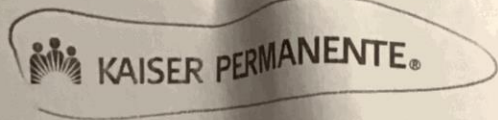


Online Claim Submission

Code: SWA
Employer: WA State PEBB
EmpID: 561531172
EmpName: RHONE, JANINE
Submitted: January 18, 2023
Batch: 29926301
Claim Total: \$46.08
Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	11/7/2022	RX	\$46.08	Provider: Kaiser Permanente. For whom: Self.



Pharmacy Dispensing List

Dispensed at KPWA MAIL ORDER on 11/07/22 at 10:38
Federal Tax ID: 91-0511770 Phone: 800-245-7979 NCPDP Number: 4932403
2921 Naches Ave SW
Renton, WA 98057



21157954-P

Patient: RHONE, JANINE (Member# 02098235)

Prescription Number	Date Of Fill	Qty	Days Supply	Price	Patient Charge
27280414-36	11/07/22	42.50	90	46.08	46.08

estradiol 0.01 % (0.1 mg/gram) vaginal cream (NDC 47781010444)

Prescriber: CEAZAN, NOAH

Account 02098235

Total Patient Charges: **46.08** / Payments **46.08** Due: 0.00

Total Patient Charges **0.00**

This is a list of medications that were processed in this order. This document is not a bill. A Kaiser Permanente billing statement will be mailed for any remaining balance due.

This document contains confidential information about your health and care. This is provided directly to you for your personal, private use.

Need to pay a bill?

Pay Online <https://wa.kaiserpermanente.org/html/public/customer-service/payment>

Pay in person with a personal check or a bank card at a Kaiser Permanente medical office. Kaiser Permanente accepts Visa, MasterCard, Discover, and American Express. We don't accept cash.