

Magellan
HEALTHSM

2 1 1 5 8 1 1



1740



T9 P1
SUEANNA SMITH
700 N CENTER ST APT 105
EBENSBURG PA 15931-1165



Please use blue or black ink **Shade Ovals Like This** → **Not Like This** →

1) I received all the services listed. ☒ Yes ☐ No

<u>Did NOT Receive</u>	<u>Provider Name</u>	<u>Service Billed on Claim</u>	<u>Service Beginning</u>	<u>Service Ending</u>	<u>Amount Paid</u>
☐	NULTON DGNSTC AND TRTMNT CTR	COMMUNITY SUPPORT - ICM/RC/CM	12/7/2020	12/7/2020	\$0
☐	NULTON DGNSTC AND TRTMNT CTR	COMMUNITY SUPPORT - ICM/RC/CM	11/19/2020	11/19/2020	\$0
☐					
☐					
☐					

Lucas M Smith

Signature

2-12-2020

Date _____

$$\begin{array}{|c|c|c|} \hline 8 & 1 & 4 \\ \hline \end{array} \bigg) \begin{array}{|c|c|c|} \hline 4 & 7 & 2 \\ \hline \end{array} - \begin{array}{|c|c|c|c|} \hline 8 & 0 & 1 & 8 \\ \hline \end{array}$$

Telephone #

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-424-3515 (TTY: PA Relay 7-1-1).