# What's in *YOUR* Wallet?

# WTC Health Program

#### **Questions?**

EXPRESS SCRIPTS **Prescription ID Card** 003858 Effective Date 6/1/2022 **RxPCN** WTCRESP RxGrp (80840) CWK000100002 JOHN Q SAMPLE The WTC Health Program is a limited health program. For WTC-related prescriptions only. WTC Health Program **Pharmacy Plan** 

> **Express Scripts** 800-935-7179

#### **FDNY Clinical Center:**

718-999-1858

Prescriptions 718-999-1937

WTCPrescriptions@fdny.nyc.gov

Express Scripts Customer Service: 800-935-7179 Accredo Specialty: 855-540-1780 TDD: 800-759-1089 Pharmacist Use Only: 855-601-4768 express-scripts.com accredo.com

## PICA Card

For Active Members, Non-Medicare Retirees, and their Eligible Dependents.

A New York City Gov benefit covering Chemotherapy

(excluding a member's WTC-related and WTC-certified cancers) and Injectable Medications.



#### **Questions?**

**Express Scripts Member Services:** 

800-467-2006

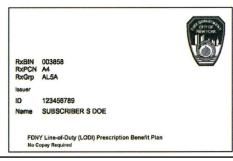
**Pharmacist Help Desk** 800-824-0898

www.express-scripts.com



## FDNY Line of Duty Injury (LODI) Prescription Card

Covers Active Firefighters, Fire Marshals & Wipers - Prescriptions for LODI-related antibiotics, burn products, ophthalmic, musculoskeletal, respiratory therapy, AIDS/HIV (brief exposure response).



## **Ouestions?**

## Sofia Bakradze

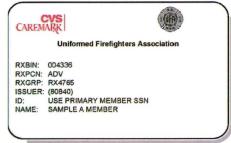
718-999-1937

sofia.bakradze@fdny.nyc.gov

#### Visit www.express-scripts.com Patient Customer Service: 1.866.533.9195 TDD: 1.800.899.2114 1.800.824.0898 Pharmacist Use Only: Pharmacist: Please follow the action steps listed below to enter the claim Step 1 - Enter Bin #003858 Step 2 - Enter Processor Contro Step 3 - Enter Rx Group #AL5A Step 4 - Enter 9 digit member ID #(Employee SSN) Step 5 - Enter the member's date of birth

## UFA Security Benefit Fund (SBF) Prescription Card

For non-WTC & non-LODI prescription medications for Active Members, Non-Medicare Retirees and their Eligible Dependents.



**Questions? CVS Caremark Customer Care** 866-832-0563

www.caremark.com

Present this card to any participating retail pharmacy to obtain your short-term supply of medicine. For additional pharmacies go to www.oaremark.com or contact a Customer Care representative. Customer Care: 1-866-832-0563 Submit Claims to: CVS Caremark Claims Department Phoenix, AZ 85072-2136 Pharmacists: For claims or eligibility questions call Customer Care toll-free: 1-866-832-0563

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PLEASE NOTE: Prescriptions for some STATIN MEDICATIONS and BIRTH CONTROL should be run using your Medical Insurance