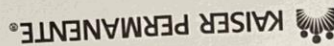


## Online Claim Submission

Code: SWA  
Employer: WA State PEBB  
EmpID: 638449352  
EmpName: BAI, YAN  
Submitted: February 10, 2023  
Batch: 30283787  
Claim Total: \$10.00  
Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	2/2/2023	RX	\$10.00	Provider: Kaiser Permanente. For whom: James Cheung.



Dispensed at KPWA MAIL ORDER on 02/02/23 at 12:03  
Federal Tax ID: 91-0511770 Phone: 800-245-7979 NCPDP Number: 4932403  
2921 Naches Ave SW  
Renton, WA 98057

**Patient: CHEUNG, JAMES (Member# 03063645)**

Prescription Number	Date Of Fill	Qty	Days Supply	Retail Price	Patient Charge
29609970-36	02/02/23	135.00	90	14.01	10.00

Account 03063645  
Total Patient Charges: 10.00 / Payments 10.00 Due: 0.00  
Total Patient Charges 0.00



Pharmacy Dispensing List

This is a list of medications that were processed in this order. This document is not a bill. A Kaiser Permanente billing statement will be mailed for any remaining balance due.  
This document contains confidential information about your health and care. This is provided directly to you for your personal, private use only.  
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.