

Current Insurance Category: Commercial Insurance				
Current Insurance Name: American Retirement Life Ins Co				
Phone Number: [REDACTED]				
Patient ID:				
Voucher Number:		DOS: [REDACTED]		
CPT Code and Description				Owe Amount
G8510 - Patient Ineligible Negative Screen Depre				\$0.00
G0439 - PPPS, subseq visit				\$270.00
Denial Date	Denial Insurance	Denial Code	Denial Reason	
5/7/2020	American Retirement Life Ins Co	18	Duplicate claim/service	
G0442 - Annual alcohol misuse screening, 15 min				\$31.00
Denial Date	Denial Insurance	Denial Code	Denial Reason	
3/10/2020	Medicare PA	119	Benefit maximum for this time period or occurrence has been reached.	
5/7/2020	American Retirement Life Ins Co	18	Duplicate claim/service	
G0444 - Annual depression screening, 15 minutes				\$31.00
Denial Date	Denial Insurance	Denial Code	Denial Reason	
3/10/2020	Medicare PA	B15	This service/procedure requires that a qualifying service/procedure be received	
5/7/2020	American Retirement Life Ins Co	18	Duplicate claim/service	
3051F - Most recent HbA1c level >7.0 < 8.0				\$0.00
90732 - Pncal Polysac 23-V Adlt/Immunsup Subq/I				\$0.00
G0009 - Administration Of Pneumococcal Vaccine				\$0.00
Voucher Number: ### Balance				\$332.00
Patient ID ### Balance				\$332.00
Patient ID:				
Voucher Number:		DOS: [REDACTED]		
CPT Code and Description				Owe Amount
93010 - Ecg Routine Ecg W/Least 12 Lds I&r Only				\$1.70
Voucher Number: ### Balance				\$1.70
Patient ID ### Balance				\$1.70
Insurance American Retirement Life Ins Co Balance				\$333.70