

ENCOMPASS HEALTH REHAB HOSPITAL AN AFFILIATE OF MA

Remittance Advice

Patient Information

Name: Kendall Mayert

Address: 167 Mona Boulevard, Tampa, Florida 33616

Contact: 001-546-631-3451x1903

Policy Number: 40430e98-efd9-4b1e-961a-5495a0cc5f11

Claim Number: d1e101da-c352-4353-826f-551622789b9a

Claim Date: 2021-01-23

Service Details

Date	Treatment	Total Cost	Insurance Paid	Patient Owes
2023-10-26	Physiotherapy care plan (record artifact)	\$3,202.87	\$748.17	\$409.61
2023-05-13	Therapy (regime/therapy)	\$843.37	\$1,618.39	\$350.41
2020-05-01	Fracture care	\$211.13	\$1,090.79	\$54.25
2023-05-24	Dementia management	\$2,478.72	\$3,864.54	\$74.42

Claim Details

Prescribed Medicines

Lab Results