

Explanation of Medical Bill Payment

Date January 23, 2024	Claim Number 0737846238-02	Invoice Number B1010077833A
Bill Received Date January 17, 2024	TIN 83-2751899	Company ALLSTATE NEW JERSEY PROPERTY AND CASUALTY INS CO
Injured Person SYLVANAH LUCERO LOPEZ	Treatment Rendered By BORUKHOV RADIOLOGY PLLC	300 American Metro Blvd STE 22 Hamilton NJ 08619-9990

PROCESS # : AF337

Diagnosis Codes/Present on Admission Indicator
 MS4.2 CERVICALGIA 513.4XXA SPRAIN LIG CERV SPINE INITIAL ENC
 S33.5XXA SPRAIN LIGAMENTS LUMBAR SPN INITIAL

Date Of Service	Proc-Mod/Rev/NDC Description	Units	Billed Amount	PPO Reduction	Schedule Reduction	Compliance Penalty	Eligible Amount
01/12/24	72141 Magnetic resonance (eg, p	1.00	\$ 967.70	\$ 0.00	\$ 483.85	\$ 0.00	\$ 483.85
01/12/24	72148 Magnetic resonance (eg, p	1.00	\$ 1003.20	\$ 0.00	\$ 0.00	\$ 0.00	\$ 1003.20
Total:			\$ 1970.90	\$ 0.00	\$ 483.85	\$ 0.00	\$ 1487.05

Total Eligible Amount
 Less Remaining Policy Deductible
 Covered Amount After Deductible
 Customer Co-payment
 Covered Amount after Co-payment applied

Deductible applied to date \$ 0.00 from deductible limit of \$ 0.00

Reason Code(s):
 MS03 MPR Occurrence Sequencing: Subsequent procedure(s) (-51)
 SA01 Contiguous Radiographic Multiple Procedure Reduction: 100%, 50%, 50%, 50%, 50%
 MS01 MPR Occurrence Sequencing: Primary procedure

*** Important Notice ***
 This claim has been repriced according to the PIP medical fee schedule set forth in N.J.A.C. 11:3-29. Health care providers are prohibited from billing for, or otherwise attempting to recover from the patient the difference between the provider's charge and the fee schedule reimbursement.

Providers shall follow the internal appeal process mandated by N.J.A.C. 11:3-4.7B and outlined in our Decision Point Review Plan before making a request for dispute resolution.

For questions regarding this Explanation of Benefit or payment, please contact Medlogix on behalf of Allstate New Jersey Insurance Company at (877) 258-2378.

Payment for \$ 1487.05 was made on 01/23/2024 to:
 BORUKHOV RADIOLOGY PLLC

Copy(s) of this Explanation of Benefits has been sent to:
 SUBIN ASSOC LLP, 150 BROADWAY 23RD FLOOR NEW YORK, NY, 10038
 SYLVANAH LUCERO LOPEZ, 156 BRUCKNER BLVD APT 210 BRONX, NY, 10454
 BORUKHOV RADIOLOGY PLLC, 138 21 QUEENS BLVD BRIARWOOD, NY, 11435

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