

# Blue Medicare PPO<sup>SM</sup>

## Provider Remittance Advice

Not all relevant claims processing information is contained on this statement. For additional information refer to the link to Blue Medicare PPO at [www.bcbstx.com/provider](http://www.bcbstx.com/provider). This report contains privileged and confidential information concerning Blue Medicare PPO members. If you are not the intended recipient, please contact us by mail at P.O. Box 3567, Scranton, PA 18503, by telephone for provider customer service at 1-866-706-7745, for member customer service at 1-800-718-2031. Customer Service hours are Mon-Fri 8:00am - 5:00pm in your time zone.

Servicing Provider Name:

Payee Name:

Patient and Services Information												
Dates of Service	Proc/Rev Code	Amount Billed	Amount Allowed	Adjusted	Primary Payor Pmt	Patient Responsibility				Interest Owed	Plan Payment	Remarks
						Ded-Amt	Co-Pay	Co-Insr	Non Cvr'd			

Account Number				Subscriber #				TEXAS BLUE MEDICARE PPO			
Patient Name				Claim Id							

Claim totals for:

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Provider total:

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### Payment Summary

Payment Date:	Total Charged:
Check # :	Total Denied:
Paid To:	Total Allowed:
Tax ID:	Total Paid:
Reference Id:	Total Other :
	Provider Pre/Over Payment Balance Used:
	Provider Pre/Over Payment Balance Original:
	Provider Pre/Over Payment Balance Remaining:

Explanation of Claims Handling

Blue Medicare PPO is a Medicare Advantage plan offered by HCSC Insurance Services Company, an independent licensee of the Blue Cross and Blue Shield Association.

<sup>SM</sup>Service Mark of the Blue Cross and Blue Shield Association, an Association of Independent Blue Cross and Blue Shield Plans.