

Progressive  
PO Box 2930  
Clinton, IA 52733-2930

**PROGRESSIVE®**

**Underwritten By:**  
**Progressive Direct Insurance**  
**Company**

**Recipient:**  
HUDSON VALLEY CHIROPRACTIC HEALTH SERVICES  
210 FINLEY AVE  
STATEN ISLAND, NY 10306

**Document Date:** November 15, 2023  
**Claim Number:** 23-3448926  
**Date of Loss:** June 10, 2023  
**Policyholder:** BANKS, AALIYAL  
**State of Jurisdiction:** NY  
**Coverage Type:** Personal Injury Protection  
**Date Received:** November 6, 2023  
**Bill Number:** 74420363  
**Provider Invoice Number:**  
**Progressive Invoice Number:** 119520575

**Patient:**  
AALIYAL S BANKS  
763 EAST 82ND ST  
BROOKLYN, NY 11236

**Provider Information:**  
HUDSON VALLEY CHIROPRACTIC HEALTH SERVICES  
210 FINLEY AVE  
STATEN ISLAND, NY 10306

**Specialty:** Chiropractic  
**Zip of Service:** 11210  
**Region:** 4  
**Date(s) of Service:** 10/16/2023 - 10/16/2023  
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## Explanation of Benefits

### This is not a bill

#### ICD Diagnosis Codes:

Diagnosis Pointer (DX Ptr)	Code	Description
A	M54.2	Cervicalgia
B	M54.6	Pain in thoracic spine
C	M54.50	Low back pain, unspecified
D	M99.04	Segmental and somatic dysfunction of sacral region
E	M99.05	Segmental and somatic dysfunction of pelvic region

**ICD Procedure Codes:** No Procedure Code entered for this bill.

Date of Service	Line	Rev Cd	POS	Proc Cd/ NDC	Mod/ Pkg	DX Ptr	Units	Amount Charged	Amount Allowed	Explanation Codes
10/16/2023	1		11	98941			1	\$57.30	\$0.00	6841 6848
<b>Subtotals</b>								\$57.30	\$0.00	
<b>Amt Previously Paid</b>									\$0.00	
<b>Deductible/Co-Pay</b>									\$0.00	
<b>Totals</b>								\$57.30	\$0.00	

**Revenue Code (Rev Cd):**