

PRX

Member ID: Patient's date of birth (MMDDYYYY) CHES01 Group ID:

Valid for entire family BIN: 610210 PARAMOUNT

Preferred Pharmacy Provider

SHOPPERS Pharmacy_®

This is not insurance-discount only Process all claims electronically

By using this card the holder agrees to the terms under which it was issued

Pharmacist Help Desk: 1-800-481-0605 Member services: 1-800-974-3454

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