

Online Claim Submission

Code: IA3
Employer: Charleston Area Medical Center
EmplID: 233291664
EmpName: Campbell, Tasha
Submitted: February 10, 2023
Batch: 30282074
Claim Total: \$420.00
Attachments: 2

Line	Service Date(s)	Type	Cost	Notes
1	1/1/2022	RX	\$420.00	Provider: Dr. Krietzner. For whom: Tasha Campbell.

PATIENT PROFILE

February 7, 2023

CAMPBELL, TASHA
1929 Oakridge Dr
Charleston, WV 25311
Phone: (304) 546-2429
SS#: - -

Bristol Pharmacy
4001 Long Prairie Rd., STE 100
Flower Mound, TX 75028
Phone: (469) 771-4117
NCPDP: 5922807

1/1/2022 through 2/7/2023

RX #	R#	RA	Dispensed	Auth Number	Qty	Drug Name	NDC Number	Doctor	Price	AG	IN
0856477	00	06	06/09/2022		30	DOXYCYCLINE DR 40MG CAPS (ORACEA AUTHORIZED GEN)	66993-0815-30	MOORE, JACQUELINE	\$355.54	QN*	IF
Multiple Payment: NAVITUS (Primary) Paid: \$0.00 BRIGHTSCRIPS (Secondary) Paid: \$295.54 Copay: \$60.00											
	01	06	07/05/2022		30	DOXYCYCLINE DR 40MG CAPS (ORACEA AUTHORIZED GEN)	66993-0815-30	MOORE, JACQUELINE	\$355.54	QN*	LCG
Multiple Payment: NAVITUS (Primary) Paid: \$0.00 BRIGHTSCRIPS (Secondary) Paid: \$295.54 Copay: \$60.00											
	02	06	07/29/2022		30	DOXYCYCLINE DR 40MG CAPS (ORACEA AUTHORIZED GEN)	66993-0815-30	MOORE, JACQUELINE	\$342.00	QN*	TTN
Multiple Payment: NAVITUS (Primary) Paid: \$0.00 BRIGHTSCRIPS (Secondary) Paid: \$282.00 Copay: \$60.00											
	03	06	08/22/2022		30	DOXYCYCLINE DR 40MG CAPS (ORACEA AUTHORIZED GEN)	66993-0815-30	MOORE, JACQUELINE	\$342.00	QN*	IF
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	04	06	09/15/2022		30	DOXYCYCLINE DR 40MG CAPS (ORACEA AUTHORIZED GEN)	66993-0815-30	MOORE, JACQUELINE	\$342.00	QN*	LCG
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Prescriptions Agency: \$2001.08

Copay: \$420.00

Private Pay: \$0.00

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