



### Authorization Information

**Authorization # :** 25031602700061000001  
**Status:** DENIED  
**Processed By:**  
**Place Of Service:** OUTPATIENT HOSPITAL  
**LOS:** 0  
**Priority Status:** 2 - STANDARD  
**HP Authorization #:**  
**Request Category:**  
**Service Type:** 2 - SURGICAL  
**Decision Date:**  
**Admit Source:**  
**Facility Code:**

**Company ID:** UPN  
**Requested Date:** 03/14/2025  
**Time:** 09:17:37  
**Auth/Action Date:** 03/17/2025  
**Expiration Date:** 07/15/2025  
**Authorized Units:** 0  
**Requested Units:** 1  
**Certification Type:**  
**Auth Service Pkg:**  
**Admit Type:**  
**Patient Status:**

### Patient Mailing Address

6629 E BRALY AVE  
FRESNO, CA 937275881

**Home Phone:** (209)355-0355

### Patient Information

**Patient Name:** BAGGA, SANDEEP  
**DOB:** 3/5/1980  
**Age:** 45.036  
**Gender:** MALE  
**Memb ID:** 94848734E  
**Healthplan:** HNM  
**PCP OV Co-Pay:** N/A  
**Service Area:**

### Diagnosis Information

Code	Version	Description	LOINC Code
K64.2	10	THIRD DEGREE HEMORRHOIDS	

### Referring Physician Information

**Name:** WADE, JOHN SHERER  
**Provider ID:** 1346297330  
**Specialty:** COLON & RECTAL SURGERY  
**Address:** 6067 N FRESNO ST, STE 101  
FRESNO, CA 937105200  
**Phone:** (559)436-0606  
**Fax:** (559)436-4274  
**Service Area:**

### Performing Physician Information

**Name:** WADE, JOHN SHERER  
**Provider ID:** 1346297330  
**Specialty:** COLON & RECTAL SURGERY  
**Address:** 6067 N FRESNO ST, STE 101  
FRESNO, CA 937105200  
**Phone:** (559)436-0606  
**Fax:** (559)436-4274  
**Service Area:**

### Facility Provider Information

**Name:** SAINT AGNES MEDICAL CENTER  
**Specialty:** HOSPITAL  
**Address:** 1303 E HERNDON AVE  
FRESNO, CA 937203309

**Provider ID:** 1205845567  
**Phone:** (559)450-3000  
**Fax:** (559)450-5288

### Services

Status	Auth Action	Auth Expiration	Auth Proc Grp	Service	Type	Description	Modifiers				Auth Qty	Co-Pay	Co-Ins	Admit Date	Discharge Date	Admit Type	Admit Source	Req Qty	Req Catg	Cert Type	Service Type	Fac Type	Service Line	Line Rate
				46260	P	REMOVE IN/EX HEM	1	2	3	4	1.0	0.00	0.00					1.0						



