## PHARMACY DISCOUNT CARD



Group #: |CRX15 BIN #: 008878

Member ID: Enter member's 10-digit phone # plus add 2-digit person code to member ID

Processor: Net Card Systems 01=member 02=spouse 03=dependent

Pharmacist Help Desk: 888.886.5822 This is not Insurance. It is a discount medical program.

For more information visit www.bizadvantix.com.com or call 855.521.5313

## THIS IS NOT INSURANCE, it is a discount medical program. PAYMENT MUST BE MADE AT TIME OF SERVICE.

For more information on additional discount programs visit www.ipersonalhealthcenters.com



This card is accepted at all major pharmacies and other major drug stores. Present this card and your prescription at any participating pharmacy to receive your discount. At the time of purchase you are responsible for paying the entire cost of the drug, once the discount is applied. This card is not a guarantee of benefits. This is a free program. This program is VOID WHERE PROHIBITED BY LAW.

## **Additional Discount Card Print Page**

If you need additional discount cards or have lost your card, you can print these cards, cut them out and fold in the middle. You can also request new or additional cards from iPersonal Health Centers by emailing the request to info@bizadvantix.com

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