

# PATIENT DEMOGRAPHICS & INSURANCE VERIFICATION

PATIENT INFORMATION	
Full Name	Robert Joseph Anderson
Date of Birth	March 15, 1957
Age	67 years
Gender	Male
SSN (Last 4)	XXX-XX-4521
Address	2847 Pecan Grove Lane, Austin, TX 78750
Phone	(512) 555-7842
Email	r.anderson@email.com
Employment Status	Full-Time Employed
Employer	Anderson & Associates CPA
Employer Size	15 employees

PRIMARY INSURANCE (AS SUBMITTED)	
Insurance Company	UnitedHealthcare
Plan Name	Choice Plus PPO
Member ID	UHC-7924681
Group Number	ACPA2024
Group Name	Anderson & Associates CPA
Policy Holder	Self
Effective Date	January 1, 2024
Deductible	\$1,000 (Met: \$750)
Remaining Deductible	\$250
Coinsurance	80/20
OOP Maximum	\$5,000

OTHER COVERAGE	
Secondary Insurance	NOT DISCLOSED ON FORM
Medicare Status	NOT DISCLOSED
Medicare Number	NOT PROVIDED

**⚠ POTENTIAL COB ISSUE** Patient is 67 years old - Medicare eligible. Employer has 15 employees (< 20 threshold). MSP rules may apply - verification required.