Online Claim Submission

Code: IA3

Employer: Charleston Area Medical Center

EmpID: 160605990

EmpName: Konarski, Deborah

Submitted: January 18, 2023

Batch: 29917590

Claim Total: \$166.99

Attachments: 4

Line	Service Date(s)	Туре	Cost	Notes
1	1/4/2023	DENTAL	\$92.00	Provider: Dr. Justin Tebbenkamp. For whom:
				Amber Konaski. Was having severe pain in jaw
				and tooth. Dental insurance does not begin
				until Feb 1. Went to verify was not an abscess.
2	1/6/2023	RX	\$74.99	Provider: CVS. For whom: Debbie Konaski.
				Diabetic sensor

Dr. Justin Tebbenkamp

1305 North Main St Blacksburg, VA 24060

Wednesday, January 04, 2023 14:57:48

Patient Name Konarski, Amber

Type SALE

Account MC

Card Number ********7384

Order ID 59145-81404-012023

Reference Number 641836352

AMOUNT \$92.00

App Preferred Name CAPITAL ONE

EMV AID A000000041010

TC FDD897E77D32E86C

Entry Contacticc

Response Code 00/Approved

Approval Number 02475P

APPROVED - THANK YOU

IMPORTANT - retain this copy for your records

*** Cardholder Copy ***

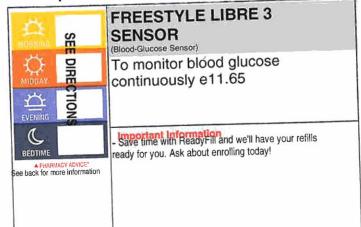


Konarski, Deborah

124 Kinloch Drive, Blacksburg, VA 24060 DOB: 7/69 TEL: (610) 310-5042

Prescription Information

www.cvs.com/druginfo



Receipt & Refill Information

CVS Pharmacy STORE#: 3460 800 University City Blacksburg, VA 24060	/LE LIBRE 3	
STORE TEL: (540) 951-4911 RX: 934009 02	599-0818-00 DAW: 0	
INSURANCE INFORMATION: OPTUMRX BIN 610011 PCN IRX TP: 262590 GR: COMH-S AUTH#: D52301056GWD5	Safety MFR PKG: Yes REFILL: 9 by 11/2/23 MFR: ABBO IT DIABETES	
	PRSCBR: Debra Crites-Sams DAYS SUPPLY: 28 DATE FILLED: 1/5/23	
RETAIL PRICE:\$146.99 COUPON: \$59.00	AMOUNT DUE: \$74.99	

Notes from the Pharmacy

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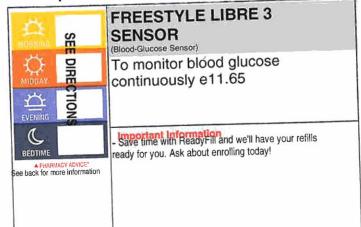


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