

Online Claim Submission

Code: KDH

Employer: Kaweah Delta Healthcare

EmpID: 572554723

EmpName: Villalobos, Cynthia

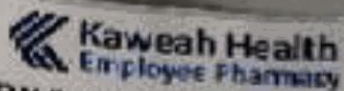
Submitted: February 10, 2023

Batch: 30283588

Claim Total: \$45.49

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	3/21/2022	RX	\$45.49	Provider: Holvik. For whom: Cynthia villalobos.



Kaweah Health
Employee Pharmacy

602 W. Willow,
Suite B, Visalia,
CA 93291



559 624-2920

RX# 405260 N 03/21/22
VILLALOBOS, CYNTHIA C.
3315 E SANDERS CT
VISALIA, CA 93291

FG IYP

002-472-8180

Dr HOLVIK, WILLIAM C.

ADVAIR 250/50 DISKUS #60 #60
NDC# 0173-0596-00 GLAXOSMITH

NO REFILL(S) LEFT MEDIMPAC
PLI Ref 780430430

COPAY: \$5.00



Kaweah Health
Employee Pharmacy

602 W. Willow,
Suite B, Visalia,
CA 93291



559 624-2920

RX# 405252 N 03/21/22
VILLALOBOS, CYNTHIA C.
3315 E SANDERS CT
VISALIA, CA 93291

FG IYP

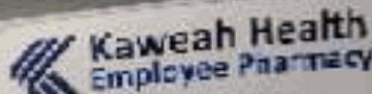
002-472-8180

Dr HOLVIK, WILLIAM C.

MONTELUKAST SOD 10 MG TAB #90
NDC# 33342-102-15 NACLEODS

2 REFILL(S) LEFT MEDIMPAC
PLI Ref 780430430

COPAY: \$5.49



Kaweah Health
Employee Pharmacy

602 W. Willow,
Suite B, Visalia,
CA 93291



559 624-2920

RX# 403097 N 02/28/22
VILLALOBOS, CYNTHIA C.
3315 E SANDERS CT
VISALIA, CA 93291

FG IYP

002-472-8180

Dr DTA, KYLE

SUTAB 1479-225-188 MG TABS #24
NDC# 52268-201-01 BRAINTREE

NO REFILL(S) LEFT MEDIMPAC
PLI Ref 780506411

COPAY: \$35.00

