

New procedure details has been appended

Medicare.gov

Claim details

Claim information

Claim Number	Date of Admission	Provider Billing Address
22016400729507CAA	06/02/2020	505 PARNASSUS AVE
Claim Type	Type of Admission	BOX 0810,
Inpatient	1 - Emergency	SAN FRANCISCO, CA
Start Date	Benefit Days Used	94143-0810
06/02/2020	6	Provider Street Address
End Date	Operating Physician Name	UNIVERSITY OF
06/08/2020	LALANI, FARHAN	CALIFORNIA SAN FR
	Attending Physician Name	505 PARNASSUS AVE,
	LALANI, FARHAN	SAN FRANCISCO, CA
	Other Physician Name	94143-0824

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- Medicare processed the payment of this claim for Inpatient services on 6/16/2020.
 - The payment of \$33,206.26 was for services from 6/2/2020 through 6/8/2020.
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Payment summary

Total Amount Charged

\$269504.73

Total Non-Covered Charges

\$0.00

Medicare Approved

\$269504.73

Medicare Paid You

\$0.00

Medicare Paid Provider

\$33206.26

Cash Deductible

\$0.00

Co-Insurance

\$0.00**Total Amount You May Be Billed**

* Information not available, please call 1-800-Medicare (1-800-633-4227) for more details.

Procedure detailsClaim Line # **1** Procedure CodeTotal Units **6**

Start Date

Revenue Code **0200 -****General Classification****INTENSIVE CARE or (ICU)**

Amount Charged

\$164178.00

Medicare Approved

\$164178.00Claim Line # **2** Procedure CodeTotal Units **1**

Start Date

Revenue Code **0250 -****General Classification****PHARMACY**Amount Charged **\$13470.73**

Medicare Approved

\$13470.73Claim Line # **3** Procedure CodeTotal Units **1**

Start Date

Revenue Code **0270 -****General Classification****MED-SUR SUPPLIES**Amount Charged **\$3660.00**

Medicare Approved

\$3660.00Claim Line # **4** Procedure CodeTotal Units **1**

Start Date

Revenue Code **0272 -****Sterile Supply STERILE****SUPPLY**Amount Charged **\$40.00**Medicare Approved **\$40.00**

Claim Line # 5 Procedure Code	Start Date	Amount Charged \$13824.00
Total Units 1	Revenue Code 0300 - General Classification LABORATORY or (LAB)	Medicare Approved \$13824.00

Claim Line # 6 Procedure Code	Start Date	Amount Charged \$11616.00
Total Units 1	Revenue Code 0301 - Chemistry LAB/CHEMISTRY	Medicare Approved \$11616.00

Claim Line # 7 Procedure Code	Start Date	Amount Charged \$1707.00
Total Units 1	Revenue Code 0305 - Hematology LAB/HEMATOLOGY	Medicare Approved \$1707.00

Claim Line # 8 Procedure Code	Start Date	Amount Charged \$2456.00
Total Units 1	Revenue Code 0306 - Bacteriology and Microbiology LAB/BACT- MICRO	Medicare Approved \$2456.00

Claim Line # 9 Procedure Code	Start Date	Amount Charged \$840.00
Total Units 1	Revenue Code 0324 - Chest X-Ray DX X-RAY/CHEST	Medicare Approved \$840.00

Claim Line # 10 Procedure Code	Start Date	Amount Charged \$35925.00
Total Units 1	Revenue Code 0410 - General Classification RESPIRATORY SVC	Medicare Approved \$35925.00

Claim Line # 11 Procedure Code	Start Date	Amount Charged \$17628.00
Total Units 1	Revenue Code 0450 - General Classification EMERG ROOM	Medicare Approved \$17628.00

Claim Line # 12 Procedure Code	Start Date Revenue Code 0460 - General Classification PULMONARY FUNC	Amount Charged \$1372.00 Medicare Approved \$1372.00
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Claim Line # 13 Procedure Code	Start Date Revenue Code 0510 - General Classification CLINIC	Amount Charged \$2312.00 Medicare Approved \$2312.00
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Claim Line # 14 Procedure Code	Start Date Revenue Code 0730 - General Classification EKG/ECG	Amount Charged \$476.00 Medicare Approved \$476.00
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Claim Line # 15 Procedure Code	Start Date Revenue Code 0001 - Total Charges	Amount Charged \$269504.73 Medicare Approved \$269504.73
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