

Online Claim Submission

Code: SWB
Employer: WA State SEBB
EmpID: 539022913
EmpName: SWAIN ANNEPU, SARAH
Submitted: February 10, 2023
Batch: 30283303
Claim Total: \$10.61
Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	2/10/2023	RX	\$10.61	Provider: CVS Pharmacy. For whom: Ravikumar Annepu.

Receipt & Refill Information

CVS Pharmacy

STORE#: 16487

13950 Ne 178th Pl
Woodinville, WA

STORE TEL: (425) 492-1820

RX: 200644 00

RF

INSURANCE INFORMATION:

ANTHEM PCN WG

TR: 37025

GR: WLHA

AUTH: 230283272870494999

RETAIL PRICE: \$33.89

LITHIUM CARBONATE
ER 450 MG TB

NDC: 64980-0278-01

DAW: 0

QTY: 90 EA

CAP: Safety

MFR PKG: Yes

REFILL: 1 by 1/25/24

MFR: RISING PHARM

PRSCBR: Rebecca Bay

DAYS SUPPLY: 90

DATE FILLED: 1/28/23

AMOUNT DUE: \$10.61

Notes from the Pharmacy

 **CVS** pharmacy

OPEN
HERE 