



P.O. BOX 981106  
EL PASO TX 79998-1106  
USA

UNIVERSITY NEURO LLC  
550 N CENTRAL EXPY UNIT 1955  
MCKINNEY TX 75070-0091

## Claim Payment

Please Retain for Future Reference

Printed: 10/23/2023

Page: 1 of 2

UNIVERSITY NEURO LLC

PIN: 0006066983

TIN: XXXXXXXX5495

Trace Number: 823296000194616

Trace Amount: \$77.38

Aetna Life Insurance Company or an Affiliated Company  
as Agent for Specified Payer(s)  
P.O. BOX 981106  
EL PASO TX 79998-1106  
USA

ID No: XXXXXXXX5495  
Seq No: 000000004

Trace No: 000194616

Acct: 09046

10-23-2023 51 - 44  
119 CT

NON-NEGOTIABLE NON-NEGOTIABLE

PAY

Seventy Seven Dollars and 38/100

TO THE  
ORDER OF

Bank of America

UNIVERSITY NEURO LLC  
550 N CENTRAL EXPY UNIT 1955  
MCKINNEY TX 75070-0091

VOID AFTER ONE YEAR

\*\*\*\*\*\$77.38

**VOID VOID**

766 (10-02)

Payment was made via Electronic Funds Transfer



P.O. BOX 981106  
EL PASO TX 79998-1106  
USA

**Payment Address:**

UNIVERSITY NEURO LLC  
550 N CENTRAL EXPY UNIT 1955  
MCKINNEY TX 75070-0091

**Provider Address:**

UNIVERSITY NEURO LLC  
550 N CENTRAL EXPY UNIT 1955  
MCKINNEY TX 75070-0091

## Explanation Of Benefits

Please Retain for Future Reference

Printed: 10/23/2023

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UNIVERSITY NEURO LLC

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### Medical providers: sign up before it's your turn

Enroll for directly deposited payments. Just go to **PayerEnrollServices.com**. If you don't enroll to receive payments by direct deposit, you may receive future payments by virtual credit card. You can get electronic Explanation of Benefits (EOB) statements from our provider portal on Availity®. To do so, go to **Availity.com** and register.

### Patient Name: CHARLES T DALTON (son)

Claim ID: ER588N6YY01 Recd: 10/11/23 Member ID: W151128004 Patient Account: 0.3082583

Member: PAMELA C DALTON

Group Name: HCA HEALTHCARE

Product: Open Choice®

DIAG: Q07.00

Group Number: 0169582-50-204 A D(<~+0

Network ID: 00000

Funding: Self-funded

Network Status: Out-of-Network

#### Aetna Life Insurance Company

SERVICE DATES	PL	SERVICE CODE	NUM. SVCS	SUBMITTED CHARGES	ALLOWABLE AMOUNT/QPA	COPAY AMOUNT	NOT PAYABLE	SEE REMARKS	DEDUCTIBLE	CO INSURANCE	PATIENT RESP	PAYABLE AMOUNT
07/24/23	21	9582226	1.0	1,755.00	77.38		1,677.62	1				77.38
TOTALS				1,755.00	77.38		1,677.62					77.38

ISSUED AMT: \$77.38

#### Remarks:

- 1 - The Federal No Surprises Act (NSA) applies for this claim. We allowed covered services using the recognized Qualifying Payment Amount (QPA). The QPA complies with the NSA. The QPA is the difference between the "submitted charges" and "not payable" amount shown on each covered service line. We calculated the member's cost share using the QPA. The member only owes their cost share shown on this notice. You are prohibited from billing the member more than their cost share. Under the NSA, if you don't accept the QPA and want to initiate an Open Negotiation, you have 30 business days from receipt of this notice to do so. You can submit a completed Open Negotiation request form to us via email at [FederalNSA@Aetna.com](mailto:FederalNSA@Aetna.com). Our Provider Contact Center team can be reached at 1-888-632-3862 (1-888-MD AETNA) if you need details on initiating an Open Negotiation. If the 30-day negotiation period does not result in the issue of a determination you have 4 business days beginning on the 31st business day following the conclusion of the Open Negotiation period to initiate the independent dispute resolution process. [FDZ]
- Your claim has been separated to expedite handling. You will receive a separate notice for the other services reported. (E73)

For Questions Regarding This Claim P.O. BOX 14079 LEXINGTON, KY 40512-4079

**CALL (888) 632-3862 FOR ASSISTANCE**

Note: All Inquiries should reference the ID number above for prompt response.

Total Patient Responsibility: \$0.00

Claim Payment: \$77.38

**Total Payment to: UNIVERSITY NEURO LLC**

**\$77.38**

Protecting the privacy of member health information is a top priority. When contacting us about this statement or for help with other questions, please be prepared to provide your provider number, tax identification number (TIN), or Social Security number (SSN), in addition to the member's ID number.