

HOW TO SIGN UP!

1

Go to: <https://www.wellcardhealth.com/NewUsers.aspx>

2

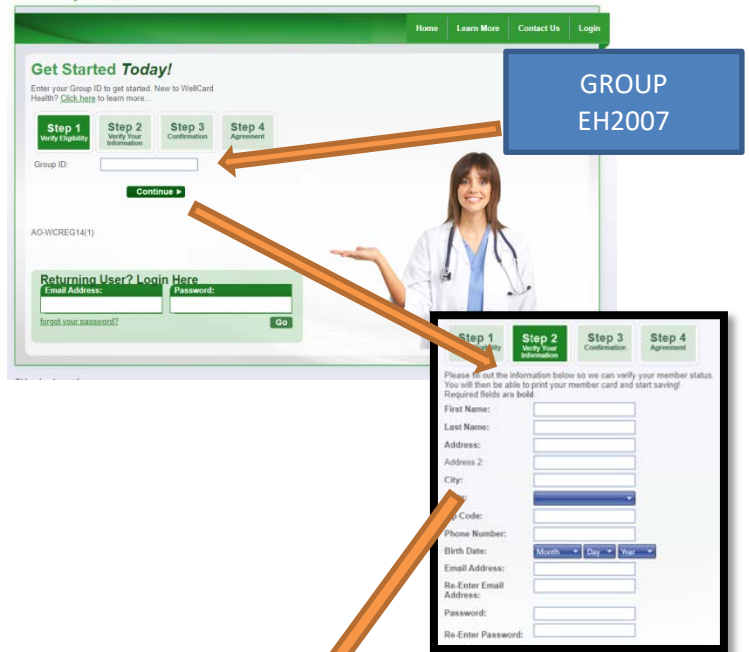
GROUP ID EH2007

CLICK  TWICE

3

PRINT YOUR CARD!

USE AT PHARMACY



Home Learn More Contact Us Login

Get Started Today!

Enter your Group ID to get started. New to WellCard Health? [Click here](#) to learn more.

Step 1 Verify Identity Step 2 Verify Your Information Step 3 Confirmation Step 4 Agreement

Group ID:

AD-WCREG14(1)

Returning User? Login Here

Email Address: Password:

forgot your password?

Step 1 Verify Identity Step 2 Verify Your Information Step 3 Confirmation Step 4 Agreement

Please enter the information below so we can verify your member status. You will then be able to print your member card and start saving! Required fields are bold.

First Name:

Last Name:

Address:

Address 2:

City:

State:

Zip Code:

Phone Number:

Birth Date: Month Day Year

Email Address:

Re-Enter Email Address:

Password:

Re-Enter Password:



“When I show my



my pharmacist shows me the savings!”



Just show your WellCard and Save...

- Prescriptions
- Dental Care
- Vision Care
- Hearing Care
- Medical Bill Help
- Diabetic Care Services, Vitamins & Daily Living Products
- WellCard Rewards



Keep more money in your pocket!

Start saving today...

1. Find a pharmacy or provider by visiting www.WellCardHealth.com or calling 800-562-9625.
2. Keep this card in your wallet and present it at your pharmacy or provider's office to save.

Show the pharmacy your WellCard, and they'll show you the savings on your prescriptions.

A PRESCRIPTION SAVINGS PROGRAM
Present this card to your pharmacy and provider.

Group #EH2007
Member ID:
Processor: NetCard
Systems BIN #008878

WellCard Health
Smart. Simple. Savings.

MEMBER:
To find a provider: visit www.WellCardHealth.com.

PHARMACY:
Add 2-digit person code to Member ID
01 = Member
02 = Spouse
03 = Dependent, etc.
Pharmacist Help Desk: 888-886-5822

PROVIDER:
Physician & Dental Provider:
To verify eligibility & for patient responsibility call 888-203-6711.
The patient is responsible for the entire discounted cost at the time of service.
Vision Provider:
To verify eligibility call 888-203-6662.

This is Not Insurance. It is a discount medical program. It does not replace COBRA or any other medical insurance program nor is it a Medicare Part D prescription drug plan. Cardholders are responsible for paying the discounted cost at the time of service from participating providers. The DMPO does make available a list of all program providers which includes their name, city and state, and medical specialty prior to purchase, upon request. WellCard Health is FREE. WellCard Health will not share or sell your personal information. The discount plan organization is Access One Consumer Health, Inc., 84 Villa Road, Greenville, SC, 29615, www.accessonedmpo.com. This program is not available to residents of Montana, but may be used at participating Montana providers. Other state residents: visit www.WellCardHealth.com for full disclosure.

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