



## Argent Workers' Compensation Prescription Information

### Employer:

Please fill out employee information below and provide employee with this document to take to any pharmacy with prescriptions.

Employee Name:	
Group#:	10602464
Member ID (SSN):	
Date of Injury:	
Processor:	myMatrixx
Bin#:	014211
Day supply is limited to 30 days for a new injury.	
myMatrixx Help Desk: (877) 804-4900	

Employer Signature:	Phone:	Date:
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### Employee:

Argent has partnered with **myMatrixx** to make filling workers' compensation prescriptions easy.

This document serves as a temporary prescription card. A permanent prescription card specific to your injury will be forwarded directly to you within the next 5 to 15 business days.

Please take this letter and your prescription(s) to a pharmacy near you. myMatrixx has a network of over 60,000 pharmacies nationwide. If you need assistance locating a network pharmacy near you, please call myMatrixx toll free at (877) 804-4900.

**IF YOU ARE DENIED MEDICATION(S) AT THE PHARMACY PLEASE CALL (877) 804-4900**

**Pharmacist:** Please obtain above information from the injured employee if not already filled in by employer to process prescriptions for the workers' compensation injury only. Document only valid if signed and dated by employer above.

For questions or rejections please call (877) 804-4900. Please do not send patient home or have patient pay for medication(s) before calling myMatrixx for assistance.

**NOTE:** Certain medications are pre-approved for this patient; these medications will process without an authorization. All others will require prior approval.

**FOR ALL REJECTIONS OR QUESTIONS CALL: (877) 804-4900**

Joe Sample  
123 2nd Street  
Anywhere, FL 33635

Thu May 24 12:50 EDT 2007

RE: Argent Workers' Compensation Prescription Drug Program

Dear Joe Sample,

Argent has contracted with myMatrixx to have prescriptions for your work related injury filled at no expense to you.

**What is Covered?**

Only medication(s) prescribed by your authorized treating physician for your work-related injury will be approved. This program does not cover prescriptions for any other medical condition.

**What do I do?**

After receiving your prescription from your workers' compensation physician, visit any network pharmacy and present your prescription and prescription card. Your pharmacy will submit the required information to myMatrixx. You do nothing else.

In the event there is a problem processing your prescription(s) please call or have the pharmacist call myMatrixx 24 hours a day, 7 days a week at 877-804-4900.

**Which pharmacies can I use?**

Your prescription Card is honored at over 60,000 pharmacies nationwide. Here are just a few in your area. For more network pharmacy locations, please call 877-804-4900.

Walgreens Pharmacy  
1211 Hillsborough Ave.

Publix Pharmacy  
8975 Race Track Rd.

Walgreens Pharmacy  
7925 Gunn Highway

CVS #5196  
11670 Country Way Blvd.

Publix Pharmacy  
12139 W. Linebaugh Ave.

Kash N Kerry Pharmacy  
10617 Sheldon Road

CVS Pharmacy  
8801 W. Linebaugh Ave.

Publix Pharmacy  
7835 Gunn Highway

CVS Pharmacy  
7920 Gunn Highway



**ARGENT**<sup>™</sup>  
A DIVISION OF WEST BEND

Processor: myMatrixx  
BIN #:  
Name: Betty Sample  
Member ID: 123456789  
Group #: 1060XXXX  
Person Code: Leave Blank  
ABC Employer

**myMatrixx**<sup>™</sup>  
good medicine for business

# Answers to your questions.

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## **1. What is this card?**

This card is for your workers' compensation prescription needs. Please take this card to the pharmacy when you are filling medications for your work-related injury.

## **2. Why did I receive this card?**

You received this card due to an injury that occurred on the job.

## **3. What if I am not currently taking any medications due to the injury?**

Please put the card in a safe place in case you start taking medications for your current injury.

## **4. When should I use this card?**

Anytime you need to fill a medication for your work-related injury.

## **5. Are all medications pre-approved?**

Your insurance company may have pre-selected medications that will go through without authorization. If you drop off a prescription at the pharmacy and it rejects for any reason the pharmacy should call us and we will call your insurance co. for approval. If you would like to know the types of medications that are pre-approved before going to the pharmacy, please call 877-804-4900 and a customer service rep will be happy to assist you.

## **6. Can my family members use this card?**

No, this is only for your work-related injury.

## **7. What should I do if there is a problem with my card when I take it to the pharmacy?**

Your pharmacy should call us with any problems they are having with the card. If for ANY reason they do not call us, or if you have any questions regarding your work-related medications, please call our customer service team at 877-804-4900.

## **8. Are you my workers' compensation insurance company?**

No, we were contracted by your workers' compensation insurance company to handle all of your work-related prescription needs.

## **9. What happens if my medication doesn't provide any relief from my symptoms or pain?**

You should contact your doctor or our pharmacist to verify that the medication prescribed for your pain is the most appropriate for your condition.

## **10. Should I tell my doctor about other medications I am taking not related to my injury?**

Yes, it is very important that your physician and pharmacist know ALL the medications you are currently taking. Some medications may counter the effect of other medications you are taking and some may even be harmful or life threatening when taken together. If you are unsure of your current medications, call our myMatrixx pharmacist.

## **11. Can I talk to one of your pharmacists if I have a question?**

Yes, our pharmacists are available to answer all of your medication related questions.

**For any additional questions please contact myMatrixx at 877-804-4900**

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**Patient** - You must present this identification card each time you go to the pharmacy for your authorized prescriptions only. If you are denied medication, please call.

**Pharmacist** - For questions, please call 24 hours a day, 365 days a year. Dispensed quantity of medications is limited to a 30 day supply. Do not send patient home without first contacting myMatrixx for all rejections.

**Note:** Insurance company has pre-approved certain medications for this patient; these medications will process without an authorization. Any medications that are rejecting, must be called into myMatrixx for authorization.

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**Any questions or problems, please call:  
877.804.4900**