

# Missing Claims Inquiry

Client Name: Masters, Mates & Pilots Health & Benefits Plan

Claims type (Medicare or VA Crossover, Dental, or Commercial): Medicare Crossover

Provider Name: Radha

Tax ID: 5NPI: 5

Patient (1) Info:

Patient Name: 5

Date of Birth: 05/01/2025

Claim Info for Patient (1):

DOS	5	Amount: \$	5
DOS	5	Amount: \$	5
DOS	5	Amount: \$	5

Patient (2) Info:

Patient Name: 5

Date of Birth: 05/01/2025

Claim Info for Patient (2):

DOS	5	Amount: \$	5
DOS	5	Amount: \$	5
DOS	5	Amount: \$	5

Patient (3) Info:

Patient Name: 5

Date of Birth: 05/01/2025

Claim Info for Patient (3):

DOS	5	Amount: \$	5
DOS	5	Amount: \$	55
DOS	5	Amount: \$	5