

N O T I F I C A T I O N O F A P P R O V A L

Pmg Vantage Medical Group Inc
600 City Parkway West, Suite 800
Orange, CA 92868
PHONE: 714-796-5900 FAX: 1-714-560-7305

February 11, 2021

This letter confirms that MOLINA MEDI/MEDI member:

Marguerite E Valverde, ID #: 8000880200248
324 C St Apt 164
Chula Vista, CA 91910
PHONE: 619-947-6292
DOB: 06/21/1950

has been referred by Thiermann MD, Paige to:
Ilchena DC, Alesandra Nadia
855 E Madison Ave
El Cajon, CA 92020-3819
PHONE: 619-440-2751

The following specific services are authorized:

CPT	MODIFIER	DESCRIPTION	QTY	DAYS
98941		Cmt Spi 3-4 Regions	6	
99213		Office Outpt Est 15 MIN	1	

COMMENTS:

DIAGNOSIS: Segmental and somatic dysfunction o Segmental and somatic dysfunction o

Ref#: 10661922 LOS:

Valid From: 02/09/2021 Valid Thru: 05/10/2021 Type: Physician Referral Routine

This referral is authorized for 90 days from the valid from date above. Please verify eligibility on the health plan's website or with health plan's customer service department, 24 hours prior to service rendered.

THIS LETTER DOES NOT GUARANTEE PAYMENT. Please note that payment is contingent upon patient eligibility for coverage under the plan on the date services are provided. If the patient has terminated coverage prior to the service delivery date or during the referral period, the services provided after termination are the financial responsibility of the patient. You may contact Pmg Vantage Medical Group Inc at 714-796-5900 or 1-714-796-5900 with questions.

CC: Daramola MD, Iyabo O, Paige Thiermann Md

*****ATTENTION***** THIS Referral IS APPROVED FOR THE SERVICES ABOVE.