

105 Terry Drive, Suite 103
Newtown, PA 18940

Magellan
HEALTHSM



2 1 1 6 4 1 7



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T2 P1
DEVANTE PAGAN
LEH CO GVT CTR
17 S 7TH ST
ALLENTOWN PA 18101-2401



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.**

Did NOT Receive	Provider Name	Service Billed on Claim	Service Beginning	Service Ending	Amount Paid
☐	COLONIAL INTERMEDIATE UNIT 20 EASTO	BHRS - BEHAVIORAL SPECIALIST (MH	10/19/2020	10/19/2020	\$32
☐	COLONIAL INTERMEDIATE UNIT 20 EASTO	BHRS - TSS (MH&SA)	11/24/2020	11/24/2020	\$154
☐	COLONIAL INTERMEDIATE UNIT 20 EASTO	BHRS - BEHAVIORAL SPECIALIST (MH	10/16/2020	10/16/2020	\$48
☐	KIDSPEACE CORP SCRANTON	BHRS - SITE PROGRAM (PROGRAM EXC	11/4/2020	11/4/2020	\$0
☐					

Explanation:

Child continues to receive these services regularly.

Magelina L. DeLuna 2/10/2021

Signature

Date

(610) 782 - 3480

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).