



PMACare24 Service

If an employee has sustained an injury that is NOT
life, limb or eyesight threatening:

At the Point of Injury, please call:

24 HOURS A DAY | 7 DAYS A WEEK | 365 DAYS A YEAR



The nurse will make a recommendation if the injury is self-care or if medical attention is required.

FOR PRESCRIPTIONS

If you require medications as a result of your injury, you will need to provide the pharmacy the following information:

Member ID #*, Date of Injury, Group#: PMACRX, PCN#: CRX, BIN#: 021460

***Member ID format:** The ID must start with FF followed by the last 4 digits of the social security number plus 8-digit DOI (MMDDYYYY).

Example: FF999901012018
