

Online Claim Submission

Code: CRQ

Employer: CRB Group, Inc.

EmpID: 260379684

EmpName: Wagner, Michael

Submitted: February 4, 2023

Batch: 30187886

Claim Total: \$13.07

Attachments: 2

| Line | Service Date(s) | Type | Cost | Notes |
|------|-----------------|------|--------|----------------------------------------------------|
| 1 | 2/2/2023 | RX | \$5.00 | Provider: Optum. For whom: Michael Robert Wagner. |
| 2 | 1/31/2023 | RX | \$8.07 | Provider: Publix. For whom: Michael Robert Wagner. |





579018614-1

INVOICE

Invoice date: February 02, 2023
Account: 429512190
Amount due: \$0.00

MICHAEL WAGNER
3589 HERMITAGE DR
BERKELEY LAKE GA 30096-3113

Resource center

-  Sign in to specialty.optumrx.com to:
 - Make a payment or place an order
 - Track order status
 - Update your contact information
 - Get secure video or live chat support
-  You have the right to a pharmacist consultation 24/7. Call the number on your medication label or on the back of your member ID card.

Order number 579018614-1 invoice details

| Drug number | Description | Cost |
|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 370016057 | STELARA PFS 90MG/ML 28 day supply. See prescription label for refill information. It is very important that you take or use this exactly as directed. Do not skip doses or discontinue unless directed by your doctor. PLEASE READ Enclosed Patient Information This Medicine May Lower Your Ability To Fight Off Infections. Avoid Contact With People Who Have Contagious Diseases. | \$5.00 |
| Total charges this order: | | \$5.00 |
| XXXXXXXXXXXX5423 | | \$5.00 |
| Amount due: | | \$0.00 |

About your order

This is not a bill.

Pharmacists are here to help

Pharmacists can help you 24 hours a day, 7 days a week. Call us if you have:

- Medication questions
- Allergies
- Changes in your health history, other health conditions
- Changes in your medication routines, including over-the-counter or herbal products you take.

Controlled prescription monitoring

We send information on controlled substance prescriptions to prescription drug monitoring programs as state law requires. Access to this information is limited to specific individuals for limited purposes as authorized by law.

Easy open caps

The orange medication bottle caps can be changed from child resistant to easy open.

- 1 Remove the cap, press down and turn counter clockwise.
- 2 Turn the cap upside down and close tightly.

Safe medication disposal

Visit [fda.gov](https://www.fda.gov). Go to Drugs > Resources for you > Information for Consumers (Drugs) > Safe Disposal of Medicines

Return policy

In most cases, you cannot return properly dispensed medications for credit. If you have questions or need

Your Prescription Receipt

WAGNER, MICHAEL R

3589 HERMITAGE DRIVE
DULUTH, GA 30096
(770) 813-1073 DOB: 06/24/2001

Publix Pharmacy# 0726
3870 PCHTREE INDUSTRIAL BLVD
DULUTH, GA 30096

Phone# (770) 813-9330

Rx: 7027037 New
Filled: 01/31/23

PROMETHAZINE-DM SYP

NDC: 70436-0155-42 Mfg: SLATE RUN PHARM Lot#: 20023954
Qty: 100 Days: 5 Expiration: 01/31/2024

No Refills. Auth Required.

THOMAS WADE

Primary Ins. UNITED HEALTHCARE -COMMERCIAL
Primary Ref. # 230314191294215999

Your plan(s) have saved you \$9.88

Your Medication

NDC# 70436-0155-42

Side 1 -

Side 2 -

Form: syrup

Shape:

Color: yellow

AMOUNT DUE: \$8.07

Don't like the taste of this medication?
We can change the flavor.

CALL YOUR DOCTOR FOR MEDICAL ADVICE ABOUT SIDE EFFECTS. YOU MAY REPORT SIDE EFFECTS TO THE FDA AT 1.800.FDA.1088