



**TOTAL ANCILLARY**

**Phone: 888-332-7985**  
**Fax: 800-630-8490**  
**Email: fax@totalancillary.com**

## Insurance Verification Results

<b>Patient Name:</b> BARBARA A SMITH	<b>Coverage Details as of</b> 07/03/2023	<b>- Site of Service - Office</b> 07/10/2023		
<b>DOB:</b> 09/28/1948	<b>In Network:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>Codes Verified:</b> Q4210(AXOLOTL DUAL GARFT) Q4259(CELERA) A2001(INNOVAMATRIX) & 15271 <b>Pre-Determination or Prior Authorization Required:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>Is Referral Required:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No CODES Q4210, Q4259, A2001 & 15271 IS VALID AND BILLABLE UNDER THE PATIENTS PLAN, PATIENT HAS MEDICARE PLAN AND COVERAGE IS AT 80%. FINAL DETERMINATION WILL BE MADE BY THE CARRIER BASED ON MEDICAL NECESSITY.			
<b>Primary Payer:</b> MEDICARE HEALTH INSURANCE  MEM# 8K40ED6QG47	<b>Representative Name:</b> PVERIFY <b>Representative Reference #:</b> 88731698			
<b>Secondary Payer:</b> AETNA SENIOR SUPPI	MEM# AHL6216532 S/W DANIEL D PER REP PATIENT HAS MEDICARE SUPPLEMENT PLAN G THROUGH AETNA, WHICH COVERS THE REMAINING MEDICARE PART B COINSURANCE. IT DOES NOT COVER THE PART B DEDUCTIBLE. THEY FOLLOW MEDICARE GUIDELINES AND THE PLAN RUNS ON A CALENDAR YEAR. CALL REF# DANIEL D 07032023.			

  

<b>Primary Payer - Coverage Details</b> 04/01/2019	<b>Deductible</b> \$226 - \$226	<b>Co-Insurance</b> 20%	<b>Out of Pocket Maximum:</b> \$0 - \$0	<b>Copay:</b> \$0
<b>Secondary Payer - Coverage Details</b> 04/01/2019 - NO TERM DATE	<b>Deductible:</b> \$0 - \$0	<b>Co-Insurance:</b> 0%	<b>Out of Pocket Maximum:</b> \$0 - \$0	<b>Copay:</b> \$0

<b>Physician Name:</b> KYLER DALTON PA-C	<b>Physician Network Status:</b> IN NETWORK - NPI - 1962071340	<b>Provider Relations Phone Number/Email:</b> PVERIFY / 800-264-4000
<b>Facility Name:</b> FACULTY PHYSICIANS KNOXVILLE, PLLC	<b>Facility Network Status:</b> IN NETWORK - NPI - 1205595360	<b>Additional Details:</b>

This insurance verification is not a guarantee of coverage or payment. Its details are based on the information provided at the time of verification. Coding must always reflect the procedures performed. It is recommended the physician always confirm all coding, coverage, and reimbursement guidelines directly with the payer. This is provided for Informational use only.