

**Check Summary****Transaction Date:** October 11, 2023

DUPAGE MEDICAL GROUP, LTD PO BOX 3358 GLEN ELLYN, IL 601383358	<b>Payee Tax ID:</b> 271622508 <b>Payee ID:</b> 1174916522 <b>Check/EFT Trace Number:</b> 580667 <b>Payment Amount:</b> 0.00 <b>Check/EFT Date:</b> 10/11/2023 <b>Production End Cycle Date:</b> 10/11/2023	<b>Payee Name:</b> MONITORING ASSOCIATES LLC <b>Payee Address:</b> DEPT 880256 PO BOX 29650 PHOENIX, AZ 850389650
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**Patient Name:** GLASER, DAVID**Claim Number:** 22335494**Claim Date:** 08/07/2023-08/07/2023 **Claim Status Code:** 1

<b>Patient ID:</b> 804239144	<b>Group / Policy:</b>	<b>Facility Type:</b> 21	<b>Claim Charge:</b> \$18,786.00
<b>Patient Ctrl Nmbr:</b> 0.3097318	<b>Contract Hdr:</b>	<b>Claim Frequency:</b> 1	<b>Claim Payment:</b> \$0.00
<b>Rendering Prvd:</b> THOMAS, GEORGE P	<b>Rendering Prv ID:</b>	<b>Claim Received Date:</b> 09/19/2023	<b>Patient Resp:</b> \$18,786.00
<b>Original Ref Nmbr:</b>			

**Line Details** **Results:** 6

Line Ctrl Nmbr	Dates of Service	Rend Prov ID	Rev	Sub Proc / Modifier / Units	Adjud Proc / Modifier / Units	Remark / Payer Code	Supp Info (AMT)	Charge	Adjustments (Qty)	Adj Amount	Payment
7214332674Z1	08/07/2023 - 08/07/2023				HC:95822 / 26 / 0			\$1,755.00	PR-243	\$1,755.00	\$0.00
7214332674Z2	08/07/2023 - 08/07/2023				HC:95938 / 26 / 0			\$3,107.00	PR-243	\$3,107.00	\$0.00
7214332674Z3	08/07/2023 - 08/07/2023				HC:95910 / 26 / 0			\$780.00	PR-243	\$780.00	\$0.00
7214332674Z4	08/07/2023 - 08/07/2023				HC:95886 / 26 / 0			\$2,972.00	PR-243	\$2,972.00	\$0.00
7214332674Z5	08/07/2023 - 08/07/2023				HC:95886 / 26,XU / 0			\$2,972.00	PR-243	\$2,972.00	\$0.00
7214332674Z6	08/07/2023 - 08/07/2023				HC:95999 / / 0			\$7,200.00	PR-243	\$7,200.00	\$0.00

**Code Descriptions****GROUP CODE(S):**

PR=Patient Responsibility

<b>Payer:</b> DUPAGE MEDICAL GROUP, LTD	<b>Check/EFT Trace Number:</b> 580667	<b>Check/EFT Date:</b> 10/11/2023	<b>Total Paid:</b> \$0.00
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**CLAIM ADJUSTMENT REASON CODE(S):**

243=Services not authorized by network/primary care providers.

**CLAIM STATUS CODE(S):**

1=Processed as Primary