ENV 33348

Administered by: United Healthcare Student Resources

P.O. Box 809025, Dallas, TX 75380-9025

202102192003

#### CHECK NO. CHECK DATE **CHECK AMOUNT** 10470948 02/18/21 \$36.76

Questions?

Please contact Customer Service at

(800) 767-0700

CLAIM #: 20522226-01-02-001

POLICY #: 20-3461-91 **APPEALS STATE XX ID NUMBER: 8460830** SCHOOL ID: 01542729 **INSURED: HAO CHENG** 

PATIENT(SELF): HAO CHENG PATIENT ACCT. #: 7455065V1651

MINUTECLINIC DIAG OF FL LLC PAYEE:

ADDRESS: PO BOX 8445

BELFAST ME 04915-8445

**BILLING NPI: 1073780730** 

PROVIDER: MINUTECLINIC DIAG OF FL LLC

PROVIDER NPI: 1730688011- - Preferred Provider Organization

# **Electronic Service Requested**

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# **EXPLANATION OF BENEFITS - This is NOT a Bill**

### **Payment**

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Ref	Service	Dates of Service From To	Proc Code	Amount Claimed	Ineligible	Discount	Total Covered	Co-Pay	Policy Deductible	Total Benefits	Patient Balance	
	DOCTOR VISIT	02/10/21-02/10/21	99213	99.00	0.00	38.16	60.84	20.00	0.00	36.76	24.08	
	Totals:				0.00	38.16	60.84	20.00	0.00	36.76	24.08	

## Remarks:

Discount: Payment has been made in accordance with an agreement with United Healthcare or United Behavioral Health.

Patient Balance: Co-pay, Policy Deductible, Co-Insurance & All Amounts Over Policy Limits.

HELP FIGHT FRAUD!! Review Your Health Care Invoice against this EOB. Call the Anti-Fraud Hotline with Any Discrepancies. HOTLINE # (866) 497-2445.

"This claim and all other claims shall remain subject to all Policy provisions and Exclusions/Limitations. We reserve the right to investigate for Pre-Existing Conditions and applicable Exclusions/Limitations."

EOB (9/12)