

H E A L T H N E T
 Q/CARE PROVIDER ASSIGNMENT REGISTER - MEDI-CAL
 ELIGIBILITY PERIOD : 12/01/03 - 12/31/03

(4)

REPORT DATE : 12/15/03

ELIGIBILITY REPORT

MEMBERS WHO HAVE BEEN ELIG FOR 60 DAYS (3)

>>>>>>>>>>>> PLEASE REFER TO THE HEALTH NET MEDI-CAL MANUAL FOR KEY TO REPORTS <<<<<<<<<<<<<<<<<<

TAX ID : 233456789 - THE DOCTOR'S GROUP (5)
 PROVIDER : A088877 - TALLULAH BELLE (6)
 PROV ADDR : 7654 CROSSROADS STREET, CITY, CA ZIP

(7) PROVIDER COUNTY : 00
 COUNTY NAME

(8) MEMBER NAME ADDRESS/PHONE	(9) HN MEMBER ID	(10) D-O-B	(11) SEX	(12) 1ST ELIG EFF DATE	(13) PCP/CLNC EFF DATE	(14) ELIG STAT	(15) PRIOR PCP ID/NAME	(16) OHC CODE	(17) ETHNIC CODE	(18) LANG CODE	(19) PUB HLTH	(20) MEDI-CAL ID CIN ID (21) * = PSEUDO (22)
CHAMBERS, DIANE 7600 BOSTON BLVD, CERES, CA 05502 (000)555-8080	88811444410	11/15/77	F	09/01/03	09/01/03	(+)	A052748 PIERCE, HAWKEYE		1	7		454N8874586600 4477660QA *
CLAVEN, CLIFF 8686 BARSTOOL WAY, BEANTOWN, CA 05526 (000)555-6968	99977555500	02/28/96	M	09/01/03	09/01/03	(+)	A037482 BURNS, FRANK		2	7		85665885665800 55555555A