

Statement for Insurance Reimbursement

Kare Pelvic Health

7575 Fredle Drive. Suite 103
Painesville, OH 44077

Phone: (440) 256-6268

Provider: Kari Craig PT, DPT

Licenses: OH 014133

NPI: 1184258196

EIN: 84-4340498

Bill To:

Lauren Carpenter

206 Allynd Blvd, Chardon OH 44024

Date of Birth: Jun 22, 1984

Amount Paid:

\$140.00

| Date | Procedure | Description | Fee | Units | Total |
|---------------------------------------|-----------|------------------------|----------|-------|----------|
| 8/24/2021 | 97530 | Therapeutic Activities | \$35.00 | 3 | \$105.00 |
| 8/24/2021 | 97140 | Manual Therapy | \$35.00 | 1 | \$35.00 |
| Diagnosis Codes: N81.4, N94.11, M54.5 | | | Subtotal | | \$140.00 |
| Place of Service: 11 | | | Total | | \$140.00 |

This patient has paid in full for the service provided and Kare Pelvic Health is NOT an insurance provider for this claim.

PLEASE PROVIDE REIMBURSEMENT DIRECTLY TO THE PATIENT.