

## *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.

The Borough of Ridgefield  
Senior Preferred Prescription Savings Card  
Please complete the application and return  
with check for membership fee made payable to:  
**Borough of Ridgefield**  
604 Broad Avenue  
Ridgefield, N.J. 07657

**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 I and my spouse:

- are residents of the Borough of Ridgefield
- 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 Council President  
Anthony R. Suarez**

The Borough of Ridgefield is pleased to offer the Senior Preferred Prescription Savings Card Program to our local senior citizens. We are very concerned about the increasing costs of prescription drugs and the impact that these high costs have on our seniors' quality of life. This program will make prescription drugs more affordable for our local seniors.

The Senior Preferred Prescription Savings Card provides discounts on prescription drugs for senior citizens and disabled persons who enroll in the program. The card costs \$20 per year and provides savings of 10% to 50% off the cost of prescription drugs.

Please read this brochure carefully to see if you qualify for the program and to learn how to obtain your Prescription Savings Card. We sincerely hope that this program provides you with lower healthcare costs.

For more information, please contact Borough Administrator John Perkins at 201-943-5215.

**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.**

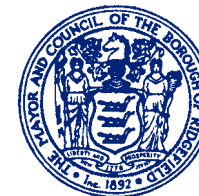
**GSPo Provider Services Corp.  
P.O. Box 4190  
Hamilton, NJ 08610**

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

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



**GS  
POPS**



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

**STEWART V. VEALE  
MAYOR**

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