INFORMATION FOR VETERANS

Please bring this flyer when you visit an in-network retail pharmacy to fill a prescription

Eligibility

• You MUST verify your eligibility before using pharmacy benefits. Visit https://www.va.gov/COMMUNITYCARE/programs/veterans/General_Care.asp
• DISCLAIMER: This flyer does not guarantee authorization of service. You MUST meet VA eligibility requirements and be enrolled for health care to use this benefit

Choosing a pharmacy

• You must visit an in-network pharmacy located in the same state as your urgent care or referred care visit to fill your prescription
• Use the VA Facility Locator to find an in-network pharmacy at https://www.va.gov/find-locations/

When you arrive at the pharmacy

• Present a valid government-issued ID (i.e. Veterans Health ID Card, DoD ID Card or other valid government ID)
• You SHOULD NOT have to pay a copayment at the time you receive your prescriptions or vaccination

For more information

• To determine what CCN region you live in, or for more information, visit https://www.va.gov/COMMUNITYCARE/programs/veterans/CCN-Veterans.asp

INFORMATION FOR PHARMACIES

Community Care Network Regions 1-3

AL, AR, CT, DC, DE, FL, GA, IA, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NE, NH, NJ, NY, OH, OK, PA, PR, RI, SC, SD, TN, VA, VI, VT, WI, WV

Billing information for OPTUM providers in these states or U.S. territories listed above: Enter Community Care Network/Veteran's pharmacy claims using the following information:

Step 1: Enter BIN: 004336
Step 2: Enter PCN: ADV
Step 3: Enter Rx Group
  • Referred Care: Rx3839
  • Urgent Care: Rx4136
  • Flu Shot or COVID-19 Vaccine: Rx3841
Step 4: Enter Veteran ID: 10-digit Veteran ID or SSN
Step 5: Enter Veteran’s date of birth (YYMMDD format)

For questions, please call the CVS Caremark™ Pharmacy Help Desk at 800-364-6331 (24/7)

Community Care Network Region 4 & 5

AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, TX, UT, WA, WY

Billing information for TriWest providers in the states listed above: Enter Community Care Network/Veteran’s pharmacy claims using the following information:

Step 1: Enter BIN: 003858
Step 2: Person Code: 01
Step 3: Enter PCN: A4
Step 4: Enter Rx Group
  • Referred Care, Flu Shot or COVID-19 Vaccine: VETERAN
  • Urgent Care: VAPC3RX
Step 5: Enter Veteran ID: 10-digit Veteran ID or SSN
Step 6: Enter Veteran’s date of birth (YYYYMMDD format)

For questions, please call the Express Scripts Pharmacy Help Desk at 800-922-1557 (24/7)

INFORMATION FOR URGENT CARE PROVIDERS

• Call 888-901-6609 to confirm Veteran’s eligibility for urgent care services
• Call 833-4VETNOW (833-483-8669) to confirm Veteran’s eligibility for urgent care services