



April 18, 2024

## ուկրըընմկվակըիկինիորհիդիորնկինինինինի

912 1 MB 0.571 \*\*\*AUTOMIXED AADC 720 R:912 T:4 P:4 PC:3 F:2417501 RAMOS LAW 10190 BANNOCK ST STE 200 NORTHGLENN, CO 80260-6083

there are 3 letters in this mailing

Beneficiary/Claimant:

**GUSTAVO ALVAREZ** 

Date of Incident:

September 21, 2023

Document Control Number: 25031924-0002933

Subject: Unable to Identify Beneficiary

Dear RAMOS LAW:

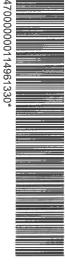
The Benefits Coordination & Recovery Center (BCRC) received a request regarding the above-referenced individual.

Please be advised, we are not able to confirm Medicare coverage for this individual. Please contact the beneficiary/claimant to obtain the correct Medicare ID from their red, white and blue Medicare identification card and resubmit your letter.

If the correct Medicare ID cannot be obtained, please contact the Social Security Administration (SSA) at 1-800-772-1213 to verify Medicare entitlement.

If you have any questions concerning this matter, please contact the BCRC by phone at 1-855-798-2627 (TTY/TDD: 1-855-797-2627 for hearing/speech impaired), in writing at the address below, or by fax at 405-869-3309. When sending correspondence, please include the Beneficiary Name and Medicare ID.

Sincerely, **BCRC** Case Analyst



ML004NGHP Page 1 of 1

