

105 Terry Drive, Suite 103  
Newtown, PA 18940

**Magellan**  
HEALTH<sup>SM</sup>

2 1 1 6 2 7 1



773

773



T4 P1  
ADAM QUATTROCHI  
2631 RADCLIFFE RD  
BROOMALL PA 19008-2116



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. ☒ Yes ☐ No

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

<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>
<input type="radio"/>	CHILD GUIDNC RESOURCE CTRS MAIN	BHRS - BEHAVIORAL SPECIALIST (MH	11/30/2020	11/30/2020	\$0
<input type="radio"/>	CHILD GUIDNC RESOURCE CTRS MAIN	BHRS - OTHER (MH&SA)	12/14/2020	12/14/2020	\$0
<input type="radio"/>	CHILD GUIDNC RESOURCE CTRS MAIN	BHRS - BEHAVIORAL SPECIALIST (MH	12/3/2020	12/3/2020	\$0
<input type="radio"/>	CHILD GUIDNC RESOURCE CTRS MAIN	BHRS - BEHAVIORAL SPECIALIST (MH	12/3/2020	12/3/2020	\$0
<input type="radio"/>					

Explanation:

*Joseph Quattrochi*  
Signature

02/09/21  
Date

(618) 996-6002  
Telephone #

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).