

Online Claim Submission

Code: OKT
Employer: Okta, Inc
EmpID: 329393567
EmpName: Soukup, Tomas
Submitted: January 23, 2023
Batch: 29988749
Claim Total: \$64.71
Attachments: 4

Line	Service Date(s)	Type	Cost	Notes
1	12/17/2022	RX	\$44.71	Provider: Kaiser Permanente. For whom: Tomas Soukup.
2	12/17/2022	GENERAL	\$20.00	Provider: Kaiser Permanente. For whom: Tomas Soukup.

Bellevue Pharmacy
11511 NE 10th St
Bellevue, WA 98004
1-888-901-4636

Reference Number: 2022351033-38
Date/Time: 12/17/2022 11:17:56 AM

Willow Payment
2022351033-38-1

Rx
Prescription: 29190750-60
Amount: \$4.71

Rx
Prescription: 29190751-60
Amount: \$10.00

Rx
Prescription: 29190752-60
Amount: \$20.00

Rx
Prescription: 29190753-60
Amount: \$10.00

Total: * \$44.71

1 ITEM TOTAL: \$44.71

* FSA TOTAL: \$44.71

TOTAL: \$44.71

Visa Chip Read \$44.71

Method: Chip Read

Card Number: *****6363

Payment Type: credit

Total Received: \$44.71



C E 2 0 2 2 3 5 1 0 3 3 - 3 8

Simplify your life with mail-order
pharmacy. For more information
about mail-order pharmacy call
1-800-245-7979 (TTY Relay 711).

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

FDA has extended the shelf life for
IHealth COVID Home Test Kits. Visit
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1-888-901-4636

Reference Number: 2022351003-8
Date/Time: 12/17/2022 9:43:30 AM

Patient Payment
2022351003-8-1

Epic

Member Name: SOUKUP, TOMAS

Amount: \$20.00

Total: * \$20.00

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