



Optum PO Box 152539 Tampa, FL 33684-2539

AMTrust Insurance Company PO Box 89453 Cleveland, OH 44101 Policy #TWC4459250 888-239-3909

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 an Optum Tmesys® network pharmacy. Give this temporary card to the pharmacist. The pharmacist will fill your prescription at low or 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



Tmesys is	the designated	PBM for this p	atient		
	Tmesy	s Pharr	nac	y Help Desk	
	_	1-800-9	964	-2531	
		NDC		Envoy	
	RxBIN	004261	or	002538	
	RxPCN GROUP	CAL FF	or	Envoy Acct. #	

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



Employer:

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

