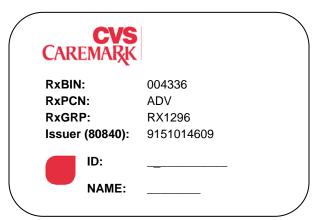


Dear Valued Member:

This is a one time use card that should be provided to your pharmacy for updating prescription billing beginning 09/01/2014. This one time use card contains information needed by your pharmacist beginning 09/01/2014.

- 1. Please fill in the underlined areas with your name and ID number. (This information is needed by the pharmacist to process prescriptions.)
- 2. Please present this temporary ID card to the pharmacist.



Present this Prescription Card to fill your prescription at any participating retail pharmacy.

For more information, visit www.caremark.com/trsactivecare or call TRS-ActiveCare and speak to a Customer Care representative toll-free at 1-800-222-9205

Pharmacy Help Desk for Pharmacists: 1-800-364-6331

Submit paper claims to: CVS Caremark Claims Department P.O. Box 52136, Phoenix, AZ 85072-2136

3. For questions or concerns, please call TRS-ActiveCare toll-free at 1-800-222-9205 to speak to a Customer Care representative 24 hours a day, seven days a week.