# ONE STOP MEDICAL AND URGENT CARE Remittance Advice

## **Patient Information**

Name: Sean Rogahn

Address: 786 King Meadow, Englewood, Florida 34223

**Contact:** +1-609-645-7480x125

Policy Number: f1efb625-0459-4dbd-95e9-ea01a5674176

Claim Number: da229d15-ffe3-41b7-92e9-23875e37327f

Date of Claim: 2020-10-08

## Services Provided

Date	Treatment	Total Cost	Insurance Paid	Patient Owes
2021-08-20	Urology care plan (record artifact)	\$2,088.88	\$1,308.07	\$117.93

## Claims Details

#### **Medications Prescribed**

#### Lab Results

#### **Totals**

Total Billed: 17420.04

Total Deduct: 32011.84

Total Coins: 28584.12

Total AMT: 22453.78