



Workers' Compensation Temporary Prescription ID Card

VACORP

»» 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.

Atencion Trabajador Lesionado:

Este formulario de identificación para servicios temporales de prescripción de recetas por compensación del trabajador DEBERÁ SER PRESENTADO a su farmacéutico al surtir su(s) receta(s) inicial(es).

Si tiene cualquier duda o necesita localizar una farmacia participante, por favor contacte al área de Atención a Clientes de Express Scripts, en el teléfono 800.945.5951.

»» To the Pharmacist:

Express Scripts administers this workers' compensation prescription program. Please follow the steps below to submit a claim. Standard claim limitations include quantity exceeding 150 pills or a day supply exceeding 14 days. This form is valid for up to 30 days from 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 A4
- 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
(enter in DOI field in the format YYYYMMDD)

Express Scripts

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.

Date of Injury: _____ / _____ / _____
MM/DD/YYYY

Group #: **M5L2017** _____

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



EXPRESS SCRIPTS®

Participating Retail Network Pharmacies

Accredo Health Group	Giant Discount Drug	Richmond Treatment Center
Beckley ARH Pharmacy	Giant Eagle	Rite Aid
Bloom Pharmacy	Giant Pharmacy	Rx Service
Broadwater Drug By Wags	Harris Teeter Pharmacy	Safeway Pharmacy
CarePoint Partners	Home Care Pharmacy	Sam's Club
Continuum Care Pharmacy	Jefferson Pharmacy	Shoppers Pharmacy
Costco	Jefferson Urgent Care	Sterling Automated Refill Cntr
Critical Care Systems	Kaiser Permanente Phcy	Super Aid Pharmacy
CVS	Kmart Pharmacy	Target Pharmacy
Dulles Urgent Care Center	Kroger Pharmacy	Ukrop's Pharmacy
Emergency Phys Immediate Care	Martins Pharmacy	Walgreen's
ER Physicians Immediate Care	Martin's Pharmacy	Wal-Mart
Extended Care Associates	NeighborCare Pharmacy	Wegmans Food Markets
Farm Fresh Pharmacy	Patient First	Wegmans Pharmacy
Food City Pharmacy	PharMerica	Weis Pharmacy
Food Lion Pharmacy	Progress Pharmacy Services	Williamsons Pharmacy
Fork Union Pharmacy	Richmond Southside Trtmnt Cntr	

Other participating pharmacies can be identified using Express-Scripts' pharmacy lookup at <https://oasis.express-scripts.com/oasis/pharmacySearch.html>