

PATIENT DEMOGRAPHICS & INSURANCE VERIFICATION

PATIENT INFORMATION	
Full Name	Jennifer Lynn Martinez
Date of Birth	August 14, 1972
Age	52 years
Gender	Female
SSN (Last 4)	XXX-XX-7834
Address	4521 Willow Creek Drive, Austin, TX 78749
Phone	(512) 555-9283
Email	j.martinez@email.com
Emergency Contact	David Martinez (Spouse) - (512) 555-9284
Employment Status	Full-Time Employed
Employer	TechFlow Solutions Inc.
Employer Size	850 employees

PRIMARY INSURANCE	
Insurance Company	UnitedHealthcare
Plan Name	Choice Plus PPO
Member ID	UHC-5839274
Group Number	TFSI2024
Group Name	TechFlow Solutions Inc.
Policy Holder	Self
Effective Date	January 1, 2024
Deductible	\$1,500 (Met: \$1,500) - SATISFIED
Remaining Deductible	\$0.00
Coinsurance	80/20 (In-Network)
OOP Maximum	\$4,000 (Used: \$2,340)
Prior Authorization	AUTH-2024-MRI-78345 (Approved)

OTHER COVERAGE	
Secondary Insurance	None
Medicare Status	Not Eligible (Age 52)
Other Coverage	None

✓ **REGISTRATION COMPLETE** • Deductible fully satisfied for 2024 • Prior authorization on file (AUTH-2024-MRI-78345) • Large employer (850 EE) - no MSP concerns • Single coverage - no COB required