Tmesys First Fill Program



tmesys® INJURED WORKER

PRESCRIPTION CARD

Domestic Claims

AIG Domestic Claims

Parking Company of America Inc

INJURED WORKER NAME

SOCIAL SECURITY NUMBER

DATE OF INJURY

Notice to Cardholder: This prescription card should be presented to your pharmacy to receive medication for your injury. For information regarding our program or participating pharmacies in your area contact the Tmesvs Injured Worker Information Group at 866.599.5426.

tmesys®

Notice to Pharmacists: Call the Tmesys Pharmacy Help Desk at 800.964.2531 to establish First Fill benefit eligibility and obtain the ID# for online adjudication of approved benefits for the injured worker. Tmesys is the designated workers' compensation PBM for this patient.

Tmesys® Pharmacy Help Desk 800.964.2531

NDC Bin # = 004261; Processing Code = CAL Envoy Bin # = 002538; Processing Code = Envoy Acct. #

(Cut along outer dotted line and fold in center)

The attached cut-out Tmesys First Fill Prescription card will make the process of obtaining medications for your injury easier and more convenient. Simply present this card to any of our more than 55,000 participating pharmacies nationwide, including Hawaii and Puerto Rico, and your prescription will be filled at no out-of-pocket expense to you. Your use of this card is limited to those prescriptions medically related to an injury that is considered to be covered under the applicable state workers' compensation law.

Should you have any questions regarding our program or for the locations of a participating network pharmacy near you, please contact Tmesys at 866.599.5426.

Sincerely,

Tmesys

HOW TO LOCATE A TMESYS PHARMACY:

- 1. Call Tmesys at 866.599.5426. A Tmesys representative will be more than happy to assist you with the location of a participating pharmacy in your area.
- 2. Visit our pharmacy locator on the web at www.aig.com/intellirisk. Then click on the medical provider link to begin your search



Single-Source Solution for Workers' Compensation

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