

Online Claim Submission

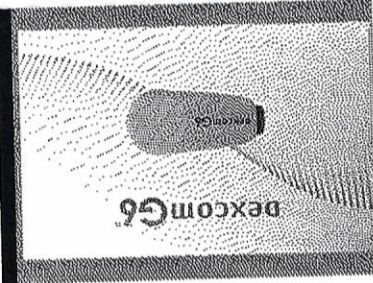
Code: SWA
Employer: WA State PEBB
EmpID: 541115913
EmpName: SMITH, ERIC
Submitted: February 10, 2023
Batch: 30283492
Claim Total: \$97.56
Attachments: 2

| Line | Service Date(s) | Type | Cost | Notes |
|------|-----------------|------|---------|--|
| 1 | 2/4/2023 | RX | \$97.56 | Provider: PPSRX. For whom: Eric Smith. |

DRUG: DEXCOM G6 TRANSMITTER
GENERIC NAME: NO MONOGRAPH AVAILABLE AT THIS TIME
08627-0016-01

3 of 3 Items in Order

If this description does not match the contents of the prescription you received, please contact PPS immediately and ask to speak to a pharmacist prior to taking this medication.



POSTAL RX SERVICES PHARMACY
P.O. Box 2718 Portland, OR 97208
PHONE: (800) 552-6694
STORE: 06000249

ERIC M SMITH

DATE: 02/04/2023
NCPDP: 3812674
01/18/71
REFILL



POSTAL RX SERVICES PHARMACY
P.O. Box 2718 Portland, OR 97208
PH: (800) 552-6694 NCPDP: 3812674
DATE: 02/04/2023

ERIC M SMITH

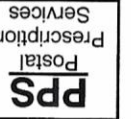
DEXCOM G6 TRANSMITTER

NDC: 08627-0016-01
QTY: 1

RX# 0591212
TX: PRESCRIBER: M ABBOTT

PRICE: \$22.56

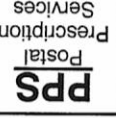
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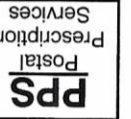
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DATE: 02/04/2023

ERIC M SMITH

DEXCOM G6 SENSOR

NDC: 08627-0053-03
QTY: 9

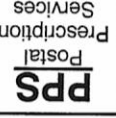
RX# 0591214
TX: PRESCRIBER: M ABBOTT



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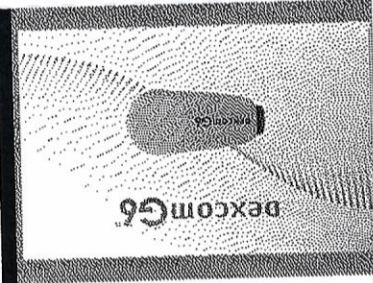
NDC: 08627-0053-03
QTY: 9

RX# 0591214
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DRUG: DEXCOM G6 TRANSMITTER
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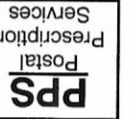
DEXCOM G6 TRANSMITTER

NDC: 08627-0016-01
QTY: 1

RX# 0591212
TX: PRESCRIBER: M ABBOTT

PRICE: \$22.56

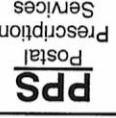
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DATE: 02/04/2023

ERIC M SMITH

DEXCOM G6 SENSOR

NDC: 08627-0053-03
QTY: 9

RX# 0591214
TX: PRESCRIBER: M ABBOTT

RX# 0591214

DEXCOM G6 SENSOR

TX: S0012272843202 DAW: 0

NDC: 08627-0053-03 QTY: 9 DAYS: 90
NWC - UNIFORM MED
AUTH #: 3739816302040B
PRESCRIBER: M ABBOTT
PHONE: (509) 670-4248
SPOKANE, WA 99224
526 W WILLAPA CT

NPI: 1336179928

3.00 REFILLS OF 9 UNTIL 11/16/2023

RPH: PN