

Invoice

1/16/2017

1624

Due on receipt

Invoice #:

Total Invoice

\$3,056.54

604 W. Franklin Street Boise, ID 83702 208-258-8139

Pike County Hospital Terms:

Ann Tran 2305 Georgia St, Louisiana, MO 63353

| Description | Rate | Quantity | Amount |
|---|-----------|----------|------------|
| October 2016 service fee (includes credit for RxSafetynet charges) Totals: Gross Receipts: \$ 125,235.76 Dispensing Fee: \$ 23,661.82 RxSafetynet: \$ 3,072.71 Wholesaler Costs: \$ 29,967.05 MHI Fee: \$ 7,403.42 Net CE Benefit: \$ 61,130.76 | 61,130.76 | | 61,130.76 |
| Calculate ACI % Fee | -95.00% | | -58,074.22 |
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