



**Personal & Confidential**

February 06, 2025

Advance Medical Supply  
ATTN: Patient Service  
3322 N Milwaukee Ave  
Chicago IL 60641-4001  
773-205-6994

RE: Joyce Tankersley DOB: December 09, 1953 ID #: 000901700819

Dear Patient Service:

Blue Cross Community Health Plans is offered by Blue Cross and Blue Shield of Illinois. On 2025-01-20, the Appeal and Grievance Department /Blue Cross Community Health Plans received notice of concern regarding care and/or service provided to Joyce Tankersley. The nature of this concern is described below:

Our member stated you delivered the wrong walker to her. She said it was a kid walker. She stated when she called to report this, she got the run around. She tried to get a new walker but you didn't have any walkers. She said your staff was very rude.

Our department has the responsibility for investigating, documenting, and responding to all member concerns related to quality of care, access, and service. To assist us in this effort, **please respond with your written comments and clarification of the concerns identified above. Please describe (and include pertinent documentation) the sequence of events leading to January 24, 2025 including referrals and all previous contact with the member and/or referring physician.** If you have responded to our member directly, please send a copy of that correspondence.

The member's application for coverage and Member Certificate of Agreement authorizes the release of the requested information. A separate authorization for release of information is not necessary.

Please provide a written response within **five** working days of receipt of this letter. All correspondence is to be sent to:

Fax: 1-866-643-7069  
Mail: Blue Cross and Blue Shield of New Mexico  
Attention: Patient Service  
PO Box 660717  
Dallas, TX 75266  
Appeal & Grievance Department

Sincerely,