105 Terry Drive, Suite 103 Newtown, PA 18940





1380



T7 P1 JOSHUA THOMAS 147 RANDALL AVE WOODLYN PA 19094-1812 «««Այլույի կեսերությես վերինիորի կերությունի ույլի և «Այլույի հայարականի այլույի հայարական անագահանական անագահ

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. O<sub>No</sub>

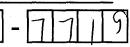
2) If you selected "No" above, please shade the oval(s) below for services you did NOT receive.

Did NOT Receive	<u>Provider Name</u>	Service Billed on Claim	Service <u>Beginning</u>	Service <u>Ending</u>	Amount <u>Paid</u>
0	CARSON VLY CHILD AID	COMMUNITY SUPPORT - FAMILY BASED	11/25/2020	11/25/2020	\$74
0	CARSON VLY CHILD AID	COMMUNITY SUPPORT - FAMILY BASED	12/15/2020	12/15/2020	\$37
0	CARSON VLY CHILD AID	COMMUNITY SUPPORT - FAMILY BASED	11/18/2020	11/18/2020	\$74
0	CARSON VLY CHILD AID	COMMUNITY SUPPORT - FAMILY BASED	12/2/2020	12/2/2020	\$74

Explanation:







Signature

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

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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