## Online Claim Submission

Code: KDH

Employer: Kaweah Delta Healthcare

EmpID: 552617368

EmpName: Roeben, Debbie

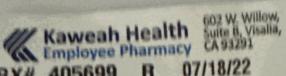
Submitted: January 23, 2023

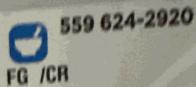
Batch: 29990444

Claim Total: \$5.98

Attachments: 1

Line	Service Date(s)	Туре	Cost	Notes
1	7/18/2022	RX	\$5.98	Provider: Kaweah Health Employee
				Pharmacy. For whom: Debbie Roeben.





07/18/22 ROEBEN, DEBBIE (RHM)

559 - 732 - 7457

Dr PAP, ANGELA

#90 **ESCITALOPRAM OXALATE 20 MG** NDC# 68001-456-00 BLUE POINT

REFILL(S) LEFT

MEDIMPAC RLH Ref: 8145451519



\$5.98 COPAY: