



COLORADO
Department of Health Care
Policy & Financing

Friday 07/30/2021 05:30 PM MST

Provider Name ALLELE DIAGNOSTICS, INC
Provider ID Providers - 1194110734 (NPI)
Location 9000154100 - ALLELE DIAGNOSTICS, INC
Taxonomy 291U00000X

Confirm Professional Claim

Claim Type Professional

Provider Information

Billing Provider ID 1194110734 **ID Type** NPI **Name** ALLELE DIAGNOSTICS, INC
Taxonomy Clinical Medical Laboratory
Referring Provider ID 1396707501 **ID Type** NPI **Name**
Taxonomy Obstetrics Gynecology - Maternal Fetal Medicine
Supervising Provider ID _ **ID Type** _ **Name** _
Taxonomy _
Service Facility Location ID 1194110734 **ID Type** NPI **Name** ALLELE DIAGNOSTICS, INC
Taxonomy Clinical Medical Laboratory

Member Information

Member ID \ **Gender** Female
Member Birth Date
Address _
_
City _
State _ **Zip Code** _

Claim Information

Date Type Pregnancy **Date of Current** 02/18/2021
Accident Related Reason _
Patient Number
Transport Certification No
Previous Claim ICN _
Note _
Does the provider have a signature on file? Yes
Total Charged Amount \$3,600.00

Diagnosis Codes

Service Details

#	From Date	To Date	Place of Service	EMG	Procedure Code	Mod	Diag Code Ptrs	Units	EPSDT Service	Family Plan Service	Charge Amount
<u>1</u>	06/17/2021	06/17/2021	81		81229		1	1.000 Unit	<input type="checkbox"/>	<input type="checkbox"/>	\$3,000.00
<u>2</u>	06/17/2021	06/17/2021	81		88235		1	1.000 Unit	<input type="checkbox"/>	<input type="checkbox"/>	\$600.00

No Other Insurance Details exist for this claim