

Online Claim Submission

Code: SWA
Employer: WA State PEBB
EmpID: 508983812
EmpName: MISSALL, KRISTEN
Submitted: January 23, 2023
Batch: 29992363
Claim Total: \$33.37
Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	12/19/2022	OTC/RX	\$33.37	Provider: Safeway pharmacy. For whom: Kristen Missall.



#0533

19150 WOODINVILLE-DUVALL RD
WOODINVILLE, WA 98077
(425) 788-6658

Rx #:7175335

NEW

Missal, Kri

Pickup: Urgent

MISSALL, Kristen N

48

18035 Ne 146th Way
Woodinville, WA 98072

Phone: (319) 333-9281

BERGSTROM, KENDRA MD

Fill Date: 12/19/2022

Myorisan 40 MG CAP AKOR

NDC:61748-0304-13 Disp. Qty:30

Refills 0

Safety Caps:Yes

We can call your doctor for a refill.

This medicine is a(n) orange, oblong-shaped capsule
imprinted with V40. (Black inkSoftgels)

CASH: \$625.99

COPAY: \$33.37

Ins 1: NAV 0031

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Do not flush unused medications or pour down a sink or drain.