

MedProvider Suite 206

3434 Swiss Ave. Suite 206, Dallas, TX 75204

(214) 828-5775 Fax: (214) 828-5777

01/30/2013 03:25 PM

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Super Bill

Patient Information:Patient: **PLOCK, ROBERT A**Address: **6827 LATTA PARKWAY
DALLAS, TX 75227-0000**Home Phone: **(214)275-4195**Work Phone: **(214)799-7775**Resp. Provider: **William Thomas Christensen MD**Gender: **Male**DOB: **7/26/1968**Patient ID: **256170-0171001**Last PM ID: **7235396**

EHR #:

Insurance:Primary Ins: **UMR - 00177**Plan: **0017190**Policy #: **13280912**Group #: **76410892**Phone: **(866)881-0111**

Fax:

Contact:

Secondary Ins:

Plan:

Policy #:

Group #:

Phone:

Fax:

Contact:

Provider: **William Thomas Christensen M** Status: **On Hold**Document ID: **50**Clinical Date: **01/30/2013**Location of Care: **MEDPRO**Visit ID: **003478206 00005**Summary: **IM OV BACK AND NECK****Service Orders**

<u>Code</u>	<u>Description</u>	<u>Order No</u>	<u>Units</u>	<u>Diagnoses</u>	<u>Priority</u>	<u>Status</u>
CPT-99214	99214 est detailed	6340119-1	1	BACK PAIN(ICD-724.5)		U

Service Provider:

Order Authorized By: **William Thomas Christensen MD**

Order Signed By:

Order Signed On:

Comments: **return in 1 month**

2ND
VISIT
DR'S
Office

Report run by Nancy Sanders POR

<input type="checkbox"/> Medicare	<input type="checkbox"/> Medicaid	<input type="checkbox"/> HMO
<input type="checkbox"/> Account	<input type="checkbox"/> Patient	<input type="checkbox"/> PPO/POS

Order Status: I - In Process U - Unsigned H - Admin Hold X - Canceled C - Completed

Note: When ordering tests for which reimbursement (including Medicare or Medicaid) will be sought, providers authorized by law to order tests should only order tests that are medically necessary for the diagnosis or treatment of the patient.