

Your Savings Card is ready to use right away*

Zoloft[®] (sertraline HCl)

Zoloft[®] Savings Card 
(sertraline HCl)

You may pay as little as

\$4 A MONTH with a maximum yearly benefit of \$1,800.*

BIN #: 600428
Group #: 06780013
RxPCN: 06780000
ID #:
Expiration Date: 12/31/24

*Terms and conditions apply. See below.
This card is not health insurance and will be accepted only at participating pharmacies.

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- 1 Take your brand-name ZOLOFT prescription and Savings Card to any participating pharmacy.
- 2 Remind your pharmacist that your Savings Card only works with brand-name ZOLOFT.
- 3 Keep this printout and use it to save on future ZOLOFT prescriptions.

Check your pills: Some pharmacies may fill a branded prescription with a generic medication

- Before you leave the pharmacy, **check your bag to make sure the shape and distinctive markings** match one of the images pictured here
- If your medicine does not match, speak to your pharmacist right away to **get the brand-name ZOLOFT your doctor prescribed**



TO PHARMACIST: Process ZOLOFT Savings Offer using RxBIN# 600428/PCN# 06780000.

For Insured Patients: Process a coordination of benefits (COB/split bill) claim using patient's prescription insurance for the PRIMARY claim. Submit SECONDARY claim to ZOLOFT Savings Offer.

For Uninsured Patients: Submit PRIMARY claim to ZOLOFT Savings Offer.

For help processing this offer, call 1-855-220-9547.

ZOLOFT is available by prescription only.

*Eligibility required. Terms and conditions apply. Full terms and conditions can be found at [ZOLOFT.com/savings-terms](https://www.zoloft.com/savings-terms). **This Savings Offer will be accepted only at participating pharmacies. This Savings Offer is not health insurance.** No membership fees. Maximum savings of \$1,800 per calendar year. This Savings Offer is not valid for prescriptions that are eligible to be reimbursed, in whole or in part, by Medicaid, Medicare, or other federal or state healthcare programs. This Savings Offer is not valid for prescriptions that are eligible to be reimbursed in whole by private insurance plans or other health or pharmacy benefit programs. Viatrix reserves the right to revoke, rescind, or amend this offer without notice. For help with the ZOLOFT Savings Offer, call 1-855-220-9547, visit [ZOLOFT.com](https://www.zoloft.com), or write: Viatrix, 1000 Mylan Boulevard, Canonsburg, PA 15317.

Click here for [Full Prescribing Information, including BOXED WARNING, and Medication Guide.](#)

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