



ROBERT PLOCK
6827 LATTA PKWY
DALLAS TX 75227-6043

09/13/2013

OFFICE PHONE: 877-224-2641x2779457
OFFICE HOURS: MONDAY-FRIDAY 8:00-5:30

ALLSTATE INSURANCE COMPANY

RE: Claim Number: 0291823375
Policyholder: ROBERT PLOCK
Date of Loss: 01/25/2013
Provider: Umr

I recently received a bill for treatment following the accident that occurred on the date shown above.

I have reviewed the bill to make sure it is payable according to the provisions of the policy under which the claim was made and applicable regulatory requirements. Based on a review of the information submitted, I have sent your health care provider a check for an amount less than the billed charges along with an Explanation of Benefits outlining the reasons for partial payment. A copy is enclosed for your records.

If this reduction is due to a disagreement between the health care provider and us about the treatment provided or charges for treatment, it is our goal to spare you unnecessary involvement in disputes about bill payment. In most instances, the health care provider simply accepts the reduced payment, but in the event that your provider or a representative contacts you regarding the unpaid portion of the bill, please refer that person to me.

If you have any questions or concerns about this matter, please contact me at (877) 224-2641 ext 2779457.

Mark McPhail

Mark McPhail
Allstate Property Casualty Claim Service Organization

**OPTUM - Subrogation
Services for
Health Ins. Co's.**

MAF

10/04/2013 >

Danny AT Allstate

Take it with UMR.

**CASE Number
22376351**

**Scott - UMR - Mr. ~ From UMR Subrogation
9528336338 -
Subrogation Services - Hugh P. - sketchy -**



PO BOX 440519
 KENNESAW GA 30160

EXPLANATION OF MEDICAL BILL PAYMENT
Service Provided For:

 ROBERT PLOCK
 6827 LATTA PKWY
 DALLAS TX 75227-6043

Date: 09/13/2013

Bill Received Date: 08/30/2013

Claim #: 0291823375-01

File Handler: CMM

Invoice #: 22376351

Injured Person: ROBERT PLOCK

Treatment Rendered By: UMR

Provider Specialty:
TIN: 41-1858498

NPI:
CMS ID:
Diagnosis Codes/Present on Admission Indicator

724.5	BACKACHE, UNSPECIFIED	723.4	BRACHIAL NEURITIS OR RADICULITIS NOS
724.2	LUMBAGO	780.4	DIZZINESS AND GIDDINESS
729.2	NEURALGIA, NEURITIS, AND RADICULITIS,		

Date Of From	Service(s) Thru	Procedure/Revenue/NDC Code/Modifier	Description	Units	Billed Amount	Covered Amount	Reason Code (s)
01/30/13	01/30/13	99214	Office or other outpatient	1.00	\$ 170.00	\$ 0.00	X202
02/08/13	02/08/13	99214	Office or other outpatient	1.00	\$ 170.00	\$ 0.00	X202
02/13/13	02/13/13	97110	Therapeutic procedure, 1	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
02/13/13	02/13/13	97112	Therapeutic procedure, o	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
02/13/13	02/13/13	97001	Physical therapy evaluat	1.00	\$ 270.38	\$ 0.00	X202
		0424	Physical Therapy - Evalu				
02/18/13	02/18/13	97112	Therapeutic procedure, o	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
02/18/13	02/18/13	97110	Therapeutic procedure, 1	3.00	\$ 259.65	\$ 0.00	X202
		0420	Physical Therapy - Gener				
02/27/13	02/27/13	97110	Therapeutic procedure, 1	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
02/27/13	02/27/13	97112	Therapeutic procedure, o	2.00	\$ 173.10	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/04/13	03/04/13	97140	Manual therapy technique	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/04/13	03/04/13	97110	Therapeutic procedure, 1	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/04/13	03/04/13	97112	Therapeutic procedure, o	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/04/13	03/04/13	99213	Office or other outpatient	1.00	\$ 105.00	\$ 0.00	X202
03/20/13	03/20/13	97110	Therapeutic procedure, 1	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/20/13	03/20/13	97002-59	Physical therapy re-eval	1.00	\$ 80.29	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/20/13	03/20/13	97012	Application of a modalit	1.00	\$ 51.60	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/29/13	03/29/13	97110	Therapeutic procedure, 1	2.00	\$ 173.10	\$ 0.00	X202
		0420	Physical Therapy - Gener				
03/29/13	03/29/13	97112	Therapeutic procedure, o	2.00	\$ 173.10	\$ 0.00	X202
		0420	Physical Therapy - Gener				
04/02/13	04/02/13	97110	Therapeutic procedure, 1	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
04/02/13	04/02/13	97112	Therapeutic procedure, o	3.00	\$ 259.65	\$ 0.00	X202
		0420	Physical Therapy - Gener				
04/05/13	04/05/13	99213	Office or other outpatient	1.00	\$ 105.00	\$ 0.00	X202
04/12/13	04/12/13	97110	Therapeutic procedure, 1	1.00	\$ 86.55	\$ 0.00	X202
		0420	Physical Therapy - Gener				
04/12/13	04/12/13	97112	Therapeutic procedure, o	3.00	\$ 259.65	\$ 0.00	X202

(over)



P3 Anesthesia for patient with severe systemic disease

If you have any questions about this claim, please contact your file handler,
MARK MCPHAIL at (877) 224-2641 ext 2779457

Payment for \$ 2500.00 was made on 09/13/2013 to:
UMR

Copy(s) of this Explanation of Benefits has been sent to:

ROBERT PLOCK, 6827 LATTA PKWY DALLAS, TX, 75227-6043

UMR, 75 REMITTANCE DRIVE CHICAGO, IL, 60675

10/04/2013
Rachael Sterling In Health Insurance Subrogation

Subrogation Claim Submitted by Scott -

Not received as of 10/04/2013

TO ME

Will forward subrogation clause and payment
received info whenever it is received

