Wegmans
			Winn-Dixie

How injured individuals can locate a pharmacy:

Visit a nearby Walgreens Pharmacy.

Call **1-866-599-5426** and a representative will assist with the location of a nearby participating pharmacy.

Visit the Pharmacy Center at Tmesys.com, and select the search option of your choice.

How to enroll in mail order:

Call **1-800-304-1764** and a representative will answer any questions you have or enroll you in the program.

Fax your prescription to **1-800-532-2151**. A representative will contact you directly to obtain all necessary information.

