# **Workers' Compensation Temporary Prescription ID Card**



#### To the Injured Worker:

On your first visit, please give this notice to any pharmacy listed on the back side to speed processing your approved workers' compensation prescriptions (based on the guidelines established by your employer).

Questions or need assistance locating a participating retail network pharmacy? Call the Express Scripts Patient Care Contact Center at 800.945.5951.

### **Atención Trabajador Lesionado:**

En su primera visita, por favor entregue esta notificación a cualquier farmacia enumerada al reverso para acelerar el procesamiento de sus recetas aprobadas de compensación para trabajadores (según las pautas establecidas por su empleador).

Si tiene cualquier duda o necesita ayuda para localizar una farmacia de venta al por menor participante de la red, por favor llame al Centro de Contacto para Atención a Clientes de Express Scripts, al 800.945.5951.

#### To the Pharmacist:

Express Scripts administers this workers' compensation prescription program. Please follow the steps below to submit a claim. Standard first fill shall not exceed a 14day supply or a cost of \$150. This form is valid for up to 30 days from date of injury (DOI). Limitations may vary. For assistance, call Express Scripts at 888.786.9640.

### **Pharmacy Processing Steps**

Step 1: Enter bin number 003858

Step 2: Enter processor control WC

Step 3: Enter the group number as it appears above

Step 4: Enter the injured worker's nine-digit ID number

Step 5: Enter the injured worker's first and last name

Step 6: Enter the injured worker's date of injury

•
ID#:
Your SSN is your temporary ID number; present to the pharmacy at the
time prescription is filled. You will receive a new ID number shortly.

myMatrixx, by Evernorth

Date of Injury: \_\_\_ \_ /\_\_\_\_ /\_\_ MM/DD/YYYY

**CSCIF** Group #:

Employee Date of Birth: \_\_\_\_\_ /\_\_ /\_\_ /\_\_

**Thank you** for using a participating retail network pharmacy. Even though there is no direct cost to you, it's important that we all do our part to help control the rising cost of healthcare.

Please see other side for a list of participating retail network pharmacies.

#### To the Supervisor:

Please fill in the information requested for the injured worker.

### **Employee Information**

First	M	Last
	Street Address or PO Box	
City	State	ZIP

#### **Employer Name**

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# **Participating Retail Network Pharmacies**

A & PDrug EmporiumMedic DiscountScolari'sAcme PharmacyDrug FairMedicapSedanoAlbertson'sDrug TownMedistatShaw's

Albertson's/Acme Drug World Meijer Shop 'N Save Albertson's/Osco Eckerd Minyard Shopko Albertson's/Sav-On **Econofoods** NCS HealthCare ShopRite Amerisource Bergen **EPIC Pharmacy** Neighborcare Snyder

Anchor Pharmacies Network Network Stop & Shop FamilyMeds **Pharmaceuticals** Sun Mart Arrow Farm Fresh Northeast Pharmacy Super Fresh Aurora Farmer Jack Services **Bartell Drugs** Super Rx Bigg's Food City Osco **Target** 

Bi-Lo Food Lion P & C Food Markets Texas Oncology Srvs
Bi-Mart Gemmel Pamida The Pharm

BJ's Wholesale Club Giant Park Nicollet Thrifty White
Brooks Giant Eagle Pathmark Times

Brookshire Brothers Giant Foods Pavilions Tom Thumb

Brookshire Grocery Hannaford Price Chopper Tops
Bruno H-E-B Publix Ukrop's
Carrs Hi-School Pharmacy Quality Markets United Drugs

Cash Wise Hy-Vee Raley's United Supermarkets

Coborn's lewel/Osco Randalls Vons Costco Kash n Karry Rite Aid Waldbaums Cub Keltsch Rosauers Walgreens CVS Wal-Mart Kerr Rx Express

Sam's Club

D&W Kmart RXD Wegmans
Dahl's Knight Drugs Safeway Weis

Discount Drugmart Longs Drug Store Sav-On
Doc's Drugs Major Value Save Mart
Dominicks Marsh Drugs Schnucks

LeaderNet (PSAO)

Winn Dixie

Dierbergs