

## Online Claim Submission

Code: MRV

Employer: Marvell Semiconductor, Inc.

EmpID: 556451881

EmpName: Lam, Johnny

Submitted: February 10, 2023

Batch: 30283806

Claim Total: \$1,101.55

Attachments: 4

Line	Service Date(s)	Type	Cost	Notes
1	2/6/2023	RX	\$22.44	Provider: Kaiser. For whom: Johnny Lam. Prescription
2	1/3/2023	VISION	\$1,048.00	Provider: Bin Optical. For whom: Johnny Lam. New eyeglass
3	1/28/2023	OTC	\$31.11	Provider: Walmart. For whom: Jessica Lam. contact solution

# Kaiser Permanente Mail Order Pharmacy

Livermore CDP Pharmacy

300 Pullman St

Livermore, CA 94551

(888) 218-6245

8am - 6pm Monday - Friday 8am - 6pm Saturday,  
9am - 6pm Sunday (closed holidays)

JOHNNY F LAM  
6337 CLOVERHILL DR  
SAN JOSE, CA 95120

ORDER:3413905616 2/6/23 09:02 AM

Name: Johnny F Lam

Medical Record Number: \*\*\*\*\*9969

RX Number	Med Qty	Medication Name	NDC Number	KP Retail	Your Price
2256 2175 9769	200	ALLOPURINOL 100 MG TABLET	29300034905	\$12.44	F \$12.44
2256 2177 1172	30	INDOMETHACIN 50 MG CAPSULE	3172054301	\$10.85	F \$10.00
Payment Type	CardType	Card	ExpDate	TransacID	Amount
PAYMENT CARD	AMEX	1009	----	220207134617	\$22.44

Check out online features available by signing on to kp.org

- Check order status and track delivery: 24 hrs/day; kp.org/yells
- Do paperwork: Get health documents on-line: Set your preferences at kp.org/paperless
- Get notifications: Sign up for text or email messages: Update notification preferences at checkout at kp.org/yells

Get your COVID-19 vaccine to help protect yourself and your loved ones.  
Visit kp.org or call our appointment center today.

Total Prescription Price: \$22.44

Sales Tax: \$0.00

Shipping Cost: \$0.00

Your Order Total: \$22.44

Payment Balance Due: \$0.00

All Prescription Orders are First Unopened Over the Counter Items may be returned for refund within 30 days with original receipt.  
Pharmacy Consultation: Telephone Service: The Kaiser Permanente Mail Order Pharmacy provides prescription consultation services to all patients. You have the right to request consultation on your prescriptions. To request a consultation with a pharmacist concerning your medications, please call our pharmacy at 1.888.218.6245.  
Get your advice for medical advice about side effects. You may report your side effects to FDA at 1.800.FDA.1088.  
Obtaining specimens for analysis of your package or medication, please contact us at 1.888.218.6245 for laboratory services.  
A toxic exposure alternative may be available to you. Please ask your pharmacist.  
If you wish to cancel your order, please contact us immediately. You can contact us by phone, referencing the order in question. We encourage calling us right away to cancel an order. We can cancel most orders up until it has been processed prior to shipping.  
If a Health Flexible Spending Card applies, there may be eligible to be applied to Healthcare Spending Card Account. Check this receipt and check your plan for details.  
Thank you for using the Kaiser Permanente Mail Order Pharmacy.

**Bin Optical, Inc.**  
1600 S. De Anza Blvd. # 70  
San Jose, CA 95129

Tel: (408) 996-2237  
Fax: (928) 569-9953

QC

CUSTOMER SIGNATURE:

RECEIVED:

NAME: <u>Lam, Johnny</u>		SPH: <u>R -1.50</u>		ADD: <u>R +2.25</u>		<input type="checkbox"/> Glass <input checked="" type="checkbox"/> Polycarbonate <input type="checkbox"/> Plastic	
CYL: <u>AXIS</u>		DEC: <u>0.75</u>		PRISM: <u>1.50</u>		<input type="checkbox"/> I have been notified of the implications of using non-impact resistance lenses. <input type="checkbox"/> I am aware that I am using my own frame or lenses and will not hold Bin Optical, Inc. or its employees responsible for damage upon insertion or adjustment. <input type="checkbox"/> I agree to personally pay for any amount shortage between my Bin Optical, Inc. bill and the finalization of my insurance coverage.	
PHONE: <u>408 838-1683</u>		SUNGLASSES		FRAME		SUNGLASSES LENSES A.R. COAT TINT/U.V.A.S. COAT MOUNT/RIMLESS CLIP-ON REPAIR INS. CO-PAY (try)	
DATE: <u>1/3/23</u>		499.00		150.00		SUBTOTAL DISCOUNT TAX TOTAL DEPOSIT BALANCE DUE	

TINT: Grey Brown  
 A.O. / Comfort / Rodenstock  
 PROGRESSIVE  
 FT-28 / Exec / Blended  
 BIFOCAL / TRIFOCAL  
 SINGLE VISION  
 1.6 1.67 1.74  
 1.499 ASL 1.56  
 Other:

1048.00  
 1048.00  
 100.00



Jan 28, 2023 order

Order# 2000107-12884933



Boston SIMPLUS Multi-Action Contact Lens Solution to Clean and Condition Rigid Gas Permeable Lenses – from Bausch + Lomb, 3.5 fl. oz. Qty 3 **\$28.44**

**Subtotal** \$28.44

**Taxes** \$2.67

**Total** **\$31.11**

**Payment method**  Ending in 1006



Jan 28, 2023 order

Order# 2000107-12884933



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