

H E A L T H N E T
Q/CARE PROVIDER ASSIGNMENT REGISTER - MEDI-CAL
ELIGIBILITY PERIOD : 12/01/03 - 12/31/03
ELIGIBILITY REPORT
MEMBERS WHO HAVE BEEN ELIG FOR 90 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	9	10	11	12	13	14	15	16	17	18	19	20	21	22
MEMBER NAME ADDRESS/PHONE	HN MEMBER ID	D-O-B	SEX	1ST ELIG EFF DATE	PCP/CLNC EFF DATE	ELIG STAT	PRIOR PCP ID/NAME	OHC CODE	ETHNIC CODE	LANG CODE	PUB HLTH	MEDI-CAL ID CIN ID	* = PSEUDO	
DICKENS, CHARLES 9410 67TH STR, PORT CHARLES, CA 05502 (000)555-8426	12312123400	01/18/94	M	07/01/03	07/01/03	(+)	G011111 KENOBI, BEN		3	7		24680246801357 78787878A		
PLATH, SYLVIA 273 21ST STR, PORT CHARLES, CA 05502 (000)555-4700	57957957910	07/14/99	F	07/01/03	07/01/03	(+)	C033333 ORGANA, LEIA		2	7		13579135792468 48648648A		
WHITMAN, WALT 7745 WRITERS ROW, PORT CHARLES, CA 05502 (000)555-4700	84994849400	09/21/91	M	07/01/03	07/01/03	(+)	C099999 NO PRIMARY M.D.		2	7		88877755522212 21232123A		

SAMPLE "MEMBERS WHO HAVE BEEN ELIGIBLE FOR 90 DAYS" REPORT