

Pharmacy Reimbursement for Guard and Reservist with Line of Duty (LOD) injuries or illness

Who This is For National Guard and Reservist.

Background and purpose MMSO in conjunction with Express Scripts Incorporated (ESI) began processing Retail Pharmacy reimbursements for National Guard and Reservist on 15 November 2004.

Eligibility National Guard and Reservist who have pre-paid or have been billed for pharmaceuticals in conjunction with a Line of Duty Determination (LOD) injury or illness.

Note: Over-the-counter drugs and any non-covered pharmaceuticals will not be reimbursed.

Process for Reimbursement Follow these steps to get reimbursed for authorized pharmaceutical items:

Step	Action
1	Member completes and signs a CHAMPUS Claim - Patient's Request for Medical Payment, DD Form 2642 .
2	Member provides claim printout or paid civilian pharmacy invoice with the following information: <ul style="list-style-type: none"> • Doctors Name • Drug Name • National Drug Code (NDC) number • Quantity • Cost share or amount charged • Date of service, and • Name of Retail Pharmacy
3	Obtain eligibility documentation that covers the date of injury and/or pharmacy, i.e. orders, attendance roster, or LOD if not already sent to/on file at MMSO.

Pharmacy Reimbursement for Guard and Reserve staff with Line of Duty (LOD) injuries or illness CONTINUED

Process for Reimbursement - continued

4	Complete MMSO Medical Eligibility Verification worksheet (MMSO Worksheet 01). Check pharmaceutical reimbursement in block #11.
5	Forward the DD Form 2642, pharmacy invoice, eligibility documentation, LOD, and MMSO Medical Eligibility Verification Worksheet to the following address or FAX: <div style="text-align: center;"> <p>Military Medical Support Office Attn: RC Retail Pharmacy Reimbursement P.O. Box 886999 Great Lakes, IL 60088-6999</p> <p>FAX: 847-688-6460</p> </div>

Results and follow up If MMSO determines your pharmacy bill is related to your LOD injury or illness they will instruct ESI to process your claim for reimbursement. Within 30 working days, you will receive an Explanation of Benefits (EOB) statement with a reimbursement check from ESI.

References and websites TRICARE website for the pharmacy program:
<http://www.tricare.mil/pharmacy/>

Point of Contact If you have questions or need additional assistance beyond the information provided here, contact:

Division	Healthcare Support Services Branch
Position	Customer Service Representative
Phone	888-647-6676
Fax	847-688-6460

