

Coventry Healthcare Member Portal - Coventry Healthcare - Claim Details

- **Details**

- **Claim Status:**PAID
- **Claim Number:** 8277261
- **Member Name:**GEORGE K FLANAGIN
- **Member ID:**85114211302
- **Provider Name:**HENRICO DOCTORS HOSPITAL
- **Provider Type:**HOSPITAL FACILITY

- **Diagnosis**

- **722.0:**CERV DISC DISPLACEMENT
- **723.0:**CERVICAL SPINAL STENOSIS
- **722.4:**CERVICAL DISC DEGEN

- **Service Dates**

- **From Date:**10/08/2009
- **To Date:**

- **History**

- **Received Date:**10/08/2009
- **Pended Date:**
- **Denied Date:**
- **Approved Date:**10/15/2009

- **Payment Info**

- **Amount Billed:**\$137,401.92
- **Amount Paid:**\$45,986.50
- **Issue Date:**10/16/2009
- **Payment Type:**EFT
- **Payment Numbers:**EFT2320746
- **Paid To:**HENRICO DOCTORS HOSPITAL
- **Paid Date:**10/15/2009
- **Presented Date:**10/18/2009
- **Payment Status:**

- **Patient Responsibility**

- **Deductible Amount:**\$0.00
- **Coinsurance Amount:**\$965.93
- **Copayment Amount:**\$0.00
- **Explanation of Benefits: [How to read your EOB \(http://member.cvtv.com/memberPortalWeb/com/cvtv/member/portlet/viewEOB/getEOBLink.do?paraEOB= MemberId 85114211302 ClaimNumber 8277261 VendorName REGULUS\)](http://member.cvtv.com/memberPortalWeb/com/cvtv/member/portlet/viewEOB/getEOBLink.do?paraEOB= MemberId 85114211302 ClaimNumber 8277261 VendorName REGULUS)**
- **Benefit Riders:**[View Benefit Riders Info \(member_portal_page SOB\)](#)
- **Schedule Of Benefits:**[View Schedule of Benefits \(member_portal_page SOB\)](#)

#	Service	Description	Refill Detail			Disposition
			Date	Billed	Paid	
1	U250	PHARMACY-GENERAL	09/08/2009	\$4,806.43	\$0.00	Line Billed Amount\$4,806.43 DispositionAllowed Amount REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$4,806.43 Line Paid Amount\$0.00
2	U258	PHARMACY-IV SOLUTIONS	09/08/2009	\$1,880.00	\$0.00	Line Billed Amount\$1,880.00 DispositionAllowed Amount REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$1,880.00 Line Paid Amount\$0.00
3	U250	PHARMACY-GENERAL	09/09/2009	\$98.59	\$0.00	Line Billed Amount\$98.59 DispositionAllowed Amount REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$98.59 Line Paid Amount\$0.00
4	U270	MED/SURG SUPPLIES & DEVICES-GENERAL	09/08/2009	\$1,826.25	\$0.00	Line Billed Amount\$1,826.25 DispositionAllowed Amount REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$1,826.25 Line Paid Amount\$0.00
5	U272	MED/SURG SUPPLIES & DEVICES-STERILE SUPPLY	09/08/2009	\$6,172.75	\$0.00	Line Billed Amount\$6,172.75 DispositionAllowed Amount REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$6,172.75 Line Paid Amount\$0.00
6	C1713,U278	MED/SURG SUPPLIES & DEVICES-OTHER IMPLANTS	09/08/2009	\$51,214.25	\$17,983.34	Line Billed Amount\$51,214.25 DispositionAllowed Amount COI-MEMBER COINSURANCE APPLIED\$965.93

#	Service	Description	Date	Billed	Paid	Disposition
						APPROVED\$17,983.34 REJ-\$ ABOVE CONTRACTUAL ALLOWANCES\$32,264.98 Line Paid Amount\$17,983.34 Line Billed Amount\$20,818.00 DispositionAllowed Amount
7	U278	MED/SURG SUPPLIES & DEVICES-OTHER IMPLANTS	09/08/2009	\$20,818.00	\$7,702.66	APPROVED\$7,702.66 REJ-\$ ABOVE CONTRACTUAL ALLOWANCES\$13,115.34 Line Paid Amount\$7,702.66 Line Billed Amount\$87.25 DispositionAllowed Amount
8	81001,U307	URINALYSIS BY STICK OR TABLET AUTOMATED W/MICROSCOPY	09/08/2009	\$87.25	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$87.25 Line Paid Amount\$0.00 Line Billed Amount\$20,500.20 DispositionAllowed Amount
9	22554,U360	ARTHRODESIS, ANTERIOR INTERBODY TECH CERV BELOW C2	09/08/2009	\$20,500.20	\$1,845.50	REJ-\$ ABOVE CONTRACTUAL ALLOWANCES\$18,654.70 APP-MR-MODIFIER ADDED FOR MULTIPLE PROCEDURES\$1,845.50 Line Paid Amount\$1,845.50 Line Billed Amount\$5,125.05 DispositionAllowed Amount
10	22585,U360	ARTHRODESIS.ANTERIOR TECH, EA. ADDL.	09/08/2009	\$5,125.05	\$3,691.00	APPROVED\$3,691.00 REJ-\$ ABOVE CONTRACTUAL ALLOWANCES\$1,434.05 Line Paid Amount\$3,691.00 Line Billed Amount\$3,416.70 DispositionAllowed Amount
11	63075,U360	EXC IV DISK CERV ANT 1 SPACE	09/08/2009	\$3,416.70	\$3,691.00	

#	Service	Description	Date	Billed	Paid	Disposition
						APPROVED\$3,691.00 REJ-\$ ABOVE CONTRACTUAL ALLOWANCE-\$274.30 Line Paid Amount\$3,691.00 Line Billed Amount\$1,708.35 DispositionAllowed Amount
12	63076,U360	EXC IV DISK CERVL ANT GT 1 SPACE	09/08/2009	\$1,708.35	\$3,691.00	APPROVED\$3,691.00 REJ-\$ ABOVE CONTRACTUAL ALLOWANCE-\$1,982.65 Line Paid Amount\$3,691.00 Line Billed Amount\$1,708.35 DispositionAllowed Amount
13	22851,U360	APPL INTERVERTEBRAL BIOMECH DEV TO VERTEBRAL DEFECT/INTERSPACE	09/08/2009	\$1,708.35	\$5,536.50	APPROVED\$5,536.50 REJ-\$ ABOVE CONTRACTUAL ALLOWANCE-\$3,828.15 Line Paid Amount\$5,536.50 Line Billed Amount\$1,708.35 DispositionAllowed Amount
14	20931,U360	ALLOGRAFT FOR SPINE SURGERY, STRUCTURAL	09/08/2009	\$1,708.35	\$1,845.50	APPROVED\$1,845.50 REJ-\$ ABOVE CONTRACTUAL ALLOWANCE-\$137.15 Line Paid Amount\$1,845.50 Line Billed Amount\$6,722.00 DispositionAllowed Amount
15	U370	ANESTHESIA-GENERAL	09/08/2009	\$6,722.00	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCE\$6,722.00 Line Paid Amount\$0.00 Line Billed Amount\$297.00 DispositionAllowed Amount
16	97001,U424	PT EVALUATION	09/09/2009	\$297.00	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL

#	Service	Description	Date	Billed	Paid	Disposition
						ALLOWANCES\$297.00 Line Paid Amount\$0.00 Line Billed Amount\$108.00 DispositionAllowed Amount
17	97535,U430	SELF-CARE/HOME MGMT TRAINING DIRECT EA.15 MIN	09/09/2009	\$108.00	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$108.00 Line Paid Amount\$0.00 Line Billed Amount\$297.00 DispositionAllowed Amount
18	97003,U434	OT EVALUATION	09/09/2009	\$297.00	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$297.00 Line Paid Amount\$0.00 Line Billed Amount\$752.00 DispositionAllowed Amount
19	J7120,U636	RINGERS LACTATE INFUSION, UP TO 1000 CC	09/08/2009	\$752.00	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$752.00 Line Paid Amount\$0.00 Line Billed Amount\$726.20 DispositionAllowed Amount
20	J2271,U636	INJECTION, MORPHINE SULFATE, 100 MG	09/08/2009	\$726.20	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$726.20 Line Paid Amount\$0.00 Line Billed Amount\$609.24 DispositionAllowed Amount
21	J0690,U636	INJECTION, CEFAZOLIN SODIUM, 500 MG	09/08/2009	\$609.24	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$609.24 Line Paid Amount\$0.00 Line Billed Amount\$304.62 DispositionAllowed Amount
22	J0690,U636	INJECTION, CEFAZOLIN SODIUM, 500 MG	09/09/2009	\$304.62	\$0.00	REJ-AMOUNT

#	Service	Description	Date	Billed	Paid	Disposition
						INCLUDED IN CONTRACTUAL ALLOWANCES\$304.62 Line Paid Amount\$0.00 Line Billed Amount\$256.56 DispositionAllowed Amount
23	J3010,U636	INJECTION,FENTANYL CITRATE, 0.1 MG[SUBLIMAZE]	09/08/2009	\$256.56	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$256.56 Line Paid Amount\$0.00 Line Billed Amount\$129.77 DispositionAllowed Amount
24	J2405,U636	INJECTION, ONDANSETRON HCL, PER 1 MG [ZOFRAN]	09/08/2009	\$129.77	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$129.77 Line Paid Amount\$0.00 Line Billed Amount\$84.22 DispositionAllowed Amount
25	J2250,U636	INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1MG	09/08/2009	\$84.22	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$84.22 Line Paid Amount\$0.00 Line Billed Amount\$83.28 DispositionAllowed Amount
26	J0330,U636	INJECTION,SUCCINYLMCHOLINE CHLORIDE, UP TO 20MG(USE FOR ANECTINE,QUELICIN)	09/08/2009	\$83.28	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$83.28 Line Paid Amount\$0.00 Line Billed Amount\$75.75 DispositionAllowed Amount
27	J1170,U636	HYDROMORPHONE [DILAUDID], UP TO 4 MG - INJECTION	09/08/2009	\$75.75	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$75.75 Line Paid Amount\$0.00 Line Billed Amount\$38.76 DispositionAllowed
28	J1100,U636	INJECTION, DEXAMETHASONE SODIUM PHOSPHATE, 1 MG	09/08/2009	\$38.76	\$0.00	

#	Service	Description	Date	Billed	Paid	Disposition
						Amount REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$38.76 Line Paid Amount\$0.00
						Line Billed Amount\$5,847.00 DispositionAllowed Amount
29	U710	RECOVERY ROOM- GENERAL	09/08/2009	\$5,847.00	\$0.00	REJ-AMOUNT INCLUDED IN CONTRACTUAL ALLOWANCES\$5,847.00 Line Paid Amount\$0.00