

Get Instant Savings!



Use this page

Print and take this page,
along with your prescription,
to your pharmacist[†]
Start saving immediately!

ZEMPLAR SAVINGS CARD

Pay as little as

\$5 per month*

*Up to \$70/month off for eligible patients.

To learn more, visit Zemplar.com.

OPUSHEALTH™

BILL PRIMARY INSURANCE FIRST
INSURED PATIENTS ONLY

RxBIN: 601341
RxPCN: OHCP
RxGrp: OH9002031
RxID: B01100136183
Suf: 01



PATIENTS CAN PAY AS LITTLE AS \$5 PER MONTH WITH THE ZEMPLAR SAVINGS CARD

- Eligible patients can get ZEMPLAR for as little as \$5[†]
- Offer only works with the ZEMPLAR brand
- Patients may save trips to the pharmacy by converting to a 90-day supply

Terms and Conditions

Patient Instructions:

- Present this ZEMPLAR Savings Card along with your insurance card to receive discounts when presenting your prescription
- You pay the first \$5 of your co-payment on your qualified prescriptions. The discount covers up to \$70 a month of your remaining co-pay expense
- This card can be used up to 2 uses per month
- Some mail-order pharmacies may have other requirements
- Please contact your mail-order pharmacist for redemption instructions

Pharmacist Instructions:

- Submit the copay card authorized for all commercially insured patients by the patient's primary insurance as a secondary transaction to OPUS Health
- When you use this card, you are confirming that you have not submitted and will not submit a claim for this prescription for reimbursement under any federal, state or government-funded healthcare program, such as Medicare (including Part D), Medicare Advantage, Medicaid, Medigap, Veterans Affairs, the Department of Defense or TRICARE
- Pharmacists with questions can call OPUS Health at 1-800-364-4767

*Eligibility: Available to patients with commercial prescription insurance coverage for ZEMPLAR who meet eligibility criteria. Copay assistance program is not available to patients receiving prescription reimbursement under any federal, state, or government-funded insurance programs (for example, Medicare [including Part D], Medicare Advantage, Medigap, Medicaid, TRICARE, Department of Defense, or Veterans Affairs programs) or where prohibited by law or by the patient's health insurance provider. If at any time a patient begins receiving prescription drug coverage under any such federal, state, or government-funded healthcare program, patient will no longer be able to use the ZEMPLAR Savings Card and patient must call OPUS Health at 800.364.4767 to stop participation. Patients residing in or receiving treatment in certain states may not be eligible. Patients may not seek reimbursement for value received from the ZEMPLAR Savings Program from any third-party payers. Offer subject to change or discontinuance without notice. Restrictions, including monthly maximums, may apply. This is not health insurance. Please see full Terms and Conditions.

[†]Offer eligible only with ZEMPLAR prescriptions.

[‡]Up to \$70/month off for eligible patients.

[Click here for full Prescribing Information.](#)

