



415 South Main Street
Waynesville, Ohio 45068

Invoice

Invoice Number 151219-C
Invoice Date 6/2/2022
Period 05/16/2022-06/01/2022
Payment Terms: Net 48 Hours
Line of Business: Commerical

Bill To:
WinSupply
c/o Lucent Health

Transaction Fee/ Reimbursement Summary

Plan Group	Paid Claims-\$6 Per Claim	Total Claim Fees
APP-WinSupply	2529	\$15,174.00

Prior Authorizations	Per PA Fee	Total PA Fee
	\$45.00	\$0.00

COVID 19 Test Kits Reimbursement	Total Amount

DMR Fee-\$5.00	Total Amount
	\$0.00

Drug Ingredient Summary

Plan Group	Ingredient Cost	Other	Total Drug Cost for Period
APP-WinSupply	\$351,207.89		\$351,207.89

Plan Total Balance Due	\$366,381.89
6/9/2022 ACH Payment Received	-\$326,443.44
Remaing Balance Due	\$39,938.45

Please Remit Payment to : ApproRx, LLC 415 South Main Street, Waynesville, OH 45068

Any questions regarding your invoice, please feel free to contact Heidi Miltenberger at 513-897-1346.