Online Claim Submission

Code: SWB

Employer: WA State SEBB

EmpID: 538862839

EmpName: JARVINEN, ELLEN

Submitted: January 23, 2023

Batch: 29989824

Claim Total: \$55.60

Attachments: 1

Line	Service Date(s)	Type	Cost	Notes
1	1/16/2023	RX	\$55.60	Provider: Lindsay Wais. For whom: Ellen L.
				Jarvinen.

ELLEN JARVINEN 6988749-10-01 Sync Date

01/16/2023 PtPay 30EA



15602 Main Street NE • Duvall, WA 98019

(425) 788-2644 01/16/2023

6988749 10 Jarvinen, Ellen ps

32616 NE 134TH ST DUVALL, WA 98019 (425) 502-0990 DOB: 01/19/1970

AB

Wais, Dr. Lindsay N.D. ARMOUR THYROID 60MG TABS

Qty 30EA

00456-0459-01

Mfg:For

REFILL (01) TIMES AT 90 WITH 30 LEFT UNTIL MEDCO HEALTH Auth: 61468608016253010 Copay \$31.34

Returning

ELLEN JARVINEN 6988752-10-01

01/16/2023

ANDREW BROWN PtPay 30EA

Sync Date:

15602 Main Street NE • Duvall, WA 98019 (425) 788-2644

6988752 10

01/16/2023 DS

AB

Jarvinen, Ellen 32616 NE 134TH ST DUVALL, WA 98019 DOB 01/19/1970 (425) 502-0990

Wais, Dr. Lindsay N.D. ARMOUR THYROID 15MG TABS

Qty 30EA

00456-0457-01

Mfg:For

REFILL (01) TIMES AT 90 WITH 30 LEFT UNTIL Auth: 48533792926253010 MEDCO HEALTH Copay \$24.26



Returning