

Reject Alerts

Action Items

Paid Claims

Archived Rejects

As of: 11/16/2006 2:20:00 AM, you have (173) alerts

Results: 1 - 8 of 8

Sort results by:

Claimant Name



Descending



Ascending



Actions	Claimant	SSN	Employer	Last Reject	Count
	GUSS, MARIANNE	549-99-4951	NORTH POLE, INC.	10/6/2005	79
Medication	Qty	Days Supply	Reason for Reject	Date of Service	Prescriber
TIZANIDINE TAB 2MG	30	30	Non-matched cardholder ID Filled after coverage expired	8/1/2005	Not Available
IMITREX TAB 25MG	9	30	Non-matched cardholder ID Filled after coverage expired	7/18/2005	Not Available
TIZANIDINE TAB 4MG	120	30	Non-matched cardholder ID Filled after coverage expired	7/24/2005	Not Available
ARTHROTEC 50 TAB	60	30	Non-matched cardholder ID Filled after coverage expired	7/24/2005	Not Available
TIZANIDINE TAB 4MG	60	30	Non-matched cardholder ID Filled after coverage expired	8/28/2005	Not Available
ACTIQ LOZ 400MCG	30	30	Non-matched cardholder ID Filled after coverage expired	9/6/2005	Not Available
HYDROMORPHON TAB 4MG	120	30	Non-matched cardholder ID Filled after coverage expired	9/6/2005	Not Available