



HMA Healthcare Assistant
VOUCHER
 Service Date: N/A
 Valid From :12/15/2020 - 01/05/2021
 VOUCHER ID: #12-12-Coral-Test1234-1-38-2

<p>Patient Name: Jon Hyatt</p> <p>ID Number: Test1234</p> <p>Date of Birth: 11/11/1986</p> <p>E-Mail: jonathan@coral.io</p> <p>Phone: 405-227-2110</p>	<p>We're here to help, Please Contact Us!</p> <p>Contact HMA-Advanta at 866-206-7920 if your appointment date is rescheduled or changed.</p>
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IMPORTANT PATIENT INFORMATION:

Contact your provider to find out how to prepare for your procedure. Make sure you follow all pre-appointment instructions.

Failure to follow instructions may lead to an incomplete or rescheduled procedure.

Contact HMA-Advanta at 866-206-7920 if your appointment date is rescheduled or changed.

This voucher is only valid on the date listed for the specified procedure. A new voucher will be issued if any information is changed.

Please bring your doctors orders to any appointments.

PROCEDURE DETAILS:

PROCEDURE DESCRIPTION	CPT CODE(S)	DRG CODE(S)	UNITS
knee-bilateral knee scope	29877-50,29881-50,29880-50		1

Provider Name:

Surgery Center of Oklahoma

YOUR RESPONSIBILITY: 0.00

Service Address: **9500 No. Broadway Extension, Oklahoma City, OK, 73114**

ABOUT YOUR PROCEDURE

The bundled price includes provider fees for the above listed procedure(s). Other services provided at the same time as the listed procedure(s) may not be covered under the bundled price. These services could include: additional or advanced testing, added procedures, more specialized physicians, etc. If you require additional services during the time of service, please contact us! We may be able to add the additional services to this bundle to ensure there is no cost to you.

FOR PROVIDER USE ONLY		
<p>Claims should not be filed per the information on the patient's card. Please send invoices through Coral, to HMA for the above services.</p>	<p>Pre-Certification: Qualified High Deductible Plan: Amount Provider Should Collect on Date of Service:</p>	<p>Not Required No 0.00</p>