
TRANSACTION AND PREDETERMINATION INFORMATION

7\SH RI 7UDQVDFWLRQ ODUN DOO \$SSOLFDEOH %R[HV

 6WDWHPHQW RI \$FWXD 65HUTYLFWWW IRU 3UHGHWHUPLQDWLRQ 3

SUBSCRIBER INFORMATION

3ROLF\KROGHU 6XEVFULEHU 1DPH /DVW)LUVW 0LGGOH

,QLWUHQHWXUHQDWHQW

3UH WUHDWPHQI

(VWLPDWKH 1XPE..)

'DWH RI %LUWK	<input type="checkbox"/> 00''&&<< <input type="checkbox"/> 0 <input type="checkbox"/>	*HQGHU	3ROLF\KROGHU 6XEVFULEHU , 661 RU ,'
3ODQ RU *URXS 1XPEHU	(PSOR\HU 1DPH		

PATIENT INFORMATION5HODWLQRQVKLS WR 3ROLF\KROGHU 6XEVFULEHU LQ \$ERYH
 6SRXVH 'HSHQGHQW &KLOG 2WKHU0RQWKV RI 5HSODFPHQW RI 3URVWKHVLV" 'DWH RI 3U
7UHDWPHQW 5HPDLQLQJ 1R <HV &RPSOHWH

3DWLHQW 1DP "3A VD0DWLHQW *XDUGLDQ VLJQDWXUH

'DWH

), KHUHE\ DXWKRULJH DQG GLUHFW SD\PHQW RI WKH GHQWDO EHQBILW
GHQWLWV RU GHQWDO HQWLW\

: 6XEVFULEHU VLJQDWXUH 'DWH

TREATING DENTIST AND TREATMENT LOCATION INFORMATION, KHUHE\ FHUWLJ\ WKDW WKH SURFHGXUHV DV LQGLFDWHG E\ GDW
YLVLWV RU KDYH EHHQ FRPSOHWHG**BILLING DENTIST OR DENTAL ENTITY**

'HQWLWV RU (QWLW\ 1DPH \$GGUHVV &LW\ 6WDWH

; =,3 &RGH 6LJQHG 7UHDWLRQ 'HQWLWV 'DWH

7UHDWPHQW /RFDWLRQ \$GGUHVV &LW\ 6WDWH =,3 &

13,

/LFHQVH
1XPEHU661
RU
7,13KRQH
1XPEHU\$GGLWLRQDO
3URYLGHU ,'

13,

/LFHQVH
1XPEHU3URYLGHU
6SHFLDOW\&RGH3KRQH
1XPEHU

