

Rx Prescription Drug Card

NAME: _____

RxMBR ID: Customer's Ten (10) Digit Phone Number

OR Initials & Last 4 Digits of Phone Number

RxGRP: ASMRUNBAYCCU RxBIN: 610709 RxPCN: 7777

PROGRAM: UNA RX CARD – UNITED NETWORKS OF AMERICA

POWERED BY:  United Networks of America



Compliments of:



NOTE: This card is being provided to you at **NO COST**. There are no forms to fill out. Simply take this card into a participating pharmacy (see back) with your Rx to qualify for discounts on medications. You also have access to other value added programs listed on back. Each family member must have his/her own card. This card has been pre-activated for immediate use! To obtain information and to print additional cards visit www.ubccu.org.

Customer Service (CSR)
877.321.6755

Pharmacy Helpline
800.248.1062

THIS PROGRAM IS NOT INSURANCE
THIS PROGRAM IS A POINT OF SALE DISCOUNT PLAN