

Editor EDI Claim Returns Denials

SUMANA KETHA MDPA

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2925 SKYWAY CIRCLE NORTH, IRVING, TX 75038

Provider

KETHA, SUMANA

Patient Acut#

8366Z5556

Member ID#

Member

ARREDONDO, MAURICIO

Member DOB

1/18/1961

Form Type

1500

Claim LD

Claim Line Date of Service

CPT/HCPC

Modifier

Units Billed Amount

Status

12180863441

6/25/2012

99350

1.00

Rejected

\$400.00

\$400.00

Summary of Acct # 8366Z5556

Message: Cannot find member in plan database
