

Dispensed at KPWA MAIL ORDER on 09/20/21 at 01:25
 Federal Tax ID: 91-0511770 Phone: 800-245-7979 NCPDP Number: 4932403
 2921 Naches Ave SW
 Renton, WA 98057



Patient: HA, ETHAN (Member# 02872341)

Prescription Number	Date Of Fill	Qty	Days Supply	Patient Charge
24126540-36	09/20/21	10.50	28	150.00

OMNITROPE 10 mg/1.5 mL (6.7 mg/mL) sub-q cartridge (NDC 00781300407)

Prescriber: Kishiyama, Christopher,

Account 02872341

Total Patient Charges: **150.00 / Payments 150.00 Due: 0.00**

Total Patient Charges 0.00

This receipt has been provided to you as proof of payment. Payments received will be posted to Kaiser Permanente records within 3 business days. Please retain a copy of this document for your records.

This document contains confidential information about your health and care. This is provided directly to you for your personal private use only.

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088
 For questions regarding your medications please contact our Pharmacy at 1-800-245-7979 We are available 7 days a week from 9am-4 30pm

Need to pay a bill?

Pay Online <https://wa.kaiserpermanente.org/html/public/customer-service/payment>

Pay in person with a personal check or a bank card at a Kaiser Permanente medical office Kaiser Permanente accepts Visa, MasterCard, Discover, and American Express. We don't accept cash.

Mail your payment with the payment coupon in the envelope sent with the bill. Include the guarantor ID on your check.

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