



THE UNIVERSITY of TEXAS SYSTEM
FOURTEEN INSTITUTIONS. UNLIMITED POSSIBILITIES.

Workers' Compensation First Fill Program



EMPLOYER INSTRUCTIONS:

- Submission of this form acknowledges that the report of injury has been filed.
- Using the example below, complete the temporary ID Card and provide to the injured employee.

EMPLOYEE INSTRUCTIONS:

- For purposes of temporary enrollment only, this form must be presented to a local pharmacy to obtain your initial prescription (First fill).
- For questions regarding your benefit plan, contact the Mitchell's customer service department at **(877) 232-6520**.
- Please note: You will receive a permanent retail prescription card in the mail for your Workers' Compensation injury.

PHARMACY INSTRUCTIONS:

- Use the information provided below to process the initial prescriptions.
- **Contact (877) 232-6520** for information regarding prior authorizations or to obtain the permanent Member/Group ID for future fills.

Temporary Work Comp Prescription Card
For PRIOR-AUTH Assistance call: (877) 232-6520

Employer: _____
 Name: _____
 Date of Injury: _____
 ID: _____

Date of injury (MMDDYY)+Date of Birth (MMDDYY)
(ID Example: MMDDYYMMDDYY)

BIN: 019082 PCN: MPS GROUP: MPS001150TC

PRESENT THIS FORM TO THE LOCAL PHARMACY TO OBTAIN YOUR INITIAL PRESCRIPTION.
 COMMON PARTICIPATING PHARMACIES (INCLUDING, BUT NOT LIMITED TO):

WALMART	KROGER	CVS	SAFEWAY	TOM THUMB	KMART
PHAR-MOR	WINN-DIXIE	WALGREENS	RANDALLS	UNITED DRUGS	TARGET
SAM'S CLUB	SOUTHWEST	HEB	MED-RITE	ALBERTSON'S	BROOKSHIRE BROTHER'S

TO LOCATE A PHARMACY NEARBY, CALL 877-232-6520 or visit
<https://www.mitchell.com/products-services/pharmacy-solutions/scriptadvisor>

Disclaimer: It is important to note that compensability will be determined by the claims department and the confirmation of this treatment/ service request is in no way intended as an endorsement, nor is it intended to interfere with the provider from the duties to adhere to any applicable practice standards.

If you need assistance, please contact the Mitchell help desk at: **(877) 232-6520**