

# Eligibility Response

Inquiry ID:  
1156795353  
Processed:  
11/14/2019 7:55 AM  
Subscriber Not Found

## Coverage Details

### User Entered Information

Payer  
Humana (and subsidiaries) claims  
Service Dates  
11/14/2019

### Subscriber Information

---

Member ID  
H333224444  
First Name  
JOHN  
Last Name  
DOE  
Date of Birth  
09/05/1988

### Service Types Requested

---

30 - Health Benefit Plan Coverage

### Payer Returned Information

Inquiry Rejected - Subscriber Demographic Info  
Reason  
Subscriber / Insured Not Found  
Action  
Please Correct and Resubmit

### Subscriber Information

---

DOE, JOHN  
Member ID  
H333224444