



Social Sec. No.	Date of Birth	Gender	Consulted	Injured	Group	Insured Id
613-72-6221	11/03/1965	Female			126927	121-58-0500
Claim	Claim Date					
010004-063956	03/23/2006					

### Addresses

Patient	Insured	Employer	Address	City/State/Zip
Stacey L. Sietsma	William (Bill) G. Arsenault	Nationwide financial	3810 Brookwood Rd	Columbus OH 79199
			2589 Brookwood Rd	Columbus OH 43209

**Carrier:** UHC-MetraHealth  
 PO Box 740800  
 Atlanta GA 30374-0800

### Diagnosis Codes

Dx Index	Dx Code	Description
1	719.45	Pain In Joint Involving Pelvic Region And Thigh

### Transactions

Code	Dx Index	Date	Description	Dr Id /Ref	Charge
99214	1	03/23/2006	Office Visit, Established Fourth Level	JEM	115.00

It has come to our attention that this claim for our patient has not been satisfied. In order to satisfactorily adjust our records, we request that you supply the following information.

### Claim Information

<b>Claim Pending Because</b>		<b>Payment Of Claim In Process</b>	
<b>Date Payment Was Made</b>	<b>To Whom</b>	<b>Claim Denied (Reason)</b>	
<b>Patient Notified</b>		<b>Remarks</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No			

Thank you in advance for your prompt assistance in this important matter.