

FREE PRESCRIPTION DISCOUNT CARD

## Nueces County, TX

RXBIN: 004336  
RXPCN: ADV  
RXGRP: RXNUETX  
ISSUER: (80840)  
ID: NBH39096301



NACO National Association of Counties

This is not insurance.

Tear off this card and  
**start saving today!**

### It's easy

Simply present your card, provided to you in a joint effort of your local county government and the National Association of Counties (NACo), at a participating retail pharmacy and save an average of 20% on your prescription medicine. Finding a pharmacy is easy; 9 out of 10 pharmacies nationwide accept your discount card. No enrollment form, no membership fee, one card, immediate use.

### No limits

You and your family may use your prescription discount card any time your prescription is not covered by insurance. There are no restrictions and no limits on how many times you may use your card.

### Savings

Visit [caremark.com/naco](http://caremark.com/naco) to look up a participating pharmacy, a price estimate for your prescription, check drug interactions, or read news articles from leading health journals. For more information, call toll-free **1-877-321-2652**.

Información en Español en la parte atrás del folleto

**Participant:** Call toll-free **1-877-321-2652**.

**Pharmacist:** The RxPCN, RxGRP, full ID, and an 01 person code must be submitted online to **Caremark** to process claims for this program. For information, call toll-free **1-800-364-6331**.

*Arranque esta tarjeta y comience a ahorrar con su recetas medicas.*

*Para mas información sobre este programa gratis en español de descuentos para recetas, por favor llame al 1-877-321-2652.*

**This is not insurance. Discounts are only available at participating pharmacies.**

Savings may vary by drug and by pharmacy. Savings are based on actual 2007 drug purchases for all drug discount card programs administered by Caremark. The program administrator may obtain fees or rebates from manufacturers and/or pharmacies based on your prescription drug purchases. These fees or rebates may be retained by the program administrator or shared with you and/or your pharmacy.

By using this card, you agree that you are responsible for paying the entire prescription cost of the medication after the application of any applicable discount.

Prescription claims through this program will not be eligible for reimbursement through Medicaid, Medicare or any other government program.

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