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JAN 14 2019

Per _____

January 9, 2019

Mr. Brian J. Wagner
President
National Association of Postal Supervisors
1727 King Street, Suite 400
Alexandria, VA 22314-2753

Dear Brian:

By letter dated November 21, 2012, you were notified that the Postal Service had selected a new provider for the Workers Compensation Prescription Benefit Program (copy enclosed). The subject program is being discontinued.

The Department of Labor Office of Workers' Compensation has contracted with *First Script* to provide the Pharmacy Benefit Manager (PBM) program for work related injuries. Use of this program is mandatory for employees with work-related injuries.

Employees covered by this program will receive a letter from *First Script* with their pharmacy benefit card. The card will go into effect on February 1 or March 1, as indicated in the correspondence from First Script.

We have enclosed a sample letter concerning the program.

Please contact Bruce Nicholson at extension 7773 if you have questions concerning this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Alan S. Moore".

Alan S. Moore
Manager
Labor Relations Policies and Programs

Enclosures

LABOR RELATIONS



November 21, 2012

Mr. Louis M. Atkins
President
National Association of Postal Supervisors
1727 King Street, Suite 400
Alexandria, VA 22314-2753

Certified Mail: 7008 1140 0004 6691 6025

Dear Louis:

As a matter of general interest, the Postal Service has selected a new provider for the Workers Compensation Prescription Benefit Program. The contract with First Script expires on December 12 and will be taken over by PMSI. The only changes to the program are the Phone and Fax numbers. Enclosed is an overview of the program.

Please contact John Cavallo at extension 3804 if you have any questions concerning this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Alan S. Moore".

Alan S. Moore
Manager
Labor Relations Policy and Programs

Enclosure

firstscript
3535 E. Valencia Road
Tucson, Arizona 85706



**Division of Federal Employees' Compensation /
Federal Employees' Compensation Act Pharmacy Benefit Program**

DONALD TEST1
2143 LIBERTY LOOP RD
TUCSON, FL 32533

Dear United States Postal Employee/Claimant,

The Department of Labor's Office of Workers' Compensation Programs Division of Federal Employees' Compensation (OWCP DFEC) has contracted with First Script to serve as DFEC's Pharmacy Benefit Manager (PBM) for claimants covered under the Federal Employees' Compensation Act (FECA). You may use the enclosed First Script/FECA Pharmacy Benefit Card for prescriptions for your work-related injury starting on February 1, 2019. Your use of the First Script/FECA pharmacy program is **mandatory**; otherwise, payment of drugs for your injury cannot be authorized at the pharmacy.

CARD BENEFITS:

- No need to file for reimbursements for prescriptions
- Easy access for filling prescriptions and mail order option available on prescription over 90 days
- 24/7 dedicated call center to handle any questions – 1-877-344-3811

Simply present the enclosed card to a participating pharmacy along with your prescriptions for your accepted FECA work-related injury. You can search for participating pharmacies on the web at www.feca-pbm.dol.gov. When filling your work-related injury prescriptions, generic medications are generally used as a more affordable alternative to brand name drugs unless your physician has otherwise indicated. For your convenience First Script will assist in transitioning your retail pharmacy prescriptions to our voluntary mail order program. Simply contact First Script at 877-344-3811 for complete assistance with any questions. You may also contact this number for any additional questions you may have related to the First Script/FECA PBM.

Thank you,
First Script

Instructions: Peel card from carrier and fold adhesive side against itself to form a wallet ID card. Please keep your First Script/FECA card in a secure place. If you lose your card, you may obtain a replacement by contacting First Script at 1-877-344-3811.

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Pharmacy Benefit Card

DONALD TEST1 (32099675)
ID#: 10012345 Effective Date: 02/01/2019
Date of Injury: 03/04/2001
US POSTAL SERVICE

Pharmacy: Bill online through Express Scripts
Rx Group: FSNSFED | BIN#: 610014
First Script Customer Service 1-877-344-3811

**This First Script/FECA Pharmacy Benefit Card
must be presented each time
pharmacy services are requested.**

CARDHOLDER: This pharmacy benefit card is **ONLY TO BE USED FOR MEDICATIONS PRESCRIBED FOR YOUR ACCEPTED WORK-RELATED INJURY**. In using this card, you acknowledge and accept financial responsibility for any prescriptions filled under this card that are later found by First Script to be unrelated to your injury.

This card is non-transferable and may be used only by the person whose name appears on the face of this card. **WILLFUL MISUSE** of this card to obtain pharmacy benefits is considered fraud. OWCP DFEC reserves the right to terminate or modify benefits provided by this card at any time.

If you have any questions, please contact First Script at 1-877-344-3811.

coventry

División de compensación de empleados federales/ley de compensación de empleados federales tarjeta de beneficios de farmacia

Estimado Empleado del Servicio Postal de los Estados Unidos/Reclamante:

La División de Programas de Compensación para Trabajadores de la Oficina de Compensación de Trabajadores del Departamento de Trabajo ha firmado un contrato con First Script para actuar como Gerente de Beneficios de Farmacia (PBM) de DFEC para reclamantes cubiertos por la Ley de Compensación para Empleados Federales (FECA). Usted puede usar la Tarjeta de Beneficios de Farmacia First Script / FECA adjunta para las recetas de su lesión relacionada con el trabajo a partir del 1 de febrero de 2019. Su uso del programa de farmacia First Script / FECA es **obligatorio**; de lo contrario, el pago de medicamentos por su lesión no será autorizado en la farmacia.

Beneficios de la Tarjeta

- No hay la necesidad de solicitar reembolsos por recetas
- Hay fácil acceso para la presentación de recetas y la opción de pedido por correo disponible con receta durante 90 días
- El centro de llamadas, dedicado para las 24 horas, 7 días de la semana para atender cualquier pregunta es: 1-877-344-3811

Simplemente presente la tarjeta adjunta a una farmacia participante junto con sus recetas para su lesión relacionada con el trabajo aceptada por FECA. Puede buscar farmacias participantes en la web en www.feca-pbm.dol.gov. Al completar sus recetas de lesiones relacionadas con el trabajo, los medicamentos genéricos se usan generalmente como una alternativa más asequible a los medicamentos de marca, a menos que su médico indique lo contrario. Para su comodidad, First Script lo ayudará a realizar la transición de sus recetas de farmacias minoristas a nuestro programa de pedido por correo voluntario. Simplemente comuníquese con First Script al 877-344-3811 para obtener asistencia completa con cualquier pregunta. También puede comunicarse con este número para cualquier pregunta adicional que pueda tener relacionada con el PBM de First Script / FECA.

Sinceramente,

First Script

Instrucciones: Retire la tarjeta del portador y doble el lado adhesivo contra sí mismo para formar una tarjeta de identificación de cartera. Guarde su tarjeta First Script / FECA en un lugar seguro. Si pierde su tarjeta, puede obtener un reemplazo comunicándose con First Script al 1-877-344-3811.

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tarjeta de beneficios de farmacia

Esta tarjeta de beneficios de farmacia debe presentarse cada vez se solicitan servicios de farmacia.

TITULAR DE LA TARJETA: esta tarjeta de beneficios de farmacia **SOLO SE DEBE UTILIZAR PARA MEDICAMENTOS PRESCRITOS PARA SU LESIÓN RELACIONADA CON EL TRABAJO** aprobada. Al usar esta tarjeta, usted reconoce y acepta la responsabilidad financiera por cualquier receta dispensada en virtud de esta tarjeta que First Script considere que no está relacionada con su lesión.

Esta tarjeta no es transferible y solo puede ser utilizada por la persona cuyo nombre aparece en la cara de esta tarjeta. El **MAL USO** de esta tarjeta para obtener beneficios de farmacia se considera fraude. OWCP DFEC se reserva el derecho de cancelar o modificar los beneficios proporcionados por esta tarjeta en cualquier momento.

Si tiene alguna pregunta, por favor contacte First Script a 1-877-344-3811.