

Medicare Patient Report

Part B: Medical, Non-Hospital Services



Beneficiary Name
Street Address
City, State, Zip Code+4

Your Medicare Account
#2124-5835-6590

Your Primary Physician is:

Dr. B. Good
National Provider Identifier# 000000000

Medicare Hotline
1-800-633-4227
1-800-MEDICARE

TTY for Hearing Impaired
1-877-486-2048

Please review your Medicare Patient Report.
Let us know how we can improve Medicare.

May 1 - August 31, 2007 (Non-Hospital Services)

Date	Medical Practitioner	Service	State Average	Fee Charged
05/19	Oncology Specialist: Dr. Strong Claim #2007-51943-45632-5	Office / Outpatient: Biopsy	\$475.00	\$430.75
06/08	Oncology Specialist: Dr. Strong Claim #2007-51943-45872-6	Office: Biopsy Checkup #2 - removed stitches	\$135.00	\$145.00
08/15	Primary Physician: Dr. B. Good Claim #2007-67382-75327-8	Office: Checkup #3	\$65.00	\$60.00
		1 Admin Flu Shot	\$3.00	\$3.15

Part B: Coverage

Medicare Part B covers basic medical services such as doctors' services, diagnostic tests, ambulance services, durable medical equipment, and other non-hospital health care services.

Total:	\$638.90
Medicare Disbursement:	\$638.90
* You May be Billed:	\$0.00

Health Notes

Consider walking everyday for at least 30 minutes.

Visit: www.advisor.gov/health/bmi/

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* This amount exceeds Medicare patient services. A private insurer may provide additional coverage. Please review Medicare coverage policies:

<http://www.medicare.gov/coverage/>