MNT Health Insurance and Claim Information 2 /8 /04

Rec # 1 555-11-0101 202001 (26) **Date of Birth:** 5/30/35 Female (3)

☑ Medicare ☐ Medicaid ☐ CHAMPUS ☐ CHAMPVA ☐ Group Health Plan ☐ Other (1)

Patient: Rebecca A Williams (2) **Phone number:** (555) 733-1212 (5)

Address 345 Windy Road, Grand Terrace, CA, 92345 (5)

Health Insurance Number (HIN): 885-55-2214-A6 (1a)

Patient Status:

☐ Single ☐ Married ☐ Other ☐ Employed ☐ Full-Time Student ☐ Part-Time Student (8)

Insurance Plan: Medicare Part B (11c) **Group Policy Number:** HG4567 (11)

Address 25 S Wilson Ave, P.O. Box 6702, Fargo, ND, 58108-6702

Contact: **Phone:** (877) 849-7243

Secondary Plan Blue Circle Health (9d) **Group Policy Number:** (9a)

Address 234 Main St, Suite 200, Anytown, WA, 98989

Contact: Jane Smith **Phone:** (555) 444-5454

Patient's Relationship to Insured: ☐ Self ☐ Spouse ☐ Child ☐ Other (6)

Insured, Other Than Patient: (4)

Address (7)

Date of Birth: (11a or 9b

Employer/School: (11b or 9c)

Program Name: (11c or 9d)

Referring Physician: Donald K Wall MD (17) **UPIN:** G87875 (17a)

ICD-9 codes: 250.02 (21)

Diagnosis: Diabetes Mellitus without complications type 2, uncontrolled

Date of 1st diagnosis: 4/16/02 (14) **Date of simialar illness:** (15)

MNT Provider: Betty Goodman MS, RD, LD **Medicare PIN:** 112564 (24k)

Federal Tax ID # (SSN or EIN): 458869856 (25) **Other PIN:** (24k)

Date of Service: 2 /8 /04 (24A) **Contact Time:** 5 Units (24G) **CPTCode:** 97802 (24D)

MNT Intervention: Weight Management

Numbers in parenthesis designate the item on the HCFA-1500 form where this information may be applicable.