

FRONT

Subscriber: Alana Hayut
Member: Alana Hayut

Policy #: U94916509
Member ID #: U9491650901
Effective Date: 01/01/2023

PCP: \$15 Copay
Specialist: \$35 Copay
Rx(Generic/Brand): \$15 Copay/\$30 Copay
Urgent Care: \$35 Copay
ER: 20% Coinsurance after \$1,450 deductible
Max Out-of-Pocket: \$7,500

Ambetterhealth.com/copays

Plan: Complete Gold
Bronze | Silver | Gold Network Coverage Only

RXBIN: 004336
RXPCN: ADV
RXGROUP: RX5448

**REFERRAL FROM PCP NOT REQUIRED FOR
SPECIALIST**

BACK

Ambetter.pshpgeorgia.com

Member/Provider Services: 1-877-687-1180
(TTY 1-877-941-9231)
24/7 Nurse Line: 1-877-687-1180

Numbers below for providers:
Pharmacy Help Desk: 1-800-261-3181
EDI Payor ID: 68069

Medical Claims Address:
Peach State Health Plan
Attn: CLAIMS
PO Box 5010
Farmington, MO
63640-5010

Scan to receive 20% off
Walgreens brand health and
wellness items*

* Exclusions and restrictions apply. See Walgreens.com/SmartSavings for details.

AMB22-GA-C-00013

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Patient: Angel Test (01/01/2000 - 26y),
 Other
 Address: Oregon Trail Blvd Boardman, OR 97818
 Phone: (301) 999-5555
 Seen On: 01/21/2026

Seen At: DoseSpotClinic
 Address: 123 N Main St str 2
 Brooklyn, MI 49230
 Phone: (956) 825-0925
 Fax: (332) 241-0212
 Provider:

Chief Complaint

10 Panel Rapid Drug Test
 Source: Self

Vitals

Vitals:
 Air Source: Room Air

Set 1:

History of Present Illness

No history of present illness data entered

PAST MEDICAL HISTORY

Allergies

No allergies entered

Medication

No medications entered

Immunization

No immunizations entered

Surgical History

No surgical history entered

Medical Condition

No past medical history entered

Preventative Med Notes

No preventativeMedNotes entered

Social History

No social history entered

Family History

No family history entered

Review of Systems

No review of systems data entered



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Other
Address: Oregon Trail Blvd Boardman, OR 97818
Phone: (301) 999-5555
Seen On: 01/21/2026

Seen At: DoseSpotClinic
Address: 123 N Main St str 2
Brooklyn, MI 49230
Phone: (956) 825-0925
Fax: (332) 241-0212
Provider:

Exam

No examination data entered

Orders & Procedures

No procedures entered

No lab requests found

No lab reports found

Assessment/Plan

No assessment plan entered

External Orders:

Order Name: Abdominal CT scan

Order File: ProScan.pdf

Result: hjv

Prescription

Signature

Addendums