



P.O. BOX 981106
EL PASO, TX 79998-1106

*004337*J1VS440 *008604*

SISAY, JEREMIAH K
2698 N GALLOWAY AVE
MESQUITE TX 75150-6383

Claim Payment

Please Retain for Future Reference

Printed: 08/07/2019
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PVN: SISAY, JEREMIAH K
TIN: 4165961
XXXXXXX2511
NO PAY

Questions: 1-800-624-0756
POS: SPECIALIST

ENV 19245 2 OF 2 F

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Member Name Invoice #	DOS	Units	Member Number Procedure	MODS	Billed	Member Responsibility	Paid	Message(s)
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NON-PAYMENT OF CLAIMS

PROVIDER NAME: SISAY, JEREMIAH K

PROVIDER NUMBER: 4165961

ROCHELLE MYRICK			MEBSC2XN	POS :F				
001-86533	5/30/19	1.00	99215		\$222.27	\$0.00	\$0.00	001
CLAIM WAS RECVD ON 7/31/19					TOTAL		\$0.00	
					TOTAL		\$0.00	

MESSAGE DESCRIPTION(S):

001 There is no valid referral for this service. Member is responsible for this charge. D28