

**The Borough of Bergenfield  
Senior Preferred Prescription Savings Card**

Please complete the application and return with check for membership fee made payable to:

**Borough of Bergenfield  
198 N. Washington Avenue  
Bergenfield, NJ 07621**

**MEMBERSHIP APPLICATION**

**Please check one of the following:**

Membership Fee (per household)

- 1 year \$20.00**
- 3 years \$40.00 (get 1 year free!)**

**CARDHOLDER INFORMATION**

**Last Name:** \_\_\_\_\_

**First Name:** \_\_\_\_\_

**Street:** \_\_\_\_\_

**City, ST, Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_

**Male/Female:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**SPOUSE INFORMATION**

**First Name:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_

**Male/Female:** \_\_\_\_\_

*By signing below, I attest that I and my spouse:*

- are residents of the Borough of Bergenfield
- are at least 55 years of age AND/OR receive Social Security Disability Benefits
- understand that this is a prescription discount savings card and not an insurance program

**Signature:** \_\_\_\_\_

CUT ALONG DOTTED LINE

***A Message From Your Mayor and Council***

We are sure that many of you are experiencing the increased cost of healthcare. Prescription drug costs are a large part of this cost escalation. Your Mayor and Council here in Bergenfield are keenly aware of the burden that ever-rising prescription costs are placing on our older residents.

As an aid to our senior residents, your Mayor and Council are pleased to sponsor a program through which you can receive prescription drugs at discounted prices. All Bergenfield residents that are aged 55 years or over, or are permanently disabled, are eligible.

For an annual fee of \$20 or \$40 for three years, the Borough of Bergenfield Senior Preferred Prescription Savings Card Program offers members savings on their prescription drugs of up to 10% to 50% off regular retail prices and is accepted at virtually all local independent and chain pharmacies. Please read this brochure carefully to determine if this card will help you meet your prescription drug needs.

The Bergenfield Mayor and Council are proud and pleased to be able to present this program to our older residents. We hope that those who enroll will be better able to afford their medications. We will continue to work for all the residents of Bergenfield and look for ways to assist you.

**Please allow 7 to 10 business days for your application to be processed. Your Senior Preferred Prescription Savings Card will be delivered directly to your home via U.S. Mail.**

**GSPPO Provider Services Corp.  
P.O. Box 4190  
Hamilton, NJ 08610**

[www.gspops.com](http://www.gspops.com)

**Toll-Free Customer Service:  
1-800-633-0037**



***The Borough of  
Bergenfield  
Senior Preferred  
Prescription  
Savings Card***

**TIMOTHY J. DRISCOLL  
MAYOR**

**COUNCIL**

- Thomas A. Lodato, Council President**
- Carlos Aquasvivas**
- Bruce Carlson**
- Barry Doll**
- Robert Gillman**
- Chris Tully**

## Introducing the Senior Preferred Prescription Savings Card

### What is the Senior Preferred Prescription Savings Card?

- It is a program designed to provide savings of up to 10% to 50% on prescription drugs for Senior and Disabled citizens.

### Who is eligible?

- Residents age 55 or older.  
OR
- Residents of any age who are disabled and receiving Social Security Disability Benefits.

### Are there any other restrictions?

- There are no income requirements.
- There are no exclusions for pre-existing conditions.
- There are no exclusions for participation in other prescription programs.

### Is this insurance?

- The Senior Preferred Prescription Savings Card is NOT a managed care or insurance program.

### Why should I apply for the Prescription Savings Card ?

- For a small fee, you (and your spouse, if applicable) receive special discounted pricing on prescription medications.
- You can save up to 10% to 50% off regular retail prescription prices.

### What limitations apply to the Prescription Savings Card?

- There are no quantity limits, receive as much medication as prescribed.
- There are no limits on the number of prescriptions filled or refilled.
- There are no deductibles to meet.
- There are no forms to fill out.



### Do I have to change medications in order to receive my savings?

- No. All brand name and generic drugs which require a prescription are included; there are no exclusions.
- Medication switches or calls to your physician are NOT necessary.

### Do I have to mail my prescriptions in order to receive my savings?

- No. Your Prescription Savings Card is accepted throughout an extensive network of participating chain and independent pharmacies in New Jersey and nationwide.
- Save at pharmacies in town or across the country.
- No mail-order is required.



### How do I use the Prescription Savings Card?

- Present your Prescription Savings Card to your pharmacy along with your prescriptions to be filled.
- Your pharmacy will notify you of your special discounted price.
- You pay just this price!

### How do I apply?

- To apply, complete the attached membership application (on the reverse of this panel).
- Include the applicable membership fee and mail as indicated.