Online Claim Submission

Code: HNY

Employer: Henny Penny Corporation

EmpID: 276866318

EmpName: Pertner, Kristen

Submitted: January 23, 2023

Batch: 29988549

Claim Total: \$16.53

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	1/15/2023	RX	\$16.53	Provider: Walgreens. For whom: Kristen
				Pertner.

Tell your doctor or get medical help right away if you have any of the following signs or symptoms that may be related to a very bad the following signs or symptoms that may be related to a very bad side effect. Signs of an allergic reaction, like rash; hives; itching: red, swellen, blistered, or peeling skin with or without fever; wheezing, tightness in the chest or throat; trouble breathing, wheezing, tightness in the chest or throat; trouble breathing, wheezing, to talking, unusual hoarseness; or swelling of the mouth, swellowing, or talking, unusual hoarseness; or swelling of the mouth, swellowing, or talking, unusual hoarseness; or swelling of the mouth, swellowing, or talking, unusual hoarseness; or swelling of fluid and electrolyte problems the mood changes, confusion, muscle pain or weakness, fast or ske mood changes, confusion, muscle pain or weakness, fast or short model heartbeat, severe dizziness or passing out, increased abnormal heartbeat, severe dizziness or passing out, increased thirst, seigures, feeling very tired or weak, decreased appetite, thirst, seigures, feeling very tired or weak, decreased appetite, unable to pass urine or change in the amount of urine produced, dry unable to pass urine or change in the smouth of urine produced, dry mouth, dry eyes, or severe upset stomech or throwing up. Signs of kidney problems like unable to pass urine, change in how much urine

Keep out of reach of children: Store in

KRISTEN PERTNER

7016 Cester Pines Ct. Centerville, OH 454593166 1837/272-6582

RX # 1110700-09873

DATE: 01/15/23

SPIRONOLACTONE SOMG TABLETS

OTY: 180

2 REFILLS BEFORE 08/31/23

Betill

NDC: 53746-0514-01

Retail Price: \$155.79 Your Insurance Saved You: \$139.26

PBH: L. SOMMERS MFG:AMNEAL ZZZ) / /HLH/HLH

PLAN: PERX GROUP# 35242RX CLAIM HEF# 064269750301120101

Walgreens

331 S MAIN ST CENTERVILLE, OH 16468-

PH: (937)291-3707

ustomer receipt

16.53

Pharmacy use only

MON 11:00AM

Refill

SPIRONOLACTONE 50MG TABLETS 53746-0514-01

H2-FAST RACK