

## 返 還 内 訳 書

点数表 \_\_\_\_\_

医療機関(薬局)コード \_\_\_\_\_

保険者番号 \_\_\_\_\_ 医療機関(薬局)名 \_\_\_\_\_

保険者名 \_\_\_\_\_ (      一      枚 )

| No  | 受給者番号<br>記号・番号 | 受診者名 | 生年月日 | 性別 | 診療<br>(調剤)<br>年月 | 入外区分 | 給付割合 | 療養の給付 |         | 高額療養<br>費の有無 | 食事生活療<br>養費(返額) | 事由 |
|---|----------------|------|------|----|------------------|------|------|-------|---------|--------------|-----------------|----|
|   |                |      |      |    |                  |      |      | 点数    | 金額(返還額) |              |                 |    |
| 1   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 2   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 3   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 4   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 5   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 6   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 7   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 8   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 9   |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 10  |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 11  |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 12  |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 13  |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 14  |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 15  |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 小 計 (                      件                      ) |                |      |      |    |                  |      |      |       |         |              |                 |    |
| 合 計 (                      件                      ) |                |      |      |    |                  |      |      |       |         |              |                 |    |