

**Check Summary****Transaction Date:** October 21, 2023

CALPERS 21555 OXNARD STREET WOODLAND HILLS, CA 91367 WWW.ANTHEM.COM/PROVIDER/ROUTER	<b>Payee Tax ID:</b> 271622508 <b>Payee ID:</b> 1174916522 <b>Check/EFT Trace Number:</b> Z232941554 <b>Payment Amount:</b> 0.00 <b>Check/EFT Date:</b> 10/21/2023 <b>Production End Cycle Date:</b> 10/20/2023	<b>Payee Name:</b> MONITORING ASSOCIATES LLC <b>Payee Address:</b> PO BOX 29650 DEPT 880256 PHOENIX, AZ 850389650
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**Patient Name:** FRANKS, CASEY R**Claim Number:** 22364BL9798**Claim Date:** 08/24/2022-08/24/2022 **Claim Status Code:** 22**Patient ID:** 879A75843**Group / Policy:****Facility Type:****Claim Charge:** \$-18,264.00**Patient Ctrl Nmbr:** 0.2684700**Contract Hdr:****Claim Frequency:****Claim Payment:** \$0.00**Rendering Prvd :****Rendering Prv ID:****Claim Received Date:** 12/30/2022**Patient Resp:** \$0.00**Original Ref Nmbr:****Line Details****Results:** 7

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
363002986013556001	08/24/2022 - 08/24/2022				HC:95941 // 1	M15		\$-2,760.00	PI-234	\$-2,760.00	\$0.00
363002986013556002	08/24/2022 - 08/24/2022				HC:95939 / 26 / 1	M15		\$-3,814.00	PI-234	\$-3,814.00	\$0.00
363002986013556003	08/24/2022 - 08/24/2022				HC:95822 / 26 / 1	M15		\$-1,755.00	PI-234	\$-1,755.00	\$0.00
363002986013556004	08/24/2022 - 08/24/2022				HC:95938 / 26 / 1	M15		\$-3,107.00	PI-234	\$-3,107.00	\$0.00
363002986013556005	08/24/2022 - 08/24/2022				HC:95861 / 26 / 1	M15		\$-1,614.00	PI-234	\$-1,614.00	\$0.00
363002986013556006	08/24/2022 - 08/24/2022				HC:95861 / 26,XU / 1	M15		\$-1,614.00	PI-234	\$-1,614.00	\$0.00
363002986013556007	08/24/2022 - 08/24/2022				HC:95999 // 2	M15		\$-3,600.00	PI-234	\$-3,600.00	\$0.00

<b>Payer:</b> CALPERS	<b>Check/EFT Trace Number:</b> Z232941554	<b>Check/EFT Date:</b> 10/21/2023	<b>Total Paid:</b> \$0.00
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<b>Patient Name:</b> FRANKS, CASEY R	<b>Claim Number:</b> 22364BL9798	<b>Claim Date:</b> 08/24/2022-08/24/2022	<b>Claim Status Code:</b> 1
<b>Patient ID:</b> 879A75843	<b>Group / Policy:</b> DB250K	<b>Facility Type:</b>	<b>Claim Charge:</b> \$18,264.00
<b>Patient Ctrl Nmbr:</b> 0.2684700	<b>Contract Hdr:</b> NON-PARTICIPATING	<b>Claim Frequency:</b>	<b>Claim Payment:</b> \$0.00
<b>Rendering Prvd:</b>	<b>Rendering Prv ID:</b>	<b>Claim Received Date:</b> 12/30/2022	<b>Patient Resp:</b> \$18,264.00
<b>Original Ref Nmbr:</b>			

Line Details											Results: 7
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
363002986013556001	08/24/2022 - 08/24/2022				HC:95941 // 1	M15		\$2,760.00	PI-234	\$2,760.00	\$0.00
363002986013556002	08/24/2022 - 08/24/2022				HC:95939 / 26 / 1	M15		\$3,814.00	PI-234	\$3,814.00	\$0.00
363002986013556003	08/24/2022 - 08/24/2022				HC:95822 / 26 / 1	M15		\$1,755.00	PI-234	\$1,755.00	\$0.00
363002986013556004	08/24/2022 - 08/24/2022				HC:95938 / 26 / 1	M15		\$3,107.00	PI-234	\$3,107.00	\$0.00
363002986013556005	08/24/2022 - 08/24/2022				HC:95861 / 26 / 1	M15		\$1,614.00	PI-234	\$1,614.00	\$0.00
363002986013556006	08/24/2022 - 08/24/2022				HC:95861 / 26,XU / 1	M15		\$1,614.00	PI-234	\$1,614.00	\$0.00
363002986013556007	08/24/2022 - 08/24/2022				HC:95999 // 2	M15		\$3,600.00	PI-234	\$3,600.00	\$0.00

#### Code Descriptions

##### REMARK CODE(S):

M15=Separately billed services/tests have been bundled as they are considered components of the same procedure. Separate payment is not allowed.

##### GROUP CODE(S):

PI=Payor Initiated Reductions

##### CLAIM ADJUSTMENT REASON CODE(S):

234=This procedure is not paid separately. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.)

<b>Payer:</b> CALPERS	<b>Check/EFT Trace Number:</b> Z232941554	<b>Check/EFT Date:</b> 10/21/2023	<b>Total Paid:</b> \$0.00
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**CLAIM STATUS CODE(S):**

22=Reversal of Previous Payment

1=Processed as Primary