Additional Information Submitted via QIC Portal

Date/time of submission: Mon Feb 25, 2019 at time 6:32 PM ET

Temp ID of this submission: A19-00000694

QIC Project : Part D LEP

QIC Appeal number to be associated to : **3-711964825**QIC Portal Temp ID to be associated to : **A18-00000501**

Submitter information:

Submitter Name : **HealthPlan TestQa** Address line 1 : **HealthPlan addr1**

Address line 2:

City: HealthPlan City

State: HI

Zip Code: 96325-6666 Phone: 916-333-2222 Fax: 916-333-2223

Email: healthplan@gmail2.com

Additional Information Description:

Document Description: This is test description, which was entered on 02-25-2019 15-32-08