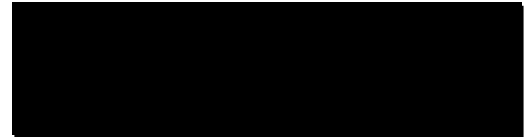


00000145

NEW YORK STATE INSURANCE FUND
ATTN: CLAIMS DEPARTMENT
199 CHURCH STREET
NEW YORK, NY 10007
WCN NYS NYSIF [REDACTED]



[REDACTED] **NYSIF**

RxBIN 003858
RxPCN A4
RxGrp NYSIF

Issuer

Name [REDACTED]
CLM# [REDACTED]

[REDACTED]

This card was intentionally left blank



Dear Injured Worker:

If you need to fill a prescription for your work-related injury or illness, then New York State Insurance Fund (NYSIF) has a program that will make getting your prescription a lot easier for you. We have selected [REDACTED] to administer this program for you.

Prescription Drug ID Card

Effective immediately, you may take the *enclosed card* (above ... it's perforated for easy removal) to a participating retail pharmacy. By using the retail pharmacy, you will not have to pay any money up front for the prescription drugs that you need. Also, you will not have to submit a claim to NYSIF. [REDACTED] pays the pharmacy directly. To find a participating retail pharmacy in your neighborhood, please refer to the list on the other side of this sheet, or call [REDACTED] at 1.866. [REDACTED].

You also have one other convenient option available to you: You can use the [REDACTED] Mail Service Pharmacy to fill prescriptions that you must keep taking for a longer period of time. With the Mail Service Pharmacy, your prescriptions are usually filled within 48 hours of receipt, and then are mailed directly to your home. You will receive your prescriptions within two weeks. Again, you do not have to pay any money up front for these work injury-related prescriptions.

Call [REDACTED] Customer Service at 1.866. [REDACTED] to request a Mail Order Form. When you receive the Mail Order Form, just fill out the "Patient Information" and "Ship To" sections, enclose your prescription(s), and then mail it in to [REDACTED]. Each time you receive a mail service prescription from [REDACTED], you will receive a new "Refill Authorization Form" along with a new envelope for you to use when you request your next mail order prescription.

If you have any questions, please call [REDACTED] at 1.866. [REDACTED]. A courteous Customer Service representative is available to take your call at any time. Thank you for choosing to use [REDACTED].

Sincerely,

NYSIF

This card was intentionally left blank

NOTICE TO CARDHOLDER: This card is to be used to obtain prescription drugs for workers' compensation related illness or injury only. By signing this card, the injured employee agrees if any time a pharmacy claim is denied non-compensable by administrator, reimbursement for these costs will be sought outside the workers' compensation system.

Injured Worker's Signature

NOTICE TO PARTICIPATING PHARMACIES:

Covered prescriptions must be filled at Participating Pharmacies. is not responsible for payment of claims to a non-participating pharmacy. It is unlawful for you to accept this card for prescriptions dispensed to anyone other than the cardholder whose name is on this card. Please ask the injured worker to present positive identification when using this card. Use of this card constitutes acceptance of the terms and conditions of the formal Agreement between and Participating Pharmacies. You may contact Provider Services by telephone at the number on this card if you have any questions regarding the Comp Program. This card is the property of . Legal action will be instituted for any unauthorized use of this card.

Pharmacy Help Desk/Customer: 1.866.
TDD Phone Number for hearing impaired: 1.800.

P.O. Box

Frequently Asked Questions About Your Prescription Benefits

What is ?

is a pharmacy benefit management company experienced with workers' compensation prescriptions. makes it possible for you to fill your injury-related prescription at your local pharmacy at no cost to you. Just take your **enclosed pharmacy card** and your prescription to one of the participating network pharmacies listed below and present it to the pharmacist.

How much does the prescription drug ID card cost?

The prescription drug ID card is free and covers all prescriptions for work related injuries.

Can I use the prescription ID card right away?

Yes, you may use it at any participating retail pharmacy. Just take your prescription and ID card to the pharmacy. To locate a pharmacy in your neighborhood, refer to the enclosed list or call at 1.866.

Who can provide me with more information?

Call at 1.866. for any additional questions or concerns regarding this program.

Following is a partial list of participating Network Chain Pharmacies in the Comp Network. This Pharmacy Listing is subject to change without notice. Please call the customer service number to locate additional pharmacies.

