105 Terry Drive, Suite 103 Newtown, PA 18940







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ROBERT MCCRARY 1016 MARKET ST RM 305 MARCUS HOOK PA 19061-4506 յելիլի ինկիլիների հիմին ինկերի հուրդույն հուրին հիմի դեռին

Please use blue or black ink

Shade Ovals Like This



Not Like This



Instructions: Below is a list of health services that have been paid recently by Magellan on your behalf. Please review the list and answer the questions below. After completing, please return this letter in the enclosed postage paid envelope.

1) I received all the services listed. All Yes O No

2) If you selected "No" above, please shade the oval(s) below for services you did NOT receive.

Did NOT Receive	<u>Provider Name</u>	Service Billed on Claim	Service <u>Beginning</u>	Service Ending	Amount <u>Paid</u>
0	CROZER KEYSTONE MEDCL CTR	COMMUNITY SUPPORT - CRISIS	12/9/2020	12/9/2020	\$0
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Signature	11411		Date 2		elephone #	-		

Magellan Healthcare Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call 1-800-424-3515 (TTY: PA Relay 7-1-1).

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).

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