

Financial Summary Jan 1, 2023-Dec 31, 2023

Pallab \$183.26

Your Total Rx Spend:

\$183.26

For January 1, 2023 - December 31, 2023)

Pallab Chatterjee DOB 06/09/1987

TOTAL \$183.26

VITAMIN D 50,000IU CAP

RX# 0511501 QTY 12 SUPPLY 84 - day LAST FILLED 12/18/2023 YOUR COST \$1.40

Last filled on December 18, 2023

TOTAL Rx COST \$1.40 YOUR PLAN(S) PAID \$0.00 YOU PAID \$1.40

FULFILLED BY CVS/pharmacy® PRIMARY PLAN PAID \$0.00 AMOUNT APPLIED TO DEDUCTIBLE 0

CREON 24000UNT CAP

RX# 0511411 QTY 300 SUPPLY 100 - day LAST FILLED 12/15/2023 YOUR COST \$125.00

Last filled on December 15, 2023

TOTAL Rx COST \$2,164.61 YOUR PLAN(S) PAID \$2,039.61 YOU PAID \$125.00

FULFILLED BY CVS/pharmacy® PRIMARY PLAN PAID \$2,039.61 AMOUNT APPLIED TO DEDUCTIBLE 0

SECONDARY PLAN PAID \$0.00

PANTOPRAZOLE SODIUM 40MG DR TAB

RX# 0499145 QTY 90 SUPPLY 90 - day LAST FILLED 12/15/2023 YOUR COST \$6.86

Last filled on December 15, 2023

TOTAL Rx COST \$4.10 YOUR PLAN(S) PAID \$0.00 YOU PAID \$4.10

FULFILLED BY CVS/pharmacy® PRIMARY PLAN PAID \$0.00 AMOUNT APPLIED TO DEDUCTIBLE 0

Last filled on June 27, 2023

TOTAL Rx COST \$2.76 YOUR PLAN(S) PAID \$0.00 YOU PAID \$2.76

FULFILLED BY CVS/pharmacy® PRIMARY PLAN PAID \$0.00 AMOUNT APPLIED TO DEDUCTIBLE 0

COMIRNATY 2023-24 30/0.3ML INJ

RX# 0508808 QTY 0.3 SUPPLY 1 - day LAST FILLED 11/17/2023 YOUR COST \$0.00

Last filled on November 17, 2023

TOTAL Rx COST \$135.45 YOUR PLAN(S) PAID \$135.45 YOU PAID \$0.00

FULFILLED BY CVS/pharmacy® PRIMARY PLAN PAID \$135.45 AMOUNT APPLIED TO DEDUCTIBLE 0

SECONDARY PLAN PAID \$0.00

CREON 24000UNT CAP

RX# 0499148 QTY 90 SUPPLY 30 - day LAST FILLED 06/28/2023 YOUR COST \$50.00

Last filled on June 28, 2023

TOTAL Rx COST \$692.78 YOUR PLAN(S) PAID \$642.78 YOU PAID \$50.00

FULFILLED BY CVS/pharmacy® PRIMARY PLAN PAID \$642.78 AMOUNT APPLIED TO DEDUCTIBLE 0

SECONDARY PLAN PAID \$0.00

PFIZER-BIONTECH COVID-19 VACCINE/BIVALENT/BA.4/BA.5 BA4/BA5 INJ

RX# **0492341**

QTY 0.3

SUPPLY 1 - day

LAST FILLED 02/17/2023

YOUR COST \$0.00

Last filled on February 17, 2023

TOTAL Rx COST	\$40.00	YOUR PLAN(S) PAID	\$40.00	YOU PAID	\$0.00
FULFILLED BY	CVS/pharmacy®	PRIMARY PLAN PAID	\$40.00	AMOUNT APPLIED TO DEDUCTIBLE	0
		SECONDARY PLAN PAID	\$0.00		

This report may not reflect all medicines dispensed during the specified period.

Costs displayed may not reflect coverage from any supplemental insurance plans.

Other Adjustments may include supplemental insurance coverage, manufacturer coupons or other discounts.