

Online Claim Submission

Code: OXC
Employer: Outreach Corporation
EmpID: 623926540
EmpName: Ambrose, Nicholas
Submitted: January 23, 2023
Batch: 29989176
Claim Total: \$57.16
Attachments: 2

Line	Service Date(s)	Type	Cost	Notes
1	1/3/2023	RX	\$4.66	Provider: Express Scripts. For whom: Nick Ambrose.
2	1/16/2023	RX	\$52.50	Provider: Columbia Compounding. For whom: Ava Ambrose.



Express Scripts[®] Pharmacy

Invoice

Review your order.

Invoice number: 12-093079153
Order number: 0003657048416
Plan member: NICHOLAS AMBROSE
Order process date: 01/03/2023

Your payment summary information
Cost for this package \$ 4.66
Payment(s)/adjustment(s) applied \$ -4.66
Shipping Cost FREE
Total amount due \$ 0.00

i Want to avoid the clutter of all the paperwork that comes with your medicine? Now, you can get most of these papers online! You'll get instant access to your invoice, refill forms and other key messages about your medicine. To sign up, just go to: express-scripts.com/green.

Medication information	What you need to do next	Plan Amount	You pay
NICHOLAS AMBROSE PREVIDENT 5000SEN PASTE 100ML Strength: 1.14%5% Qty: 1 Rx # 222276839159 NDC # 00126-0070-61	You have 2 refill(s) before 08/08/2023. Refill after 02/09/2023. For fastest refills, simply refill at www.premiera.com . Or you can call 800.391.9701.	\$ 10.88	\$ 4.66

800.391.9701

24/7 access to pharmacists who are ready to help you with your medications.

www.premiera.com

First-time visitors please register. Have your ID # and a recent prescription number handy.

All items sold by Express Scripts Pharmacy are FSA eligible (IAS) items.

Payment notes

- Amount charged to your debit or credit card: \$ 4.66.

