

# The Borough of Northvale Senior Preferred Prescription Savings Card

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

**Borough of Northvale**  
116 Paris Avenue  
Northvale, New Jersey 07647

## 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: \_\_\_\_\_

### SPOUSE INFORMATION

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

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

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

*By signing below, I attest that the persons above:*

- are residents of the Borough of Northvale
- 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 Mayor John E. Rooney*

Everyone is aware that the costs of all forms of health insurance are rising at an alarming rate. Prescription drugs are one of the components of the overall cost escalation. Senior citizens, who on average need more prescription medication than other people, are particularly vulnerable to the increased costs because they are often on fixed incomes. Faced with inflationary increases in other basic expenses as well, they are often forced to make unpleasant choices on how to spend their limited funds.

To assist our seniors in these tough times, the Mayor and Council are pleased to announce our sponsorship of a new program aimed at reducing the costs of prescription drugs. In partnership with our local pharmacies, we have developed the *Borough of Northvale Senior Preferred Savings Card Program* to allow seniors to purchase their needed medications at discounted prices.

Any resident of Northvale who is 55 years of age or older, or currently disabled and receiving Social Security benefits, can enroll in the program for one year at \$20 per household, or for three years at \$40 (one year free). Enrollment in the program will provide prescription discounts from up to 10% to 50% off the regular retail prices, depending on, the medication. Based on these savings, the card should pay for itself very quickly.

We hope that our seniors will take advantage of this program and enjoy some relief from the financial pressures of expensive prescription costs. We are happy to be able to provide this program to eligible residents and will continue to work on your behalf in this and in other areas.

**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.**

**GSPO 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



GS  
**POPS**



*The Borough of Northvale  
Senior Preferred  
Prescription Savings  
Card*

**JOHN S. HOGAN**  
*Mayor*

Lloyd Winans  
*Council President*

*Councilmembers*  
Scott Furletti  
Andrew Gullestad  
William Amend  
Raffi Jamgotchian  
Roy Sokoloski

## *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.

### *Is this insurance?*

- The Senior Preferred Prescription Savings Card is not a supplemental insurance program.
- The Senior Preferred Prescription Savings Card is not a managed care program.

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

- For a small fee, you and your eligible dependent(s) 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

### *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.