

Reinsurance Unit / LNR - C3 Mail Code: CA-100-03-02 health net. 21281 Burbank Blvd. Woodland Hills, CA 91367

PPG PROFESSIONAL BATCH FORM

Date Submitted: 12-06-2019

| PATIENT NAME | PPG NAME | PPG NAME | | | FOR HEALTH NET USE ONLY | | | |
|---|----------|----------|-------|-------------------|--------------------------|---------------|-------|--------------|
| SUBSCRIBER IDENTIFICATION # MEMBER CODE | | | PPG # | EMPLOYER GROUP # | | PPG EFF. DATE | | PLAN TYPE |
| SUBSCRIBER NAME | | | | TRANSF | ER/CANCEL DATE | CONTRACT TYPE | | |
| TYPE OF REQUEST FOR PAYMENT: | | | | | | | | |
| PROFESSIONAL ELIGIBILITY GUARANTEE HOSPITAL PRE-EXISTING PREGNANCY CONTACT LENS | | | | | | | | |
| AIM PROFESSIONAL IVF/GIFT/ZIFT SPECIAL RISK REINSURANCE HEARING AIL | | | | | | | | HEARING AIDS |
| ADDITIONAL INFORMATION: | | | | | | | | |
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| DATE OF SERVICE | RVS CO | DE DESCR | | BILLED CHARGES | PHYSICIAN'S LICENSE # | | COPAY | AMOUNT PAID |
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