



SAVE UP  
To \$100



BIN#: 601341  
RxPCN#: OHCP  
Group ID#: OH7706021  
Cardholder ID#: NTL103180903

This coupon is not health insurance.

## USE THIS COUPON FOR SAVINGS\* ON YOUR NICOTROL INHALER

If eligible, you may **save up to \$100** in **out-of-pocket costs**.

### Here's how:

- Take this printout, with your valid prescription, to any participating pharmacy and save through **December 31, 2020**
- Save up to \$100** when you fill your NICOTROL Inhaler prescription

\*Terms and conditions apply. Please see below.

**TO PHARMACIST:** Process NICOTROL Savings Offer using BIN# 601341.

**For A Patient Paying Cash:** Submit a primary claim to Opus Health using BIN# 601341. Eligible patients will receive a savings of up to \$100 off of their co-pay or out-of-pocket costs, after a \$50 minimum patient responsibility. The Savings Offer is good for a maximum savings of \$100 per year. You will receive the remaining balance plus a handling fee.

**For A Patient With An Authorized Third-Party Payer:** Process the claim using the patient's prescription insurance for the primary claim; once adjudicated to the primary insurance, please process a Secondary Claim (COB) to Opus Health using BIN# 601341 and the information from the patient's savings offer for the secondary claim submission. Eligible patients will receive a savings of up to \$100 off of their co-pay or out-of-pocket costs, after a \$50 minimum patient responsibility. The Savings Offer is good for a maximum savings of \$100 per year. You will receive the remaining balance plus a handling fee.

For help processing this offer, call 1-800-364-4767.

## Terms & Conditions

By participating in the NICOTROL Savings Offer Program, you acknowledge that you currently meet the eligibility criteria and will comply with the terms and conditions described below:

- This Savings Offer is not valid for prescriptions that are eligible to be reimbursed, in whole or in part, by Medicaid, Medicare, Tricare, or other federal or state healthcare programs (including any state prescription drug assistance programs) and the Government Health Insurance Plan available in Puerto Rico (formerly known as "La Reforma de Salud")
  - You must deduct the savings received under this program from any reimbursement request submitted to your insurance plan, either directly by you or on your behalf
  - This one-time offer has a maximum benefit of \$100. If a patient's co-pay is \$150 or less, the patient is responsible for paying \$50. If a patient's co-pay is \$200, the patient is responsible for \$100 (\$200 - \$100 = \$100)
  - This Savings Offer is not valid when the entire cost of your prescription drug is eligible to be reimbursed by your private insurance plans or other health or pharmacy benefit programs
  - The Savings Offer is not valid for Massachusetts residents whose prescriptions are covered, in whole or in part, by third-party insurance
  - This Savings Offer is not valid where prohibited by law
  - The Savings Offer cannot be combined with any other rebate/coupon, free trial, or similar offer for the specified prescription
  - The Savings Offer may not be redeemed more than once per month per patient
  - **The Savings Offer will be accepted only at participating pharmacies**
  - **The Savings Offer is not health insurance**
  - This Savings Offer is good only in the U.S. and Puerto Rico
  - The Savings Offer is limited to 1 per person during this offering period and is not transferable
  - Pfizer reserves the right to rescind, revoke, or amend the program without notice
  - No membership fees. The Savings Offer and Program expire on 12/31/2020
- For any questions, please call Customer Service at 1-877-465-6437, visit [NICOTROL.com](http://NICOTROL.com), or write: PFIZER SAVINGS CARD, PO Box 4581, Warren, NJ 07059. Be sure to include your name and mailing address.