## AVALOS, JOSE A

220 S MADERA AVE SPC 98

KERMAN, CA 93630

**Member Status** 

Date of Birth

May 13, 1964

**Gender** Male **Current Plan Effective Date** 

Mar 18, 2025

**Relationship to Subscriber** 

Give Feedback

Self

**Check Claim Status** 

**Total Member View** 

Member ID: XDJ99699666E

Issue Number: WF

Group Number: 1188XT

**Group Name:** FRESNO/MEDI-CAL/LIHP

Plan Number: 040

Certification Date: Sep 1, 2023

Eligibility Begin Date: May 1, 2018

Eligibility End Date: May 1, 2023



Payer: ANTHEM BLUE CROSS

Other or Additional Payer Information

No additional payer information provided.

▼ Provider Information

**Requesting Provider** 

Name: UNITED PHYSICIANS NETWORK

Category: Requesting Provider

NPI: 1104906569

FILTER BY NETWORK

## Plan Maximums and Deductibles

All Networks

→ Health Benefit Plan Coverage- 30

Inactive

## **Benefit Descriptions**

FULLY INSURED

## **Benefit Disclaimer**

UNLESS OTHERWISE REQUIRED BY STATE LAW, THIS NOTICE IS NOT A GUARANTEE OF PAYMENT. BENEFITS ARE SUBJECT TO ALL CONTRACT LIMITS AND THE MEMBER'S STATUS ON THE DATE OF SERVICE. ACCUMULATED AMOUNTS SUCH AS DEDUCTIBLE MAY CHANGE AS ADDITIONAL CLAIMS ARE PROCESSED.