



## NEW YORK STATE INSURANCE FUND PHARMACY BENEFITS MANAGEMENT

The New York State Insurance Fund (NYSIF) provides workers' compensation insurance coverage to your employer for employee work-related injuries or illnesses. This plan includes a network of more than 67,000 participating pharmacies as an easy and convenient way for you to fill medical prescriptions. If you are prescribed medication for a work-related injury or illness, it must be filled at a pharmacy within the CareComp pharmacy network.

NYSIF also provides a "short-fill" service, which enables you to obtain pharmacy benefits, even before your claim has been accepted. Although we are not required to provide this benefit, we want to help you get through the first, difficult days after your work-related injuries or illnesses by offering a limited number of prescription medication benefits that can be filled within the CareComp pharmacy network.

Please use the form on the reverse of this page - "Workers' Compensation Temporary Prescription Services ID" - to fill prescriptions at any participating pharmacy. To complete the form, please:

**Step 1:** Have your employer fill in their **business name** and **policy number**.

**Step 2:** Complete the rest of the form with your **claim** and **contact information**.

**Step 3:** Bring the **completed form** and **prescription** to a pharmacy in the CareComp pharmacy network.

**Step 4:** Within 10 days of the confirmed accident, you will receive a **packet from CVS Caremark**. This packet will contain a **permanent identification card** that should be used when filling prescriptions for the work-related injury or illness.

You can find local participating pharmacies by visiting [www.wcrxpharmacylocator.com](http://www.wcrxpharmacylocator.com) or by calling the 24-hour patient care hotline at **(866) 493-1640**.

If you have questions or need assistance, please visit [www.nysif.com/networkbenefits](http://www.nysif.com/networkbenefits) or contact NYSIF at (888) 875-5790.



## Workers' Compensation Temporary Prescription Services ID Important Information

### ATTENTION INJURED WORKER

This Workers' Compensation Temporary Prescription Services ID form **MUST BE PRESENTED** to your pharmacist when you fill your initial prescription(s). If you have questions or need to locate a participating pharmacy, please contact CVS Caremark Customer Service at 1-866-493-1640.

**Pharmacist/Employer** - When form is completed, fax to CVS Caremark: **1-866-493-1644**

Claimant information will be added by CVS Caremark to allow medications to process. This information can also be phoned in by calling 1-866-493-1640.

<b>New York State Insurance Fund</b>		<b>Group#: NYSIF</b>	
<b>Attention:</b> All items below must be completed.			
EMPLOYER'S NAME: <u>PROFESSIONAL STAFFING SERVICES INC T/A R J STAFFING</u>		INJURED WORKER'S NAME:	
EMPLOYER'S WORKERS' COMPENSATION POLICY NUMBER: <u>W 1344 611-7</u>		FIRST MI LAST INJURED WORKER'S MAILING ADDRESS:	
DATE OF INJURY: ___/___/____ (M M /D D /Y Y Y Y)		Street	
INJURED WORKER'S DATE OF BIRTH: ___/___/____ (M M /D D /Y Y Y Y)		CITY STATE ZIP	
INJURED WORKER'S SOCIAL SECURITY NUMBER: _____		Help Desk: This is a POS Program through CVS Caremark only. For Assistance call the CVS Caremark Help Desk at: 866.493.1640	

### Attention Pharmacist:

New York State Insurance Fund's prescription program is administered by CVS Caremark. Please follow the action steps listed below to enter the claim. These steps are required to submit a prescription for NYSIF claimants.

Step 1:	Enter Bin Number 610235
Step 2:	Enter PCN: WRK.
Step 3:	ID: Injured Worker' Social Security Number

**NEED ASSISTANCE?** **Pharmacist**, if you have any questions while processing the claim, please call the CVS Caremark Help Desk at **1-866-493-1640**.