

There's an Easier Way to Manage your Medicare

How to Get Started

Sign up today for a free account at MyMedicare.gov

Access These Benefits:

- Get electronic Medicare Summary Notices (eMSNs) monthly to view your claims more timely.
- See a calendar of your current and upcoming preventive services, like cancer screenings.
- Create and manage your prescription drug list.
- View your Part B deductible information.
- Create an "On the Go Report" so you can print your health information to share with your doctor and other healthcare providers.
- Print and view your new Medicare Card.
- Connect with trusted third parties to manage your personal health information on the go.

If you sign up to get eMSNs, you'll get an email every month with a secure link to your information — no more waiting three months for a paper copy in the mail. eMSNs are stored in your MyMedicare account, but you can still print or save them anytime you want. You can also look for any errors in billing and services. This can help reduce mistakes and fraud, which are costly to you and Medicare.

To Sign Up for eMSNs:

1. Go to MyMedicare.gov
2. Log in or create an account
3. Select "My Account" from the menu
4. On the "User information" tab, select "Email and Correspondence Settings"
5. In the "Electronic Medicare Summary Notices (eMSNs)" area, select "Edit"
6. Select "Yes" and then "Submit"

Please note: Due to the secure nature of our website processing you can only sign up for eMSNs between 6 a.m. and 10 p.m. Eastern Time.

Need Help?

If you need help or have questions, call 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.

September 14, 2019/Smsj Tucson Holdings LLC continued...

Service Provided & Billing Code	Service Approved?	Amount Facility Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Diagnostic examination of large bowel using an endoscope (45378)	Yes	4,141.15	4,141.15	602.49	153.70	B
Total for Claim # 21926300832807AZA		\$6,852.30	\$6,852.30	\$602.49	\$153.70	C,D

Notes for Claims Above

- B** Local coverage determinations (LCDs) help Medicare decide what is covered. An LCD was used for your claim. You can compare your case to the LCD, and send information from your doctor if you think it could change our decision. Call 1-800-MEDICARE (1-800-633-4227) for a copy of the LCD. The following policies were used when we made this decision: L36868
- C** The amount Medicare paid the provider for this claim is \$602.49.
- D** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.

Making the Most of Your Medicare

How to Check This Notice

Do you recognize the name of each facility? Check the dates. Did you have a service or visit that day?

Did you get the claims listed? Do they match those listed on your receipts and bills?

If you already paid the bill, did you pay the right amount? Check the maximum you may be billed. See if the claim was sent to your Medicare supplement insurance (Medigap) plan or other insurer. That plan may pay your share.

How to Report Fraud

If you think a facility or business is involved in fraud, call us at 1-800-MEDICARE (1-800-633-4227).

Some examples of fraud include offers for free medical services, or billing you for Medicare services you didn't get. If we determine that your tip led to uncovering fraud, you may qualify for a reward.

Don't get scammed by phone calls, ads, and people who come door-to-door offering you free or cheap Medicare items and services! Only trust Medicare-approved suppliers and doctors!

How to Get Help with Your Questions

1-800-MEDICARE (1-800-633-4227) Ask for "hospital services." Your customer service code is 03001.

TTY 1-877-486-2048 (for hearing impaired)

Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call **1-800-432-4040**.

Your Messages from Medicare

You have the right to get your Medicare Summary Notices (MSNs) in an accessible format, like Braille, large print, or data/audio files. Call 1-800-MEDICARE (1-800-633-4227; TTY: 1-877-486-2048).

Early detection is your best protection. Schedule your mammogram today, and remember that Medicare helps pay for screening mammograms.

Save tax dollars and trees by getting your Medicare & You handbook electronically. Visit <https://www.medicare.gov/forms-help-and-resources/e-delivery.html> to sign up today.

It's time for your flu shot! People 65 years and up are at high risk for serious complications from the flu. Medicare covers the flu shot. You pay nothing if your provider accepts Medicare.

How to Handle Denied Claims or File an Appeal

Get More Details

If a claim was denied, call or write the provider and ask for an itemized statement for any claim. Make sure they sent in the right information. If they didn't, ask the provider to contact our claims office to correct the error. You can ask the provider for an itemized statement for any service or claim.

Call 1-800-MEDICARE (1-800-633-4227) for more information about a coverage or payment decision on this notice, including laws or policies used to make the decision.

If You Disagree with a Coverage Decision, Payment Decision, or Payment Amount on this Notice, You Can Appeal

Appeals must be filed in writing. Use the form to the right. Our claims office must receive your appeal within 120 days from the date you get this notice.

We must receive your appeal by:

February 19, 2020

If You Need Help Filing Your Appeal

Contact us: Call 1-800-MEDICARE or your State Health Insurance Program (see page 2) for help before you file your written appeal, including help appointing a representative.

Call your provider: Ask your provider for any information that may help you.

Ask a friend to help: You can appoint someone, such as a family member or friend, to be your representative in the appeals process.

Find Out More About Appeals

For more information about appeals, read your "Medicare & You" handbook or visit us online at www.medicare.gov/appeals.

File an Appeal in Writing

Follow these steps:

- 1 Circle the service(s) or claim(s) you disagree with on this notice.
- 2 Explain in writing why you disagree with the decision. Include your explanation on this notice or, if you need more space, attach a separate page to this notice.

3 Fill in all of the following:

Your or your representative's full name (print)

Your or your representative's signature

Your telephone number

Your complete Medicare number

- 4 Include any other information you have about your appeal. You can ask your provider for any information that will help you.
- 5 Write your Medicare number on all documents that you send.
- 6 Make copies of this notice and all supporting documents for your records.
- 7 Mail this notice and all supporting documents to the following address:

**Medicare Claims Office
c/o Noridian Healthcare Solutions, LLC
Attn: Appeals Dept
P. O. Box 6704
Fargo, ND 58108-6704**

August 13, 2019

Westside Internal Medicine G, (520)884-0752
 8087 N Faded Leaf Dr, Tucson, AZ 85743-5037

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Ofori, Stanley, M.D.						
Established patient office or other outpatient, visit typically 25 minutes (99214)	Yes	\$122.50	\$108.16	\$86.40	\$21.63	C,D
Total for Claim # 18-19266-404-590		\$122.50	\$108.16	\$86.40	\$21.63	E

September 14, 2019

Rajiv Raja MD PC, (623)561-1000
 PO Box 39179, Phoenix, AZ 85069-9179
 Referred by Sidi, Sylvain

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Raja, Rajiv, M.D.						
Anesthesia for procedure on large bowel using an endoscope (00811-AAQS)	Yes	\$1,590.00	\$116.34	\$91.21	\$23.27	C,F
Total for Claim # 11-19280-532-410		\$1,590.00	\$116.34	\$91.21	\$23.27	E

Continued →

Notes for Claims Above

- C** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.
- D** This claim shows a quality reporting program adjustment.
- E** We have sent your claim to your Medigap insurer. Send any questions regarding your benefits to them. Your Medigap insurer is UNITEDHEALTH GROUP.
- F** The approved amount is based on a special payment method.

ENVU3554 2 of 4 B

Making the Most of Your Medicare

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How to Get Help with Your Questions

1-800-MEDICARE (1-800-633-4227)

Ask for "doctors services." Your customer-service code is 03102.

TTY 1-877-486-2048 (for hearing impaired)

Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call **1-800-432-4040**.

Medicare Preventive Services

Medicare covers many free or low-cost exams and screenings to help you stay healthy. For more information about preventive services:

- Talk to your doctor.
- Look at your "Medicare & You" handbook for a complete list.
- Visit www.MyMedicare.gov for a personalized list.

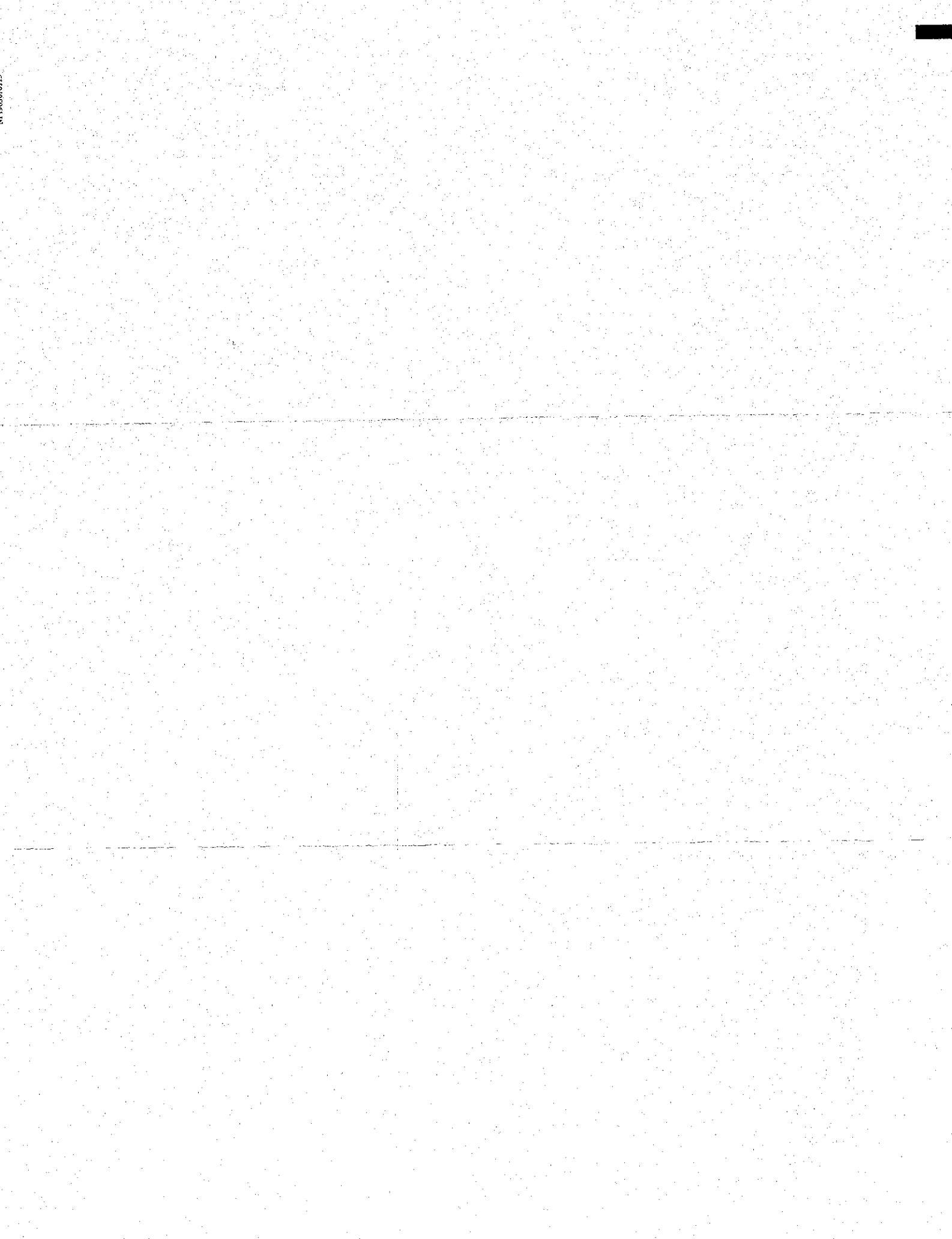
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April 02, 2019/Smsj Tucson Holdings LLC continued...

Service Provided & Billing Code	Service Approved?	Amount Facility Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Emergency department visit, problem of high severity (99284-25)	Yes	2,755.96	2,755.96	291.48	74.36	
Total for Claim # 21909801162207AZA		\$6,108.80	\$6,108.80	\$382.47	\$97.58	B,C

April 11, 2019

Smsj Tucson Holdings LLC, (520) 872-3000

1601 W Saint Marys Rd, Tucson, AZ 85745-2623

Referred by Stanley Ofori

Service Provided & Billing Code	Service Approved?	Amount Facility Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
X-ray of hip with pelvis, 2-3 views (73502-LT)	Yes	\$883.45	\$883.45	\$50.39	\$12.85	
Total for Claim # 21910600877507AZA		\$883.45	\$883.45	\$50.39	\$12.85	C,D

Notes for Claims Above

B The amount Medicare paid the provider for this claim is \$382.47.

C After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.

D The amount Medicare paid the provider for this claim is \$50.39.

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You're getting a New Medicare Card. Once you get your new Medicare card, start using it right away, and destroy your old card. Your new card will have a new number that's unique to you.

How to Get Help with Your Questions

1-800-MEDICARE (1-800-633-4227) Ask for "hospital services." Your customer service code is 03001.

TTY 1-877-486-2048 (for hearing impaired)

Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call **1-800-432-4040**.

Your Messages from Medicare

If you haven't gotten your flu vaccine, it isn't too late. Please contact your health care provider about getting the vaccine.

Early detection is your best protection. Schedule your mammogram today, and remember that Medicare helps pay for screening mammograms.

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Joseph G Caldwell

April 12, 2019

Sonora Quest Laboratories, (602)685-5000

PO Box 67150, Phoenix, AZ 85082-7150

Referred by Ofori, Stanley

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Blood test, lipids (cholesterol and triglycerides) (80061-GA)	NO	\$69.93	\$0.00	\$0.00	\$69.93	Q,R
Total for Claim # 11-19109-350-800		\$69.93	\$0.00	\$0.00	\$69.93	

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Notes for Claims Above

- Q** The information provided does not support the need for this service or item.
- R** Our records show that you were informed in writing, before receiving the service, that Medicare would not pay for this charge. If you do not agree with this statement, you may ask for a review.

April 02, 2019

Sound Physicians ER Medicine, (520)873-3000

PO Box 748120, Los Angeles, CA 90074-8120

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Berner, Ruth M., M.D.						
Emergency department visit, moderately severe problem (99283)	Yes	\$602.00	\$62.05	\$48.73	\$12.41	J,K
Total for Claim # 11-19100-450-220		\$602.00	\$62.05	\$48.73	\$12.41	L

April 02, 2019

Tucson Physician Group Holdi, (520)622-5912

PO Box 22224, Belfast, ME 04915-4473

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Moukabary, Talal, M.D.						
Evaluation, testing, and programming adjustment of permanent dual lead pacemaker system with physici (93280-26) professional charge	Yes	\$108.00	\$38.80	\$30.97	\$7.76	J,K
Total for Claim # 11-19098-119-190		\$108.00	\$38.80	\$30.97	\$7.76	L

Continued →

Notes for Claims Above

- J** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.
- K** This claim shows a quality reporting program adjustment.
- L** We have sent your claim to your Medigap insurer. Send any questions regarding your benefits to them. Your Medigap insurer is UNITEDHEALTH GROUP.

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ENV16779 2 of 6 B

February 28, 2019
Specialists IN Dermatology, (520)319-1100
 2732 N Alvernon Way, Tucson, AZ 85712-1804

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Hu, Weimin K., M.D.						
Pathology examination of tissue using a microscope, intermediate complexity (88305)	Yes	\$102.00	\$68.87	\$54.00	\$13.77	E
Total for Claim # 11-19086-260-570		\$102.00	\$68.87	\$54.00	\$13.77	F

February 28, 2019
Specialists IN Dermatology, (520)382-3330
 2732 N Alvernon Way, Tucson, AZ 85712-1804
 Referred by Ofori, Stanley

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Fang, Xiangping, NP						
Tangential biopsy of single skin lesion (11102-XS)	Yes	\$147.35	\$83.50	\$65.46	\$16.70	E
Destruction of 15 or more skin growths (17004-XU)	Yes	226.98	128.62	100.84	25.72	E
Established patient office or other outpatient visit, typically 15 minutes (99213-25)	Yes	107.97	62.74	49.19	12.55	E
Total for Claim # 11-19064-741-900		\$482.30	\$274.86	\$215.49	\$54.97	F

Continued →

Notes for Claims Above

- E** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.
- F** We have sent your claim to your Medigap insurer. Send any questions regarding your benefits to them.

Making the Most of Your Medicare

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How to Get Help with Your Questions

1-800-MEDICARE (1-800-633-4227)

Ask for "doctors services." Your customer-service code is 03102.

TTY 1-877-486-2048 (for hearing impaired)

Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call **1-800-432-4040**.

How to Handle Denied Claims or File an Appeal

Get More Details

If a claim was denied, call or write the hospital or facility and ask for an itemized statement for any claim. Make sure they sent in the right information. If they didn't, ask the facility to contact our claims office to correct the error. You can ask the facility for an itemized statement for any item or claim.

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If You Disagree with a Coverage Decision, Payment Decision, or Payment Amount on this Notice, You Can Appeal

Appeals must be filed in writing. Use the form to the right. Our claims office must receive your appeal within 120 days from the date you get this notice.

We must receive your appeal by:

December 27, 2018

If You Need Help Filing Your Appeal

Contact us: Call 1-800-MEDICARE or your State Health Insurance Program (see page 2) for help before you file your written appeal, including help appointing a representative.

Call your facility: Ask your facility for any information that may help you.

Ask a friend to help: You can appoint someone, such as a family member or friend, to be your representative in the appeals process.

Find Out More About Appeals

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File an Appeal in Writing

Follow these steps:

- 1 Circle the service(s) or claim(s) you disagree with on this notice.
- 2 Explain in writing why you disagree with the decision. Include your explanation on this notice or, if you need more space, attach a separate page to this notice.
- 3 Fill in all of the following:

Your or your representative's full name (print)

Your or your representative's signature

Your telephone number

Your complete Medicare number

- 4 Include any other information you have about your appeal. You can ask your facility for any information that will help you.
- 5 Write your Medicare number on all documents that you send.
- 6 Make copies of this notice and all supporting documents for your records.
- 7 Mail this notice and all supporting documents to the following address:

**Medicare Claims Office
c/o Noridian Healthcare Solutions, LLC
P.O. Box 6730 - Attn: Appeals
Fargo ND 58108-6730**

3 of 4 B
ENV15276

January 24, 2018/Smsj Tucson Holdings LLC continued...

Service Provided & Billing Code	Service Approved?	Amount Facility Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Pharmacy	Yes - adjusted	108.50	108.50	0.00	0.00	B
Injection, neostigmine methylsulfate, up to 0.5 mg (J2710)	Yes - adjusted	72.60	72.60	0.00	0.00	B
IV Solutions	Yes - adjusted	81.40	81.40	0.00	0.00	B
Ringers lactate infusion, up to 1000 cc (J7120)	Yes - adjusted	130.00	130.00	0.00	0.00	B
Med-Sur Supplies	Yes - adjusted	5,305.20	5,305.20	0.00	0.00	B
Catheter, balloon tissue dissector, non-vascular (insertable) (C1727)	Yes - adjusted	13,256.40	13,256.40	0.00	0.00	B
Supply/Implants	Yes - adjusted	2,415.80	2,415.80	0.00	0.00	B
Mesh (implantable) (C1781)	Yes - adjusted	4,794.20	4,794.20	0.00	0.00	B
Red blood cell concentration measurement (85014)	Yes - adjusted	120.70	120.70	0.00	0.00	B,C
Repair of groin hernia using an endoscope (49650-50)	Yes - adjusted	28,947.20	28,947.20	3,568.75	910.39	
Anesthesia	Yes - adjusted	3,825.60	3,825.60	0.00	0.00	B
Injection, cefazolin sodium, 500 mg (J0690)	Yes - adjusted	27.00	27.00	0.00	0.00	B
Injection, dexamethasone sodium phosphate, 1 mg (J1100)	Yes - adjusted	105.10	105.10	0.00	0.00	B
Injection, meperidine hydrochloride, per 100 mg (J2175)	Yes - adjusted	5.60	5.60	0.00	0.00	B
Injection, midazolam hydrochloride, per 1 mg (J2250)	Yes - adjusted	81.40	81.40	0.00	0.00	B

Claim # 21816301703408AZA

(continued)

Continued →

Notes for Claims Above

- B** Payment is included in another service received on the same day.
- C** Local coverage determinations (LCDs) help Medicare decide what is covered. An LCD was used for your claim. You can compare your case to the LCD, and send information from your doctor if you think it could change our decision. Call 1-800-MEDICARE (1-800-633-4227) for a copy of the LCD. The following policies were used when we made this decision: 190.15

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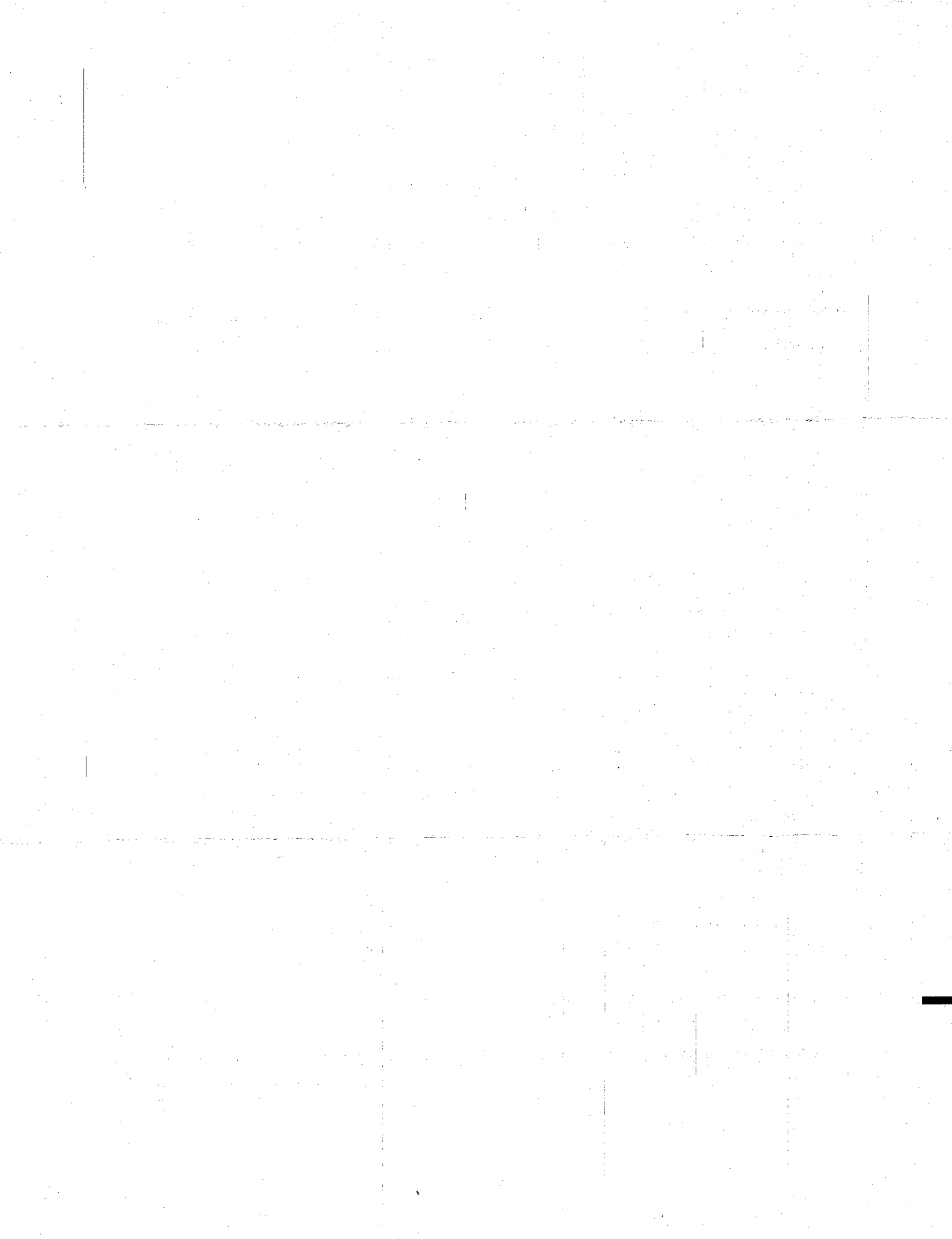
Your Messages from Medicare

To report a change of address, call Social Security at **1-800-772-1213**. TTY users should call 1-800-325-0778.

Save tax dollars and trees by getting your Medicare & You handbook electronically. Visit <https://www.medicare.gov/forms-help-and-resources/e-delivery.html> to sign up today.

Prostate cancer is the second leading cause of cancer deaths in men. Medicare helps pay for prostate cancer screenings once every 12 months, for men over age 50. Talk to your doctor about getting checked.

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Joseph G Caldwell

March 14, 2018

Tucson Phys Grp Holdings LLC, (520)622-5912
PO Box 22224, Belfast, ME 04915-4473

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Habibzadeh, Mohammad R., M.D.						
Ultrasound examination of heart including color-depicted blood flow rate, direction, and valve funct (93306)	Yes	\$667.00	\$202.59	\$158.83	\$40.52	N,O
Total for Claim #19-18102-222-130		\$667.00	\$202.59	\$158.83	\$40.52	P

Notes for Claims Above

- N** This claim shows a quality reporting program adjustment.
- O** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.
- P** We have sent your claim to your Medigap insurer. Send any questions regarding your benefits to them. Your Medigap insurer is UNITEDHEALTH GROUP.

January 24, 2018

Southern AZ Anesthesia Serv, (520)795-7650

PO Box 43640, Tucson, AZ 85733-3640

Referred by Levine, Brian J

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. O'Neill, C., M.D.						
Anesthesia for procedure in lower abdominal cavity including use of an endoscope (00840-AA)	Yes-adjusted	\$2,320.00	\$334.46	\$262.22	\$66.89	F,G
Total for Claim #48-18082-121-520		\$2,320.00	\$334.46	\$262.22	\$66.89	H,I

January 24, 2018

Tucson Phys Grp Holdings LLC, (520)622-5912

PO Box 22224, Belfast, ME 04915-4473

Referred by Levine, Brian J

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Moukabary, Talal, M.D.						
Routine electrocardiogram (EKG) using at least 12 leads with interpretation and report (93010)	Yes-adjusted	\$21.00	\$8.52	\$6.68	\$1.70	F
Total for Claim #48-18107-878-840		\$21.00	\$8.52	\$6.68	\$1.70	

Continued →

Notes for Claims Above

F After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.

G The approved amount is based on a special payment method.

H This is an adjustment to a previously processed claim and/or deductible record.

I This notice is being sent to you as the result of a reopening request.

Making the Most of Your Medicare

How to Check This Notice

Do you recognize the name of each doctor or provider? Check the dates. Did you have an appointment that day?

Did you get the services listed? Do they match those listed on your receipts and bills?

If you already paid the bill, did you pay the right amount? Check the maximum you may be billed. See if the claim was sent to your Medicare supplement insurance (Medigap) plan or other insurer. That plan may pay your share.

How to Report Fraud

If you think a provider or business is involved in fraud, call us at 1-800-MEDICARE (1-800-633-4227).

Some examples of fraud include offers for free medical services or billing you for Medicare services you didn't get. If we determine that your tip led to uncovering fraud, you may qualify for a reward.

You're getting a New Medicare Card. Once you get your new Medicare card, start using it right away, and destroy your old card. Your new card will have a new number that's unique to you.

How to Get Help with Your Questions

1-800-MEDICARE (1-800-633-4227)

Ask for "doctors services." Your customer-service code is 03102.

TTY 1-877-486-2048 (for hearing impaired)

Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call **1-800-432-4040**.

Medicare Preventive Services

Medicare covers many free or low-cost exams and screenings to help you stay healthy. For more information about preventive services:

- Talk to your doctor.
- Look at your "Medicare & You" handbook for a complete list.
- Visit www.MyMedicare.gov for a personalized list.

Your Messages from Medicare

To report a change of address, call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.

Save tax dollars and trees by getting your Medicare & You handbook electronically. Visit <https://www.medicare.gov/forms-help-and-resources/e-delivery.html> to sign up today.

Prostate cancer is the second leading cause of cancer deaths in men. Medicare helps pay for prostate cancer screenings once every 12 months, for men over age 50. Talk to your doctor about getting checked.

Medicare eBooks give you fast and free information at your fingertips! They can be viewed on all types of eReaders, such as the iPad or Kindle, and we add new eBooks all the time. Find them at <https://www.medicare.gov/pubs/ebook/ebooks.html>.

How to Handle Denied Claims or File an Appeal

Get More Details

If a claim was denied, call or write the hospital or facility and ask for an itemized statement for any claim. Make sure they sent in the right information. If they didn't, ask the facility to contact our claims office to correct the error. You can ask the facility for an itemized statement for any item or claim.

Call 1-800-MEDICARE (1-800-633-4227) for more information about a coverage or payment decision on this notice, including laws or policies used to make the decision.

If You Disagree with a Coverage Decision, Payment Decision, or Payment Amount on this Notice, You Can Appeal

Appeals must be filed in writing. Use the form to the right. Our claims office must receive your appeal within 120 days from the date you get this notice.

We must receive your appeal by:

July 12, 2018

If You Need Help Filing Your Appeal

Contact us: Call 1-800-MEDICARE or your State Health Insurance Program (see page 2) for help before you file your written appeal, including help appointing a representative.

Call your facility: Ask your facility for any information that may help you.

Ask a friend to help: You can appoint someone, such as a family member or friend, to be your representative in the appeals process.

Find Out More About Appeals

For more information about appeals, read your "Medicare & You" handbook or visit us online at www.medicare.gov/appeals.

File an Appeal in Writing

Follow these steps:

- 1 Circle the service(s) or claim(s) you disagree with on this notice.
- 2 Explain in writing why you disagree with the decision. Include your explanation on this notice or, if you need more space, attach a separate page to this notice.
- 3 Fill in all of the following:

Your or your representative's full name (print)

Your or your representative's signature

Your telephone number

Your complete Medicare number

- 4 Include any other information you have about your appeal. You can ask your facility for any information that will help you.
- 5 Write your Medicare number on all documents that you send.
- 6 Make copies of this notice and all supporting documents for your records.
- 7 Mail this notice and all supporting documents to the following address:

Medicare Claims Office
c/o Noridian Healthcare Solutions, LLC
P.O. Box 6730 - Attn: Appeals
Fargo ND 58108-6730

January 24, 2018/Smsj Tucson Holdings LLC continued...

Service Provided & Billing Code	Service Approved?	Amount Facility Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Ringers lactate infusion, up to 1000 cc (J7120)	Yes	130.00	130.00	0.00	0.00	B
Med-Sur Supplies	Yes	5,305.20	5,305.20	0.00	0.00	B
Catheter, balloon tissue dissector, non-vascular (insertable) (C1727)	Yes	13,256.40	13,256.40	0.00	0.00	B
Supply/Implants	Yes	2,415.80	2,415.80	0.00	0.00	B
Mesh (implantable) (C1781)	Yes	4,794.20	4,794.20	0.00	0.00	B
Red blood cell concentration measurement (85014)	Yes	120.70	120.70	0.00	0.00	B,C
Repair of groin hernia using an endoscope (49650-50)	Yes	28,947.20	28,947.20	3,568.75	910.39	
Anesthesia	Yes	3,825.60	3,825.60	0.00	0.00	B
Injection, cefazolin sodium, 500 mg (J0690)	Yes	27.00	27.00	0.00	0.00	B
Injection, dexamethasone sodium phosphate, 1 mg (J1100)	Yes	105.10	105.10	0.00	0.00	B
Injection, meperidine hydrochloride, per 100 mg (J2175)	Yes	5.60	5.60	0.00	0.00	B
Injection, midazolam hydrochloride, per 1 mg (J2250)	Yes	81.40	81.40	0.00	0.00	B
Injection, ondansetron hydrochloride, per 1 mg (J2405)	Yes	89.00	89.00	0.00	0.00	B
Injection, metoclopramide hcl, up to 10 mg (J2765)	Yes	71.50	71.50	0.00	0.00	B
Injection, fentanyl citrate, 0.1 mg (J3010)	Yes	101.70	101.70	0.00	0.00	B
Non-covered item or service (A9270-GY)	NO	17.70	0.00	0.00	17.70	D
Non-covered item or service (A9270-GY)	NO	15.30	0.00	0.00	15.30	D

ENV 9588 2 OF 4 B

Claim # 21802901458707AZA

(continued)

Continued →

Notes for Claims Above

- B** Payment is included in another service received on the same day.
- C** Local coverage determinations (LCDs) help Medicare decide what is covered. An LCD was used for your claim. You can compare your case to the LCD, and send information from your doctor if you think it could change our decision. Call 1-800-MEDICARE (1-800-633-4227) for a copy of the LCD. The following policies were used when we made this decision: 190.15
- D** Medicare does not pay for this item or service.

Making the Most of Your Medicare

🔍 How to Check This Notice

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Did you get the claims listed? Do they match those listed on your receipts and bills?

If you already paid the bill, did you pay the right amount? Check the maximum you may be billed. See if the claim was sent to your Medicare supplement insurance (Medigap) plan or other insurer. That plan may pay your share.

! How to Report Fraud

If you think a facility or business is involved in fraud, call us at 1-800-MEDICARE (1-800-633-4227).

Some examples of fraud include offers for free medical services, or billing you for Medicare services you didn't get. If we determine that your tip led to uncovering fraud, you may qualify for a reward.

Only your physician can order medical equipment for you.

📞 How to Get Help with Your Questions

1-800-MEDICARE (1-800-633-4227) Ask for "hospital services." Your customer service code is 03001.

TTY 1-877-486-2048 (for hearing impaired)

Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call 1-800-432-4040.

📧 Your Messages from Medicare

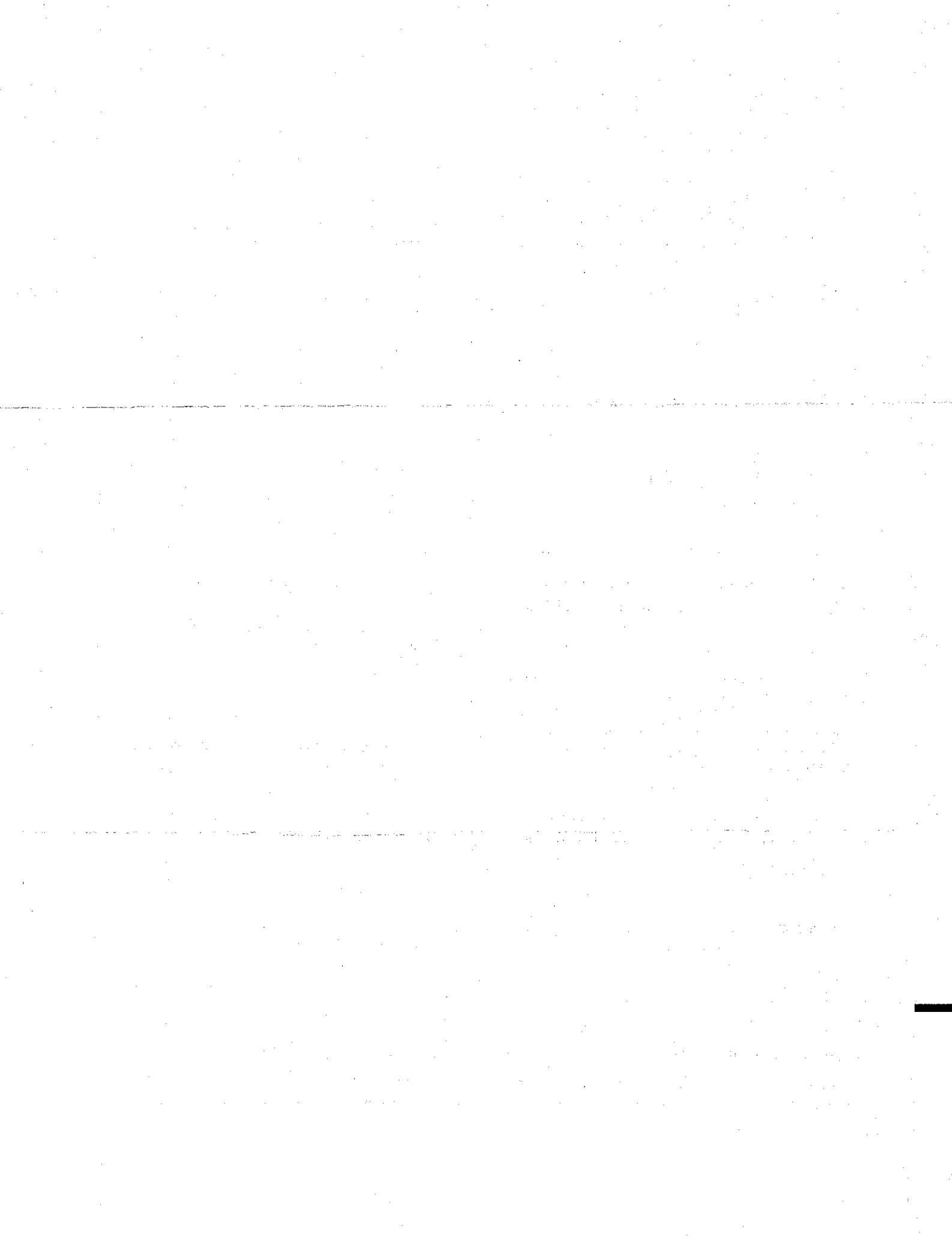
You dont need to do anything to get your new Medicare card. Beware of anyone who contacts you about your new Medicare card or asks for your personal information.

Medicare covers many preventive services, such as pap tests and glaucoma tests. Check your Medicare & You handbook or visit Medicare.gov to learn more about covered preventive services.

Get a pneumococcal shot. You may only need it once in a lifetime. Contact your health care provider about getting this shot. You pay nothing if your health care provider accepts Medicare assignment.

To report a change of address, call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.

ENV 9588 1 OF 4 B



February 09, 2018

Tucson Phys Grp Holdings LLC, (520)622-5912

PO Box 204539, Dallas, TX 75320-4539

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Moukabary, Talal, M.D.						
Evaluation, testing, and programming adjustment of permanent dual lead pacemaker system with physici (93280-26) professional charge	Yes	\$93.00	\$37.05	\$29.05	\$7.41	R,S
Total for Claim #19-18046-412-960		\$93.00	\$37.05	\$29.05	\$7.41	T

February 09, 2018

Tucson Phys Grp Holdings LLC, (520)622-5912

PO Box 204539, Dallas, TX 75320-4539

Referred by Ofori, Stanley

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Habibzadeh, Mohammad R., M.D.						
Established patient office or other outpatient, visit typically 40 minutes (99215)	Yes	\$354.00	\$138.96	\$108.95	\$27.79	R,S
Total for Claim #19-18045-459-670		\$354.00	\$138.96	\$108.95	\$27.79	T

Notes for Claims Above

- R** This claim shows a quality reporting program adjustment.
- S** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.
- T** We have sent your claim to your Medigap insurer. Send any questions regarding your benefits to them. Your Medigap insurer is UNITEDHEALTH GROUP.

January 24, 2018

Tucson Phys Grp Holdings LLC, (520)622-5912
PO Box 204539, Dallas, TX 75320-4539

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Levine, Brian J., M.D.						
Repair of groin hernia using an endoscope (49650-50)	Yes	\$1,076.00	\$641.72	\$496.85	\$134.73	K,L
Total for Claim #19-18029-579-150		\$1,076.00	\$641.72	\$496.85	\$134.73	M

February 08, 2018

Sean J Mccafferty MD, PC, (520)327-3487
6422 E Speedway Blvd 100, Tucson, AZ 85710-1151
Referred by Ofori, Stanley

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Levine, Jason M., M.D.						
Eye and medical examination for diagnosis and treatment, established patient, 1 or more visits (92014)	Yes	\$220.00	\$121.21	\$95.03	\$24.24	L,N
Photography of the retina (92250)	Yes	160.00	54.96	43.09	10.99	L,N

Claim #19-18043-314-000

(continued)

Continued →

Notes for Claims Above

- K** \$7.98 of this approved amount has been applied toward your deductible.
- L** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.
- M** We have sent your claim to your Medigap insurer. Send any questions regarding your benefits to them. Your Medigap insurer is UNITEDHEALTH GROUP.
- N** This claim shows a quality reporting program adjustment.

January 16, 2018

Tucson Phys Grp Holdings LLC, (520)622-5912
PO Box 204539, Dallas, TX 75320-4539
Referred by Ofori, Stanley

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Dr. Levine, Brian J., M.D.						
New patient office or other outpatient visit, typically 20 minutes (99202)	Yes	\$185.00	\$74.01	\$0.00	\$74.01	D
Total for Claim #19-18022-523-800		\$185.00	\$74.01	\$0.00	\$74.01	E

January 24, 2018

Arizona First Assistants, (520)318-6039
PO Box 42123, Tucson, AZ 85733-2123
Referred by Levine, Brian J

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Courtier, Patricia, CNS						
Repair of groin hernia using an endoscope (49650-5080AS) assistant surgeon	Yes	\$371.11	\$87.27	\$68.42	\$17.45	F
Total for Claim #19-18039-470-620		\$371.11	\$87.27	\$68.42	\$17.45	E

Continued →

Notes for Claims Above

- D** This approved amount has been applied toward your deductible.
- E** We have sent your claim to your Medigap insurer. Send any questions regarding your benefits to them. Your Medigap insurer is UNITEDHEALTH GROUP.
- F** After your deductible and coinsurance were applied, the amount Medicare paid was reduced due to Federal, State and local rules.

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Medicare Preventive Services

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- Look at your "Medicare & You" handbook for a complete list.
- Visit www.MyMedicare.gov for a personalized list.

Your Messages from Medicare

You don't need to do anything to get your new Medicare card. Beware of anyone who contacts you about your new Medicare card or asks for your personal information.

Medicare covers many preventive services, such as pap tests and glaucoma tests. Check your Medicare & You handbook or visit Medicare.gov to learn more about covered preventive services.

Get a pneumococcal shot. You may only need it once in a lifetime. Contact your health care provider about getting this shot. You pay nothing if your health care provider accepts Medicare assignment.

To report a change of address, call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.