Printed by ELLIUI I, KASHAD [332441]

_	•							
Ba	CIC	110	m	2	ra	n	$^{\circ}$	CC
υa	SIC	$\boldsymbol{\nu}$:11	ıvu	ıa	IJΙ		C3

Name	MRN	SSN	Sex	Date of Birth
Lowe, Tracy	06097576	xxx-xx-3361	Female	8/28/1970 (49 yrs)
Ethnic Group	Marital Status	Patient Status		
Not Hispanic or Latino	Married	Alive		

Contact Information

Address Phone E-mail Address
6402 REDMONT CT 513-292-3459 (Home) *Preferred* tlowe0828@gmail.com
LIBERTY TOWNSHIP OH 45044

Additional Info

Aliases	Preferred Language	Interpreter Needed
LOWE,TRACY	English	No

PCP and Center

Primary Care Provider	Center
Omar Mahmud Siddigi, MD	WCH MAIN HOSPITAL

Pharmacy Preferences

Pharmacy

KROGER CINCINNATI 383 - MIDDLETOWN, OH - 7300 YANKEE RD AT NEC BUTLER REG.&CINTI-DAYTON

Employment Information

Status	Employer	Occupation
Not Employed	Not Employed	Not Employed

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

Lowe,Troy	Spouse	513-292-34	59	513-267-7788		
Name	Relation	Home	Work	Mobile	Language	
					Preferred	

Active Insurance as of 4/20/2020

EXCHANGE - EXCHANGE CARESOURCE OH MARKETPLACE

Payor	Plan	Insurance Group	Employer/Plan Group
EXCHANGE	EXCHANGE CARESOURCE OH MARKETPLACE	HIXOH	
		Payor Plan Fax	
Payor Plan Address	Payor Plan Phone Number	Number	Effective Dates
PO BOX 8730	800-488-0134		7/17/2017 - None Entered
DAYTON OH 45401-8730			
Subscriber Name	Subscriber Birth Date	Member ID	
LOWE,TRACY	8/28/1970	10821546000	

Printed by ELLIOTT, RASHAD [332441]