



Workers' Compensation Notification Pharmacy Benefit Network (PBN)

Your employer and your workers' compensation claims administrator have selected Optum as their workers' compensation pharmacy benefit network (PBN), to provide medications for your work-related injury through their pharmacy network, Tmesys®.

This plan provides that drugs (and other services) prescribed for treating your work injury can be obtained only from companies or providers specified in your plan.

If you have any questions about how to obtain prescribed medications, call 1-866-599-5426.



LOCATING A PLAN PHARMACY

More than 5,000 Locations in CA

1. Go to the Tmesys website at [Tmesys.com](https://www.tmesys.com)
2. Select the search method you prefer

Call 1-866-599-5426 to speak to a customer care specialist

CA PBN Limitations

- You must present your workers' compensation pharmacy card to a participating network pharmacy in order to receive medications.
- Only medications used to treat your work-related injury are covered.
- Some medications may not be on the authorized list, in which case the pharmacy will contact Optum to try to obtain approval while you are at the pharmacy.
- Your prescribed medication may be subject to Utilization Review at the request of your claims administrator.

How to Obtain Medicines

1. Your employer will provide you information and notification on the network and how to obtain medications upon implementation or when you were hired.
2. Upon receiving a notice of first injury, your employer will provide you with additional notification of requirements as well as a First Fill Card.

Workers' Compensation Notification

Pharmacy Benefit Network

Your employer and your workers' compensation claims administrator have selected Optum as their workers' compensation pharmacy benefit network (PBN), to provide medications for your work-related injury through their pharmacy network, Tmesys.

This plan provides that drugs (and other services) prescribed for treating your work injury can be obtained only from providers specified in your plan network.

If you have questions about how to obtain prescribed medications, call toll this free number 1-866-599-5426.

How to Obtain Your Medicines

Please read the following information carefully as it contains instructions on the required use of a participating PBN pharmacy to receive your medications.

CA PBN Limitations

- You must present your workers' compensation pharmacy card to a participating network pharmacy in order to receive medications.
- Only medications used to treat your work-related injury are covered.
- Some medications may not be on the authorized list, in which case the pharmacy will contact Optum to try to obtain approval while you are at the pharmacy.
- Your prescribed medication may be subject to Utilization Review at the request of your claims administrator.

New Injuries

1. Upon receiving notice of injury, your employer will provide you with a First Fill Card to be used at a participating network pharmacy.
2. Give the card to the pharmacist with your prescription.
3. The pharmacist will fill your prescription. By using a participating network pharmacy, you should not receive a bill for your medications.
4. A permanent workers' compensation pharmacy card will be mailed to you.
5. Use the permanent card each time you have a prescription filled for your work-related injury.

Locating a PBN Pharmacy. More than 5,000 locations in California

- Go to the Tmesys website at tmesys.com
- Choose your preferred search method and follow the instructions
- Call 1-886-599-5426 to speak to a customer care specialist

We look forward to serving you. If you have questions about how to obtain prescribed medications, call 1-866-599-5426.

Notificación de Compensación

de Beneficios de Farmacia de redes

Su empleador y sus trabajadores administrador de reclamaciones de indemnización ha seleccionado Optum como de sus trabajadores de la red de compensación de beneficios de farmacia (PBN), para proporcionar medicamentos para su lesión relacionada con el trabajo a través de la red de farmacias Optum, Tmesys.

Este plan prevé que las drogas (y otros servicios) prescrita para el tratamiento de su lesión en el trabajo sólo se puede obtener de las empresas y proveedores de servicios especificados en su plan. Si usted tiene alguna pregunta acerca de cómo obtener los medicamentos recetados, llame al siguiente número sin cargo 1-866-599-5426.

Cómo obtener medicamentos

Por favor, lea atentamente la siguiente información, ya que contiene instrucciones sobre el uso requerido de un plan de participación farmacia de la red/a recibir sus medicamentos.

Limitaciones de CA PBN

- Usted debe esentar su tarjeta de trabajadores de farmacia una indemnización a un plan de participantes / farmacia de la red para recibir los medicamentos.
- Sólo los medicamentos utilizados para tratar su lesión relacionada con el trabajo están cubiertos.
- Algunos medicamentos pueden no estar en la lista autorizada, en cuyo caso la farmacia se.
- Su medicación prescrita puede ser objeto de revisión de la utilización, a petición de su administrador de reclamaciones.

Nueva Lesiones

1. Al recibir aviso de la lesión, su empleador le proporcionará una tarjeta de Primero de relleno a utilizar en un farmacia de la red.
2. Darle la tarjeta a la farmacia con su receta.
3. El farmacéutico se surtir su receta. Mediante el uso de un farmacia de la red, usted no debe recibir una factura por sus medicamentos.
4. Tarjeta permanentes de trabajadores de farmacia será enviado por el correo.
5. Usa la tarjeta permanente cada vez que tenga una receta médica para su lesión relacionada con el trabajo.

Localización de un Plan de Farmacia. Más de 5,000 hoteles en CA

- Lr a la página web de en tmesys.com
- Elija una opción de búsqueda
- Llame al 1-866.599.5426 para hablar con un especialista en atención al cliente

Esperamos poder servirle. Si usted tiene alguna pregunta acerca de cómo obtener los medicamentos recetados, llame al 1-866.599.5426.



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.

Injured Employee:



If you need a prescription filled for a work-related injury or illness, go to a local pharmacy that participates in the Optum Tmesys® Pharmacy Benefit Network (PBN) and give this temporary card to the pharmacist. Pursuant to applicable California statutes and regulations your workers' compensation insurer or third-party administrator and Optum, your workers' compensation pharmacy partner, will be administering your benefits as part of a PBN. Medications (and other services) prescribed for treating your work injury can be obtained only from companies or providers specified in your network.



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



Most pharmacies and all major chains are included in the network. To find a network pharmacy call 1-866-599-5426 or visit www.tmesys.com.

Questions? Need Help?



1-866-599-5426

WORKERS' COMPENSATION PRESCRIPTION DRUG PROGRAM

AmTrust
CARRIER/TPA EMPLOYER

INJURED WORKER NAME

Please provide directly to Pharmacist

SOCIAL SECURITY NUMBER DATE OF INJURY (YYMMDD)

Notice to Cardholder: Present this card to the pharmacy to receive medication for your work-related injury. To locate a pharmacy: www.tmesys.com.

Attention Pharmacists: Enter RxBIN, RxPCN and GROUP, Member ID # format is the date of injury and SSN combined as follows: YYMMDD123456789.

Tmesys is the designated PBM for this patient.

Tmesys Pharmacy Help Desk

1-800-964-2531

	<u>NDC</u>		<u>Envoy</u>
RxBIN	004261	or	002538
RxPCN	CAL	or	Envoy Acct. #
GROUP	AMTRFF		

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



Employer:

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

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."





Optum
PO Box 152539
Tampa, FL 33684-2539

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.

Empleado lesionado:



Si necesita que se le abastezca su receta médica para una lesión o enfermedad relacionada con su trabajo, visite una farmacia que participa en la red de beneficio de farmacia de Optum Tmesys® (PBN) y entregue esta tarjeta temporal al farmacéutico. De conformidad con los estatutos y regulaciones aplicables de California, su aseguradora o administrador externo de compensación por accidentes laborales y Optum, el socio de farmacia de su programa de compensación por accidentes laborales, administrarán sus beneficios como parte de una PBN. Los medicamentos (y otros servicios) recetados para tratar su lesión laboral solo se pueden obtener de compañías o proveedores específicos en su red.



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



La mayoría de farmacias 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 www.tmesys.com.

¿Tiene alguna pregunta?
¿Necesita ayuda?



1-866-599-5426

WORKERS' COMPENSATION PRESCRIPTION DRUG PROGRAM

AmTrust
 PORTADORA _____ EMPLEADOR _____

NOMBRE DEL TRABAJADOR LESIONADO _____

Please provide directly to Pharmacist

NUMERO DE SEGURO SOCIAL _____ FECHA DE ALA LESION (AAMMDD) _____

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 www.tmesys.com.

Attention Pharmacists: Enter RxBIN, RxPCN and GROUP, Member ID # format is the date of injury and SSN combined as follows: YYMMDD123456789.

Tmesys is the designated PBM for this patient.

Tmesys Pharmacy Help Desk
1-800-964-2531

	<u>NDC</u>	<u>Envoy</u>
RxBIN	004261	or 002538
RxPCN	CAL	or Envoy Acct. #
GROUP	AMTRFF	

NOTA: La tarjeta First Fill es válida únicamente para su lesión o enfermedad actual y aceptada relacionada con su compensación por accidentes laborales.



Empleador:

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

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."

