

Basic Demographics

Name	MRN	SSN	Sex	Date of Birth
Sanchez Cruz, Jonathan "JC"	06264800	xxx-xx-0966	Male	5/14/1998 (21 yrs)
Ethnic Group	Marital Status	Patient Status		
Hispanic or Latino	Single	Alive		

Contact Information

Address	Phone
3935 ELTER LN	513-999-7669 (Home)
MASON OH 45040	513-999-7669 (Mobile) *Preferred*

Additional Info

Aliases	Preferred Language	Interpreter Needed
SANCHEZ CRUZ,JONATHAN	English	No
SANCHEZ-CRUZ,JC		
SANCHEZ-CRUZ,JONATHAN		
SANCHEZCRUZ,JONATHAN		
CRUZ,JC		
CRUZ,JOHNATHAN		

PCP and Center

Primary Care Provider	Phone	Center
Mati Segev, MD	513-584-7425	WCH MAIN HOSPITAL

Pharmacy Preferences

Pharmacies
CVS/PHARMACY #2840 - MASON, OH - 5525 PARKSIDE DR. AT CORNER OF KINGS MILLS / UC HEALTH SPECIALTY PHARMACY

Employment Information

Status	Employer	Occupation
Student - Full Time	Student - Full Time	Student - Full Time

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

Name	Relation	Home	Work	Mobile	Preferred Language
Sanchez,Anna	Mother			513-999-7669	English
					Interpreter needed? No

Active Insurance as of 4/20/2020

MEDICAID OHIO - MEDICAID OHIO			
Payor	Plan	Insurance Group	Employer/Plan Group
MEDICAID OHIO	MEDICAID OHIO		

Payor Plan Address	Payor Plan Phone Number	Payor Plan Fax Number	Effective Dates
PO BOX 2645			3/29/2017 - None Entered
COLUMBUS OH 43216-2645			
Subscriber Name	Subscriber Birth Date	Member ID	
SANCHEZ CRUZ,JONATHAN	5/14/1998	108298691899	

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