## Retail Pharmacy Card

**MBR ID:** Enter Year & Time (Example: Year 2022; Time 9:14; Enter ID 2022914)

## **RxGRP:** NOASRCC

**RxBIN:** 610709



**NOTE:** This card is being provided to you at <u>NO COST</u>. There are no forms to fill out. Simply take this card into a participating pharmacy with your Rx to use for discounts on qualified medications. This card has been pre-activated for immediate use! Pharmacy Helpline: 800-223-2146 Customer Service: 877-321-6755

This program is not insurance. This is a point-of-sale discount program.

## PARTICIPATING PHARMACIES

