

Insurance Provider: HEALTHNOW URGENT CARE L.L.C.

Policy Number: 0cf18e9c-a5c4-4a95-b0b2-f40c44d977fe

Claim Number: f88d2c17-3300-4522-a7c2-bb89a1f9d02d

Date: 2023-03-12

Patient Information

Name: Burma Balistreri

Address: 1036 Rabab Junction Unit 17, Ormond Beach, Florida 32117

Account Number: 2a10173a-556a-4762-845f-888615b620d8

Claim Details

Service Date	Provider	POS NOS	PROC	Billed	Allowed	Deduct	Coins	Amount	Provider Paid
2020-08-28	8f015b28-7fa8-3124-b340-72376f28fc96	\$3423.94	\$3705.65	\$8148.09	\$756.51	\$7432.78	\$1224.11	\$5832.06	\$9487.3
2022-02-07	8f015b28-7fa8-3124-b340-72376f28fc96	\$1056.0	\$7199.88	\$3298.89	\$5679.53	\$1654.29	\$8530.56	\$5462.75	\$9924.66
2023-06-06	8f015b28-7fa8-3124-b340-72376f28fc96	\$2879.85	\$3348.16	\$4900.75	\$9453.98	\$1532.39	\$4844.13	\$5735.86	\$8308.69
2023-08-16	8f015b28-7fa8-3124-b340-72376f28fc96	\$5581.57	\$8535.69	\$1309.36	\$9096.02	\$7284.08	\$4450.89	\$4048.01	\$7106.04
2023-03-01	8f015b28-7fa8-3124-b340-72376f28fc96	\$8841.22	\$2169.91	\$2287.01	\$2848.19	\$3047.89	\$5844.88	\$7881.33	\$5637.4
2023-06-22	8f015b28-7fa8-3124-b340-72376f28fc96	\$7904.65	\$5122.48	\$7501.63	\$2431.77	\$3936.73	\$1044.63	\$301.04	\$9626.31
2021-12-06	8f015b28-7fa8-3124-b340-72376f28fc96	\$6103.62	\$3721.4	\$7157.89	\$6148.42	\$2875.45	\$8042.6	\$9970.1	\$5209.53

