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Name	MRN	SSN	Sex	Date of Birth
McCutchen, Shaun Ethnic Group	02932915 Marital Status	xxx-xx-6377 Patient Status	Male	7/9/1959 (60 yrs)
Not Hispanic or Latino	Divorced	Alive		

## **Contact Information**

Address	Phone	E-mail Address
2121 VINE ST	513-377-0589 (Home) *Preferred*	mccutchenshaun@yahoo.com
CINCININATI OH 45202	513-377-0589 (Mohile)	•

#### **Additional Info**

Preferred Language	Interpreter Needed
English	No

### **PCP** and Center

Primary Care Provider	Phone	Center
Seema Abbasi, MD	513-631-1268	UCP MEDICAL ARTS BUILDING

# **Pharmacy Preferences**

Pharmacy
KROGER CINCINNATI 942 - BLUE ASH, OH - 4100 HUNT ROAD

## **Employment Information**

Status	Employer	Occupation
Full Time	THE ARMOUR GROUP	MECHANICAL ENGINEER

### Administrative

Signature on File	Date Filed
Yes	None on file
Power of Attorney	Date Asked
No	None on file
Advance Directive	Date Asked
No	None on file

#### **Patient Contacts**

					Preferred
Name	Relation	Home	Work	Mobile	Language
EVANS, BARB	Friend			513-706-354	14
MCCUTCHEN, PETER	Son			513-314-235	55

### Active Insurance as of 4/20/2020

MOLINA - MOLINA			
Payor	Plan	Insurance Group	Employer/Plan Group
MOLINA	MOLINA	QMXEM00777	
		Payor Plan Fax	
Payor Plan Address	Payor Plan Phone Number	Number	Effective Dates
PO BOX 22712			8/1/2017 - None Entered
LONG BEACH CA 90801			
Subscriber Name	Subscriber Birth Date	Member ID	
MCCUTCHEN,SHAUN	7/9/1959	910000920667	

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