

Online Claim Submission

Code: FET

Employer: Feintool Cincinnati, Inc.

EmpID: 293887758

EmpName: Rohrer, Daniel

Submitted: February 9, 2023

Batch: 30261353

Claim Total: \$10.15

Attachments: 2

Line	Service Date(s)	Type	Cost	Notes
1	1/19/2023	RX	\$10.15	Provider: Kroger Pharmacy. For whom: Daniel Rohrer.

KROGER PHARMACY 01400353
11390 MONTGOMERY RD CINCINNATI, OH 45249
PHONE: (513) 247-7760 STORE: 01400353

DATE: 01/19/2023
NCPDP: 3648536

DANIEL ROHRER

10/09/64 **REFILL**

RX# 7125177

TX: S00120986711 DAW: 0

FEROSUL 325 MG TABLET

12140 CEDARBREAKS LN

CINCINNATI, OH 45249

PHONE: (513) 489-0927

NDC: 00904-7591-80 QTY: 180 DAYS: 90

VISORY DISCOUNT-R

AUTH #: 31559035

PRESCRIBER:

R ISFORT

NPI: 1639494032

1.00 REFILL OF 180 UNTIL 08/15/2023

PRICE: \$10.15

RPH: AK

D.E. : _ _ _

YOUR INSURANCE BENEFIT SAVED YOU: \$18.34

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