

**Check Summary**
**Transaction Date:** October 17, 2023

HUMANA INC. P.O. BOX 14601 LEXINGTON, KY 405124601 APPS.HUMANA.COM/MARKETING/DOCUMENTS.ASP? FILE=2859948	<b>Payee Tax ID:</b> 475562245 <b>Payee ID:</b> 1730725771 <b>Check/EFT Trace Number:</b> NO-PAY-202310170006866 <b>Payment Amount:</b> 0.00 <b>Check/EFT Date:</b> 10/17/2023 <b>Production End Cycle Date:</b> 10/17/2023	<b>Payee Name:</b> JBJ INVESTMENTS LLC <b>Payee Address:</b> PO BOX 134 MCKINNEY, TX 75070
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**Patient Name:** ALEGIOJO, LORENA

**Claim Number:** 820232620640213

**Claim Date:** 06/03/2022-06/03/2022 **Claim Status Code:** 1

**Patient ID:** H40729212

**Group / Policy:** 0X238201

**Facility Type:** 21

**Claim Charge:** \$29,002.00

**Patient Ctrl Nmbr:** 0.2594485

**Contract Hdr:** MEDICARE ADVANTAGE PPO

**Claim Frequency:** 7

**Claim Payment:** \$0.00

**Rendering Prvd:** FILE, SIGNATURE ON

**Rendering Prv ID:**
**Claim Received Date:** 09/19/2023

**Patient Resp:** \$0.00

**Original Ref Nmbr:**

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
7304804275Z1	06/03/2022 - 06/03/2022				HC:95939 / 26 / 1			\$10,380.00	CO-29	\$10,380.00	\$0.00
7304804275Z2	06/03/2022 - 06/03/2022				HC:95822 / 26 / 1			\$4,516.00	CO-29	\$4,516.00	\$0.00
7304804275Z3	06/03/2022 - 06/03/2022				HC:95938 / 26 / 1			\$7,060.00	CO-29	\$7,060.00	\$0.00
7304804275Z4	06/03/2022 - 06/03/2022				HC:95861 / 26 / 1			\$1,432.00	CO-29	\$1,432.00	\$0.00
7304804275Z5	06/03/2022 - 06/03/2022				HC:95861 / 26,XU / 1			\$1,614.00	CO-29	\$1,614.00	\$0.00
7304804275Z6	06/03/2022 - 06/03/2022				HC:95999 // 2			\$4,000.00	CO-29	\$4,000.00	\$0.00

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

CO=Contractual Obligations

<b>Payer:</b> HUMANA INC.	<b>Check/EFT Trace Number:</b> NO-PAY-202310170006866	<b>Check/EFT Date:</b> 10/17/2023	<b>Total Paid:</b> \$0.00
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**CLAIM ADJUSTMENT REASON CODE(S):**

29=The time limit for filing has expired.

**CLAIM STATUS CODE(S):**

1=Processed as Primary