

Online Claim Submission

Code: CU8

Employer: CHRISTUS Health

EmpID: 458373890

EmpName: Connor, Susan

Submitted: January 23, 2023

Batch: 29989654

Claim Total: \$264.30

Attachments: 10

Line	Service Date(s)	Type	Cost	Notes
1	10/17/2022	RX	\$69.81	Provider: Walgreens. For whom: Joseph Connor.
2	9/21/2022	RX	\$194.49	Provider: Walgreens. For whom: Susan Connor.

31722-0882-90
EAST BACK

ROSUVASTATIN 5MG TABLETS

Pharmacy use only

PH: (361) 855-4440

Walden

1942-1943

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 230070647046100999

B. GONZALEZ, MD
MEG:CAMBER
YYY/ MDDGMDG/DAG

Refill NDC:31722-088Z-90 Your Insurance Saved You: \$99.99 Retail Price: \$109.99

ROSUVASTATIN 5MG TABLETS

DATE: 01/07/23

JOSEPH H CONNOR

TEXAS CORPUS CHRISTI TX 78415

PH: (361) 855-4440

Waldgrens

1992-1993

B. GONZALEZ, MD
MFG: AUBINDO
YYYI /DAG/DAG/DAG

CLAM REF# 223370640983011999

NDC: 65862-0202-99
 Retail Price: \$50.99 Your Insurance Saved You: \$40.99

DATE: 12/03/22

JOSEPH H CONNOR

JOSEPH H. CONNOR
5014 South Loop East, Yellow Rock Station, Corpus Christi, TX 78415

DW/DOW/DOW IAA

QTY 30
10 DRAM

FRONT: H
BACK: R3
LIGHT YELLOW

PH: (361) 855-4440

Tealagnum

NOT REPLY TO THIS ADDRESS

0. GONZALEZ, MU
 MFG. CAMBER
 YAY/ MDD/MDD/DAG
 CLAIM REF# 230070647046100999
 GROUP# CHRISTUS
 PLAN: PHSC

AAI WDO/MD/DAG

NDC 3172-0002-01 Your Insurance Saved You \$99.99
 Retail Price: \$109.99

ROSUVASTATIN 5MG TABLETS

DATE: 01/07/23

JOSEPH CONNOR

PH: (361) 855-4440

AND WILSON ROAD CORPUS CHRISTI, TX 78401

B. GONZALEZ, MD
MFG: AUBRINDO
YYY/ / MGG/DAG
PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 230070646926022899

YAY / MOD/DAG

Retail Price: \$50.99 Your Insurance Saved You: \$40.99
 NDC: 65862-0202-99

LOSARTAN 50MG TABLETS
QTY:30 NO REFILLS - DR. AUTH REQUIRED

RX # 2378851-03637
DATE: 01/07/23

JOSEPH CONNOR

Gold Sweet Gum & Yellow Rosewood, Corpus Christi, TX 78415
Tel: 361-847-8155

SUSAN CONNOR
DATE: 09/25/22
RX # 2337782-03637
LOSARTAN/HCTZ 100/12.5MG TABLETS
QTY: 30
2 REFILLS BEFORE 09/17/23
NDC: 05862-0469-90
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222684041543035899
NOC: 57664-0469-90
Your Insurance Saved You: \$64.69
Net Price: \$74.69
C. GREGORY, MD
M.D. / CAJALCO
ZZZ / I / JAO

SUSAN CONNOR
DATE: 09/28/22
RX # 2337782-03637
LOSARTAN/HCTZ 100/12.5MG TABLETS
QTY: 30
2 REFILLS BEFORE 09/17/23
NDC: 05862-0469-90
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222684041543035899
NOC: 57664-0469-90
Your Insurance Saved You: \$64.69
Net Price: \$74.69
C. GREGORY, MD
M.D. / CAJALCO
ZZZ / I / JAO

Refill MON 11:00AM
Pharmacy use only
PRAVASTATIN 20MG TABLETS
00093-7201-98
FAST RACK
QTY 30
10 DRAM
SNAP
LIGHT YELLOW
FRONT: 93 or TEVA
BACK: 7201
PH: (361)855-4440
Customer receipt
SUSAN CONNOR
DATE: 09/25/22
RX # 2337783-03637
PRAVASTATIN 20MG TABLETS
QTY: 30
2 REFILLS BEFORE 09/17/23
NDC: 00093-7201-98
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 22268404164061999
NOC: 00093-7201-98
Your Insurance Saved You: \$25.39
Net Price: \$35.39
C. GREGORY, MD
M.D. / CAJALCO
ZZZ / I / JAO

Refill MON 11:00AM
Pharmacy use only
PRAVASTATIN 20MG TABLETS
00093-7201-98
FAST RACK
QTY 30
10 DRAM
SNAP
LIGHT YELLOW
FRONT: 93 or TEVA
BACK: 7201
PH: (361)855-4440
Customer receipt
SUSAN CONNOR
DATE: 09/25/22
RX # 2337783-03637
PRAVASTATIN 20MG TABLETS
QTY: 30
2 REFILLS BEFORE 09/17/23
NDC: 00093-7201-98
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 22268404164061999
NOC: 00093-7201-98
Your Insurance Saved You: \$25.39
Net Price: \$35.39
C. GREGORY, MD
M.D. / CAJALCO
ZZZ / I / JAO

Refill THU 11:00AM
Pharmacy use only
METOPROLOL TARTRATE 50MG TABLETS
57664-0477-58
CELL 39
QTY 60
10 DRAM
SNAP
WHITE
FRONT: 477
PH: (361)855-4440
Customer receipt
SUSAN CONNOR
DATE: 09/21/22
RX # 2344169-03637
METOPROLOL TARTRATE 50MG TABLETS
QTY: 60
2 REFILLS BEFORE 09/17/23
NDC: 57664-0477-58
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222642558349008999
NOC: 57664-0477-58
Your Insurance Saved You: \$13.13
Net Price: \$27.89
C. GREGORY, MD
M.D. / CAJALCO
ZZZ / I / JAO

Refill THU 11:00AM
Pharmacy use only
METOPROLOL TARTRATE 50MG TABLETS
57664-0477-58
CELL 39
QTY 60
10 DRAM
SNAP
WHITE
FRONT: 477
PH: (361)855-4440
Customer receipt
SUSAN CONNOR
DATE: 09/21/22
RX # 2344169-03637
METOPROLOL TARTRATE 50MG TABLETS
QTY: 60
2 REFILLS BEFORE 09/17/23
NDC: 57664-0477-58
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222642558349008999
NOC: 57664-0477-58
Your Insurance Saved You: \$13.13
Net Price: \$27.89
C. GREGORY, MD
M.D. / CAJALCO
ZZZ / I / JAO

SUSAN CONNOR
12618800970
SOLIX TABLETS 50MG TABLETS
DATE: 10/16/22
RX # 2344169-03637
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222893783034090999
C. GREGORY, MD
MFG: CAMACO
ZZZ: / / MOG
NDC: 57664-0477-58
QTY: 60
2 REFILLS BEFORE 09/17/23
NDC: 57664-0477-58
Your Insurance Share You: \$12.61
Net Price: \$21.69
\$ 9.08

SUSAN CONNOR
12618800970
METOPROLOL TARTRATE 50MG TABLETS
DATE: 10/16/22
RX # 2344169-03637
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222893783034090999
C. GREGORY, MD
MFG: CAMACO
ZZZ: / / MOG
NDC: 57664-0477-58
QTY: 60
2 REFILLS BEFORE 09/17/23
NDC: 57664-0477-58
Your Insurance Share You: \$12.61
Net Price: \$21.69
\$ 9.08

SUSAN CONNOR
12618800970
MELOXICAM 7.5MG TABLETS
DATE: 09/29/22
RX # 2339214-03637
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222722711235040999
C. GREGORY, MD
MFG: ZYDUS
ZZZ: / / MOG/DAG
NDC: 68382-0050-05
QTY: 30
2 REFILLS BEFORE 06/16/23
NDC: 68382-0050-05
Your Insurance Share You: \$35.58
Net Price: \$35.58
\$ 3.41

SUSAN CONNOR
12618800970
MELOXICAM 7.5MG TABLETS
DATE: 09/29/22
RX # 2339214-03637
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222722711235040999
C. GREGORY, MD
MFG: ZYDUS
ZZZ: / / MOG/DAG
NDC: 68382-0050-05
QTY: 30
2 REFILLS BEFORE 06/16/23
NDC: 68382-0050-05
Your Insurance Share You: \$35.58
Net Price: \$35.58
\$ 3.41

SUSAN CONNOR
12618800970
SOLFENACIN 10MG TABLETS
DATE: 09/29/22
RX # 2346148-03637
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222722711366043999
C. DUKAK, MD
MFG: APOTEX
ZZZ: / / MOG/DAG
NDC: 60505-4703-03
QTY: 30
9 REFILLS BEFORE 07/05/23
NDC: 60505-4703-03
Your Insurance Share You: \$297.89
Net Price: \$297.89
\$ 10.00

SUSAN CONNOR
12618800970
SOLFENACIN 10MG TABLETS
DATE: 09/29/22
RX # 2346148-03637
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222722711366043999
C. DUKAK, MD
MFG: APOTEX
ZZZ: / / MOG/DAG
NDC: 60505-4703-03
QTY: 30
9 REFILLS BEFORE 07/05/23
NDC: 60505-4703-03
Your Insurance Share You: \$297.89
Net Price: \$297.89
\$ 10.00

WALGREENS

SUSAN CONNOR
8024 Swamp Oaks Dr, Corpus Christi, TX 78415542
DATE: 10/28/22
RX # 2346148-03637
SOLIFENACIN 10MG TABLETS
QTY: 30
REFILLS BEFORE 07/05/23
NDC: 60905-4703-03
Your Insurance Saved You: \$297.69
Net Price: \$307.69
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 223012866447025999
ZZZ: / MOGMO

\$ 10.00

WALGREENS

SUSAN CONNOR
8024 Swamp Oaks Dr, Corpus Christi, TX 78415542
DATE: 10/28/22
RX # 2346148-03637
SOLIFENACIN 10MG TABLETS
QTY: 30
REFILLS BEFORE 07/05/23
NDC: 60905-4703-03
Your Insurance Saved You: \$297.69
Net Price: \$307.69
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 223012866447025999
ZZZ: / MOGMO

\$ 10.00

WALGREENS

SUSAN CONNOR
8024 Swamp Oaks Dr, Corpus Christi, TX 78415542
DATE: 10/24/22
RX # 2337782-03637
LOSARTAN/HCTZ 100/12.5MG TABLETS
QTY: 30
REFILLS BEFORE 06/17/23
NDC: 65862-0469-90
Your Insurance Saved You: \$64.69
Net Price: \$74.69
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222973652336037999
ZZZ: / MOGMO

\$ 10.00

WALGREENS

SUSAN CONNOR
8024 Swamp Oaks Dr, Corpus Christi, TX 78415542
DATE: 10/24/22
RX # 2337782-03637
LOSARTAN/HCTZ 100/12.5MG TABLETS
QTY: 30
REFILLS BEFORE 06/17/23
NDC: 65862-0469-90
Your Insurance Saved You: \$64.69
Net Price: \$74.69
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222973652336037999
ZZZ: / MOGMO

\$ 10.00

Pharmacy use only

FRI 11:00AM
FAST RACK
PRAVASTATIN 20MG TABLETS
QTY: 30
REFILLS BEFORE 06/17/23
NDC: 00093-7201-98
Your Insurance Saved You: \$25.39
Net Price: \$25.39
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222932610981026999
ZZZ: / MOG

\$ 10.00

SNAP

QTY 30
10 DRAM
LIGHT YELLOW
FRONT: 93 or TEVA
BACK: 7201

WALGREENS

SUSAN CONNOR
8024 Swamp Oaks Dr, Corpus Christi, TX 78415542
DATE: 10/20/22
RX # 2337783-03637
PRAVASTATIN 20MG TABLETS
QTY: 30
REFILLS BEFORE 06/17/23
NDC: 00093-7201-98
Your Insurance Saved You: \$25.39
Net Price: \$25.39
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222932610981026999
ZZZ: / MOG

\$ 10.00

WALGREENS

SUSAN CONNOR
8024 Swamp Oaks Dr, Corpus Christi, TX 78415542
DATE: 10/20/22
RX # 2337783-03637
PRAVASTATIN 20MG TABLETS
QTY: 30
REFILLS BEFORE 06/17/23
NDC: 00093-7201-98
Your Insurance Saved You: \$25.39
Net Price: \$25.39
PLAN: PMSOL
GROUP: CHRISTUS
CLAIM REF: 222932610981026999
ZZZ: / MOG

\$ 10.00

Duplicate

Customer receipt

Duplicate receipt

Customer receipt

Duplicate receipt

Customer receipt

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 78415542
DOB: 08/05/70

RX # 2339214-03637 DATE: 10/28/22

MELOXICAM 7.5MG TABLETS

QTY: 30 2 REFILLS BEFORE 06/16/23

Refill NDC: 68382-0050-05

Retail Price: \$35.99 Your Insurance Saved You: \$35.49

\$ 3.50

C. GREGORY, MD
MFG: ZYDUS
ZZZ: / / MOG/MOG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223012866330081999

Walgreens

1502 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361)855-4440

Customer receipt

SUSAN CONNOR

8034 Sweet Gum St, Corpus Christi, TX 78415542
DOB: 08/05/70

RX # 2339214-03637 DATE: 10/28/22

MELOXICAM 7.5MG TABLETS

QTY: 30 2 REFILLS BEFORE 06/16/23

Refill NDC: 68382-0050-05

Retail Price: \$35.99 Your Insurance Saved You: \$35.49

\$ 3.50

C. GREGORY, MD
MFG: ZYDUS
ZZZ: / / MOG/MOG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223012866330081999

Walgreens

1502 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361)855-4440

Duplicate receipt

Pharmacy use only

SAT 11:00AM
Refill

MELOXICAM 7.5MG TABLETS
68382-0050-05
CELL 1

QTY 30
10 DRAM
SNAP

YELLOW
FRONT: ZC 25

ZZZ: / / MOG/MOG

Med Guide

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 78415542
DOB: 08/05/70

RX # 2344169-03637 DATE: 11/11/22

METOPROLOL TARTRATE 50MG TABLETS

QTY: 60 2 REFILLS BEFORE 05/17/23

Refill NDC: 57664-0477-58

Retail Price: \$21.69 Your Insurance Saved You: \$11.69

\$ 10.00

C. GREGORY, MD
MFG: CARACO
ZZZ: / / MOG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223153969365065999

Walgreens

1502 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361)855-4440

Customer receipt

SUSAN CONNOR

8034 Sweet Gum St, Corpus Christi, TX 78415542
DOB: 08/05/70

RX # 2344169-03637 DATE: 11/11/22

METOPROLOL TARTRATE 50MG TABLETS

QTY: 60 2 REFILLS BEFORE 05/17/23

Refill NDC: 57664-0477-58

Retail Price: \$21.69 Your Insurance Saved You: \$11.69

\$ 10.00

C. GREGORY, MD
MFG: CARACO
ZZZ: / / MOG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223153969365065999

Walgreens

1502 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361)855-4440

Duplicate receipt

Pharmacy use only

SAT 11:00AM
Refill

METOPROLOL TARTRATE 50MG TABLETS
57664-0477-58
CELL 39

QTY 60
10 DRAM
SNAP

WHITE
FRONT: 477

ZZZ: / / MOG

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 78415542
DOB: 08/05/70

RX # 2337783-03637 DATE: 11/17/22

PRAVASTATIN 20MG TABLETS

QTY: 30 1 REFILL BEFORE 05/17/23

Refill NDC: 00093-7201-98

Retail Price: \$35.39 Your Insurance Saved You: \$25.39

\$ 10.00

C. GREGORY, MD
MFG: TEVA
ZZZ: / / MOG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223217183263078999

Walgreens

Customer receipt

SUSAN CONNOR

8034 Sweet Gum St, Corpus Christi, TX 78415542
DOB: 08/05/70

RX # 2337783-03637 DATE: 11/17/22

PRAVASTATIN 20MG TABLETS

QTY: 30 1 REFILL BEFORE 05/17/23

Refill NDC: 00093-7201-98

Retail Price: \$35.39 Your Insurance Saved You: \$25.39

\$ 10.00

C. GREGORY, MD
MFG: TEVA
ZZZ: / / MOG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223217183263078999

Walgreens

1502 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361)855-4440

Duplicate receipt

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
DOB: 11/05/1970

RX # 2337782-03637 DATE: 11/19/22

LOSARTAN/HCTZ 100/12.5MG TABLETS

QTY: 30 1 REFILL BEFORE 05/17/23

Refill NDC: 65862-0469-90

Retail Price: \$74.89 Your Insurance Saved You: \$64.89

\$ 10.00

C. GREGORY, MD
MFG: ALCOBAND
ZZZ: / JGAGJAG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 22323365592089999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Customer receipt

Pharmacy use only

SUN 12:00PM
Refill

LOSARTAN/HCTZ 100/12.5MG TABLETS
65862-0469-90
FAST RACK

QTY 30
10 DRAM
SNAP

ZZZ: / JGAGJAG

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
DOB: 11/05/1970

RX # 2337782-03637 DATE: 11/19/22

LOSARTAN/HCTZ 100/12.5MG TABLETS

QTY: 30 1 REFILL BEFORE 05/17/23

Refill NDC: 65862-0469-90

Retail Price: \$74.89 Your Insurance Saved You: \$64.89

\$ 10.00

C. GREGORY, MD
MFG: ALCOBAND
ZZZ: / JGAGJAG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 22323365592089999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Duplicate receipt



WHITE
FRONT: F
BACK: 74

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
DOB: 11/05/1970

RX # 2339214-03637 DATE: 11/25/22

MELOXICAM 7.5MG TABLETS

QTY: 30 1 REFILL BEFORE 06/15/23

Refill NDC: 68382-0050-05

Retail Price: \$38.99 Your Insurance Saved You: \$34.02

\$ 4.97

C. GREGORY, MD
MFG: ZYDUS
ZZZ: / MDGMDG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223294059460047999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Customer receipt

Pharmacy use only

SAT 11:00AM
Refill

MELOXICAM 7.5MG TABLETS
68382-0050-05
CELL 1

QTY 30
10 DRAM
SNAP

ZZZ: / MDGMDG

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
DOB: 11/05/1970

RX # 2339214-03637 DATE: 11/25/22

MELOXICAM 7.5MG TABLETS

QTY: 30 1 REFILL BEFORE 06/15/23

Refill NDC: 68382-0050-05

Retail Price: \$38.99 Your Insurance Saved You: \$34.02

\$ 4.97

C. GREGORY, MD
MFG: ZYDUS
ZZZ: / MDGMDG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223294059460047999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Duplicate receipt



YELLOW
FRONT: 2C 25

Med Guide

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
DOB: 11/05/1970

RX # 2346148-03637 DATE: 11/25/22

SOLIFENACIN 10MG TABLETS

QTY: 30 7 REFILLS BEFORE 07/05/23

Refill NDC: 60505-4703-03

Retail Price: \$307.69 Your Insurance Saved You: \$297.69

\$ 10.00

C. DULAK, MD
MFG: APOTEX

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223294059580093999

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
DOB: 11/05/1970

RX # 2346148-03637 DATE: 11/25/22

SOLIFENACIN 10MG TABLETS

QTY: 30 7 REFILLS BEFORE 07/05/23

Refill NDC: 60505-4703-03

Retail Price: \$307.69 Your Insurance Saved You: \$297.69

\$ 10.00

C. DULAK, MD
MFG: APOTEX
ZZZ: / MDGMDG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223294059580093999

Duplicate

JOSEPH CONNOR
6034 Sweet Gum St Yellow Rose, Corpus Christi, TX 78415
(361) 854-8440
RX # 2283300-03637 DATE: 09/24/22

ROSUVASTATIN 5MG TABLETS
QTY: 30 1 REFILL BEFORE 11/07/22
Refill NDC: 31722-0882-90
Retail Price: \$109.99 Your Insurance Saved You: \$100.18

\$ 9.81

B. GONZALEZ, MD
MFG: CAMBER
YYY: / DAG/DAG
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222670634821053999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Customer receipt

Pharmacy use only

MON 1:00AM
Refill

ROSUVASTATIN 5MG TABLETS
31722-0882-90
ALPHA

QTY 30
10 DRAM

YYY: / DAG/DAG

JOSEPH CONNOR
6034 Sweet Gum St Yellow Rose, Corpus Christi, TX 78415
(361) 854-8440
RX # 2283300-03637 DATE: 09/24/22

ROSUVASTATIN 5MG TABLETS
QTY: 30 1 REFILL BEFORE 11/07/22
Refill NDC: 31722-0882-90
Retail Price: \$109.99 Your Insurance Saved You: \$100.18

B. GONZALEZ, MD
MFG: CAMBER
YYY: / DAG/DAG
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222670634821053999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Duplicate receipt



LIGHT YELLOW
FRONT: H
BACK: R3

JOSEPH CONNOR
6034 Sweet Gum St Yellow Rose, Corpus Christi, TX 78415
(361) 854-8440
RX # 2367920-03637 DATE: 09/26/22

LOSARTAN 50MG TABLETS
QTY: 30 PARTIAL REFILL BEFORE 10/01/22
Copy NDC: 65862-0202-99
Retail Price: \$50.99 Your Insurance Saved You: \$40.99

\$ 10.00

B. GONZALEZ, MD
MFG: AUROBINDO
CSV/DAG/DAG/DAG/DAG
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222694135498092999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Customer receipt

Pharmacy use only

MON 1:00AM
Copy

LOSARTAN 50MG TABLETS
65862-0202-99
CELL 22

QTY 30
10 DRAM



GREEN
FRONT: E
BACK: 4 6

JOSEPH CONNOR
6034 Sweet Gum St Yellow Rose, Corpus Christi, TX 78415
(361) 854-8440
RX # 2367920-03637 DATE: 09/26/22

LOSARTAN 50MG TABLETS
QTY: 30 PARTIAL REFILL BEFORE 10/01/22
Copy NDC: 65862-0202-99
Retail Price: \$50.99 Your Insurance Saved You: \$40.99

\$ 10.00

B. GONZALEZ, MD
MFG: AUROBINDO
CSV/DAG/DAG/DAG/DAG
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 222694135498092999

Walgreens

6702 WEBER ROAD CORPUS CHRISTI, TX 78412
PH: (361) 855-4440

Duplicate receipt

JOSEPH CONNOR
6034 Sweet Gum St Yellow Rose, Corpus Christi, TX 78415
(361) 854-8440
RX # 2283300-03637 DATE: 10/29/22

ROSUVASTATIN 5MG TABLETS
QTY: 30 1 REFILL BEFORE 11/07/22
Refill NDC: 31722-0882-90
Retail Price: \$109.99 Your Insurance Saved You: \$99.99

\$ 10.00

B. GONZALEZ, MD
MFG: CAMBER
YYY: / DAG/DAG
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 223020637882029999

JOSEPH CONNOR
6034 Sweet Gum St Yellow Rose, Corpus Christi, TX 78415
(361) 854-8440
RX # 2283300-03637 DATE: 10/29/22

ROSUVASTATIN 5MG TABLETS
QTY: 30 1 REFILL BEFORE 11/07/22
Refill NDC: 31722-0882-90
Retail Price: \$109.99 Your Insurance Saved You: \$99.99

\$ 10.00

B. GONZALEZ, MD
MFG: CAMBER
YYY: / DAG/DAG
PLAN: PRSOL
GROUP: CHRISTUS
CLAIM REF: 223020637882029999

Walgreens

Duplicate receipt

JOSEPH CONNOR

6034 Sweet Gum St Yellow Rosevassatin, Corpus Christi, TX 78415
(361)854-9455

RX # 2378851-03637

DATE: 10/30/22

LOSARTAN 50MG TABLETS

QTY: 30 PARTIAL REFILL BEFORE 10/30/23

New-E NDC: 65862-0202-99

Retail Price: \$50.99 Your Insurance Saved You: \$40.99

\$ 10.00

B. GONZALEZ, MD
MFG: AUROBINDO
TPR/MDG/MDG/MDG/MDG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223033955245064998

Walgreens

5702 WEBER ROAD CORPUS CHRISTI, TX 78413
PH: (361)855-4440

Pharmacy use only

SUN 2:29PM
New-E

LOSARTAN 50MG TABLETS
65862-0202-99
CELL 22

JOSEPH CONNOR

6034 Sweet Gum St Yellow Rosevassatin, Corpus Christi, TX 78415
(361)854-9455

RX # 2378851-03637

DATE: 10/30/22

LOSARTAN 50MG TABLETS

QTY: 30 PARTIAL REFILL BEFORE 10/30/23

New-E NDC: 65862-0202-99

Retail Price: \$50.99 Your Insurance Saved You: \$40.99

\$ 10.00

B. GONZALEZ, MD
MFG: AUROBINDO
TPR/MDG/MDG/MDG/MDG

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 223033955245064998

Walgreens

5702 WEBER ROAD CORPUS CHRISTI, TX 78413
PH: (361)855-4440

Duplicate
receipt

QTY 30
10 DRAM

TPR/MDG/MDG/MDG/MDG

GREEN
FRONT: E
BACK: 4 6

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
RX # 2344169-03637 DATE: 12/07/22

METOPROLOL TARTRATE 50MG TABLETS
QTY: 60 1 REFILL BEFORE 05/17/23
Refill NDC: 57864-0477-58 \$ 10.00
Retail Price: \$21.69 Your Insurance Saved You: \$11.69

C. GREGORY, MD
MFG: CARACO
ZZZ: / / JAG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223414614544091999

WALGREENS
5102 WEBER ROAD CORPUS CHRISTI, TX 78415
PH: (361) 855-4440

Customer receipt

DUPLICATE receipt

WHITE
FRONT: 477

QTY 60
10 DRAM
SNAP
ZZZ: / / JAG

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
RX # 2337783-03637 DATE: 12/14/22

PRAVASTATIN 20MG TABLETS
QTY: 30 1 REFILL BEFORE 05/17/23
Refill NDC: 00093-7201-98 \$ 10.00
Retail Price: \$35.39 Your Insurance Saved You: \$25.39

C. GREGORY, MD
MFG: TEVA
ZZZ: / / JAG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223463619066077999

WALGREENS
5102 WEBER ROAD CORPUS CHRISTI, TX 78415
PH: (361) 855-4440

Customer receipt

Pharmacy use only

THU 11:00AM
Refill

PRAVASTATIN 20MG TABLETS
00093-7201-98
FAST RACK

QTY 30
10 DRAM
SNAP
ZZZ: / / JAG

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
RX # 2339214-03637 DATE: 12/24/22

MELOXICAM 7.5MG TABLETS
QTY: 30 1 REFILL BEFORE 06/16/23
Refill NDC: 68382-0050-05 \$ 4.97
Retail Price: \$38.99 Your Insurance Saved You: \$34.02

C. GREGORY, MD
MFG: ZYDUS
ZZZ: / / MDG/MDG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223584011950027999

WALGREENS
5102 WEBER ROAD CORPUS CHRISTI, TX 78415
PH: (361) 855-4440

Customer receipt

DUPLICATE receipt

YELLOW
FRONT: ZC 25

QTY 30
10 DRAM
SNAP
ZZZ: / / MDG/MDG

Med Guide

SUSAN CONNOR
8034 Sweet Gum St, Corpus Christi, TX 784155542
RX # 2346148-03637 DATE: 12/24/22

SOLIFENACIN 10MG TABLETS
QTY: 30 6 REFILLS BEFORE 07/05/23
Refill NDC: 60505-4703-03 \$ 10.00
Retail Price: \$307.69 Your Insurance Saved You: \$297.69

C. DULAK, MD
MFG: APOTEX
ZZZ: / / MDG/MDG

PLAN: PRISOL
GROUP: CHRISTUS
CLAIM REF: 223684012053020999

WALGREENS
5102 WEBER ROAD CORPUS CHRISTI, TX 78415
PH: (361) 855-4440

Customer receipt

Pharmacy use only

MON 11:00AM
Refill

SOLIFENACIN 10MG TABLETS
60505-4703-03
ALPHA

QTY 30
10 DRAM
SNAP

WALGREENS
3702 WEBER ROAD CORPUS CHRISTI, TX 78413
PH: (361) 855-4440

Customer receipt

SUSAN CONNOR
1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

RX # 2337782-03637
DATE: 01/17/23

LOSARTAN/HCTZ 100/12.5MG TABLETS
QTY: 30
1 REFILL BEFORE 05/17/23
NDC: 65862-0469-90
Refill: 1
Retail Price: \$74.69
Your Insurance Saved You: \$64.69
\$ 10.00

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 230173601495039999
C. GREGORY, MD
MFG: AUROBINDO
ZZZ: / / DAG/DAG

1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

WALGREENS
3702 WEBER ROAD CORPUS CHRISTI, TX 78413
PH: (361) 855-4440

Customer receipt

SUSAN CONNOR
1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

RX # 2337782-03637
DATE: 01/17/23

LOSARTAN/HCTZ 100/12.5MG TABLETS
QTY: 30
1 REFILL BEFORE 05/17/23
NDC: 65862-0469-90
Refill: 1
Retail Price: \$74.69
Your Insurance Saved You: \$64.69
\$ 10.00

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 230173601495039999
C. GREGORY, MD
MFG: AUROBINDO
ZZZ: / / DAG/DAG

WALGREENS
3702 WEBER ROAD CORPUS CHRISTI, TX 78413
PH: (361) 855-4440

Customer receipt

SUSAN CONNOR
1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

RX # 2344169-03637
DATE: 01/02/23

METOPROLOL TARTRATE 50MG TABLETS
QTY: 60
1 REFILL BEFORE 05/17/23
NDC: 57664-0477-58
Refill: 1
Retail Price: \$21.59
Your Insurance Saved You: \$11.59
\$ 10.00

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 230022907623032999
C. GREGORY, MD
MFG: CARACCO
ZZZ: / / DAG

1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

WALGREENS
3702 WEBER ROAD CORPUS CHRISTI, TX 78413
PH: (361) 855-4440

Customer receipt

SUSAN CONNOR
1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

RX # 2337783-03637
DATE: 01/14/23

PRAVASTATIN 20MG TABLETS
QTY: 30
1 REFILL BEFORE 05/17/23
NDC: 00093-7201-98
Refill: 1
Retail Price: \$35.39
Your Insurance Saved You: \$25.39
\$ 10.00

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 230144062275078999
C. GREGORY, MD
MFG: TEVA
ZZZ: / / DAG

1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

WALGREENS
3702 WEBER ROAD CORPUS CHRISTI, TX 78413
PH: (361) 855-4440

Customer receipt

SUSAN CONNOR
1034 Sweet Gum St. Corpus Christi, TX 78415542
10611850-0910

RX # 2337783-03637
DATE: 01/14/23

PRAVASTATIN 20MG TABLETS
QTY: 30
1 REFILL BEFORE 05/17/23
NDC: 00093-7201-98
Refill: 1
Retail Price: \$35.39
Your Insurance Saved You: \$25.39
\$ 10.00

PLAN: PRSOL
GROUP# CHRISTUS
CLAIM REF# 230144062275078999
C. GREGORY, MD
MFG: TEVA
ZZZ: / / DAG