

PRINTING AN ADDITIONAL ID CARD

Quick Reference Guide



PRINT MEMBER ID CARD FROM CAREMARK.COM

The screenshot shows the CVS/caremark website interface. At the top, there is a navigation bar with links for Profile, Messages, Help, Español, and Change Text Size. The main header includes the CVS/caremark logo and utility links for 'Check Drug Cost & Coverage' and 'Deductible Status \$452.20 applied'. A primary navigation menu contains 'Home', 'Prescriptions', 'Plan & Benefits', and 'Health Resources'. The 'Plan & Benefits' menu is open, displaying options such as 'Plan Summary', 'Check Drug Cost & Coverage', 'Pharmacy Locator', 'Print Member ID Card', 'Covered Drug List (Formulary)', 'Prescription Savings Guide', 'Print Plan Forms', 'Specialty Pharmacy', and 'Prior Authorization Process'. A red arrow points to the 'Print Member ID Card' option. A red text annotation states: 'Assumes member has logged into their own account at caremark.com'. Other elements include an 'Important Message' banner, a 'Secure Inbox' with 0 new messages, and a 'Show Details' button.

Step 1 – Select Print Member ID Card from Plan & Benefit Menu



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BUCKS AND MONTGOMERY COUNTY SCHOOLS
HEALTH CARE CONSORTIUM

PRINT MEMBER ID CARD

Home > Profile > Print Member ID Card

[Update My Profile](#)

[Secure Message Center](#)

[Print Member ID Card](#)

[Pay Mail Account
Balance](#)

[Print Plan Forms](#)

[My Account FAQs](#)

Print Member ID Card

Print a personalized ID card. Use it to access your prescription benefits immediately.

[Print an ID Card](#)

Prescription ID Information needed at Pharmacy

| | |
|--------|---------------------|
| RxBIN | 004336 |
| RxPCN | ADV |
| RxGRP | |
| Issuer | Account information |
| ID | will be listed here |
| Name | |

Step 2 – Select Print an ID Card




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DASHBOARD-PRINT MEMBER ID CARD

close window 

Dear Member,
Please print this temporary ID card for use at a Caremark participating retail pharmacy.
Follow the steps below to obtain your prescription.

 **Print**

CVS/caremark

RXBIN: 004336
RXPCN: ADV
RXGRP:
ISSUER:

ID: **Account information**
Name: **will be here**

Present this card to any participating retail pharmacy to obtain your short-term supply of medicine. For additional pharmacies go to www.caremark.com or contact a Caremark Customer Care representative.

Customer Care: (866) 284-9226

Submit Claims to:
Caremark
PO Box 52136
Phoenix, AZ 85072-2136

Please present this temporary ID card to the pharmacist.
For questions or concerns, please contact a Caremark Customer Care representative toll-free at **(866) 284-9226**.

Print

Step 3 – Select Print and take to the pharmacy