# Healthesystems Injured Worker First Fill Prescription Form

#### Instructions for: Employer\*

Please complete this form before providing to Injured Worker.

*Employer Name:	*Date of Injury:	*Last Name, First Name:
	*Date of Birth:	*Social Security Number:

Required Informatio

### Instructions for: Injured Workers\*

To fill your initial (first) prescriptions for a workers' compensation injury, follow these easy steps:

- Present this form within 15 days of the date you were injured.
- 2 Locate a participating pharmacy closest to you. For assistance use the following tools:
- Call: 1.800.758.5779
- Visit: www.healthesystems.com and click on "Pharmacy Search" located under the "Pharmacy Tools button"
- A sample listing of pharmacies are provided at the bottom of this form

"For new injuries only

#### Instructions for: Pharmacists

Your pharmacy has contracted to participate in the Healthesystems Pharmacy Network. To dispense the patient's first-fill for their workers' compensation prescription:

- Indicate that this is a new workers' comp injury; do not process under an existing injury
- Call the Healthesystems Customer Service Center: 1.800.758.5779
- Process using the Member ID # provided by Healthesystems

#### Prescription Processing Information:

Transmit prescription using the following

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• Member ID:	Carrier/Customer ID:	BIN:

\*Required Informati

## Healthesystems Pharmacy Network

	The Apothecary	Reasors Pharmacy	Medicap Pharmacy	Harrison Discount Drug
Westview Pharmacy	Target	Ralphs Pharmacy	Med-X Drug	Fountain Park Pharmacy
Western Oaks Pharmacy	T M Pharmacy Inc	Pyramid Pharmacy	Mays	Drug Warehouse
Winn Dixie Pharmacy	Spoon Drugs Inc	Pharmcare OK Inc	Lassiter Drug	CVS Pharmacy
Wal-Mart	Sam's Club	Pharmacy Solutions, LLC	Kmart	Costco Pharmacy
Walgreens	Rite Aid	Osborn Drugs	Hutton Pharmacy, Inc	Buy For Less Pharmacy
Tyler Drug	Rexall Drug	Medicine Shoppe	Homeland Pharmacy	Bi-Lo Pharmacy

Call 1.800.758.5779 or visit www.healthesvstems.com to see a full list of network pharmacies