



Please note:

This file may contain sensitive information that we are not legally authorized to redact per *California Business and Professions Code § 22458*.

Additionally, the copy or copies following this page may be difficult to read.

We have done our best to produce a legible copy of any original documents that were not in good condition.

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF WORKERS' COMPENSATION
WORKERS' COMPENSATION APPEALS BOARD

ADEL HANNA
DOB: 3/29/1946
SSN: XXX-XX-XXXX

AKA:
DOB:
SSN:

VS.

CALIFORNIA INSTITUTION FOR MEN , STATE FUND - RIVERSIDE - STATE
CONTRACTS

Case No: ADJ15547702

(IF APPLICATION HAS BEEN FILED, CASE NUMBER
MUST BE INDICATED REGARDLESS OF DATE OF INJURY)

SUBPOENA DUCES TECUM

(When records are mailed, identify them by using the
above Case No. or attaching copy of the subpoena.)

NO PERSONAL APPEARANCE NECESSARY

Please refer to the In Bold summary description
found below to identify the documents requested by
this Subpoena

*The People of the State of California Sends Greetings to: **Custodian Of Records***

BLUE CROSS OF CALIFORNIA C/O CT CORPORATION

WE COMMAND YOU to appear before A NOTARY PUBLIC

At ONTELLUS, 27450 Ynez Road, Suite 300, Temecula, CA 92591-4680

On the 08th day of February, 2023, at 9 o'clock A. M. to testify in the above-entitled matter and to bring with you and
produce the following described documents:

**ANY AND ALL RECORDS TO INCLUDE ALL CLAIMS FILED BY APPLICANT, PROVIDERS PAID, NAME OF PRIMARY PROVIDERS AND ANY AND ALL MEDICAL
RECORDS AND REPORTS. ***MEMBER ID# CPR226A67822*****

(Do not produce X-rays unless specifically mentioned above.)

For failure to attend as required, you may be deemed guilty of a contempt and liable to pay to the parties aggrieved all losses and amages
sustained thereby and forfeit one hundred dollars in addition thereto.

This subpoena is issued at the request of the person making the declaration on the reverse hereof, or on the copy which is served herewith.

Date 01/25/2023



**WORKERS' COMPENSATION APPEALS BOARD
OF THE STATE OF CALIFORNIA**

Workers Compensation Judge

**Records copied and submitted to the designated
court by ONTELLUS will be deemed as full
compliance with this Subpoena.**

FOR INJURIES OCCURRING ON OR AFTER JANUARY 1,
1990 AND BEFORE, JANUARY 1, 1994:

If no Application for Adjudication of Claim has been filed, a declaration
under penalty of perjury that the Employee's Claim for Workers'
Compensation Benefits (Form DWC-1) has been filed pursuant to Labor
Code Section 5401 must be executed properly.

SEE REVERSE SIDE

[SUBPOENA INVALID WITHOUT DECLARATION]

CC: NATALIA FOLEY ESQ
295923

Order Ref #: 1956857

You may fully comply with this subpoena by mailing the records described (or authenticated copies, Evid Code 1561) to the person and place stated
above within ten (10) days of the date of service of this subpoena.

This subpoena does not apply to any member of the Highway Patrol, Sheriff's Office or City Police Department unless accompanied by notice from
this Board that deposit of witness fee has been made in accordance with Government Code 68097.2 et seq.

DECLARATION FOR SUBPOENA DUCES TECUM

Case No.: ADJ15547702

STATE OF CALIFORNIA, County of RIVERSIDE

The undersigned states:

That he / she is (one of) the representative(s) for the defendant in the action captioned on the reverse hereof.

That BLUE CROSS OF CALIFORNIA C/O CT CORPORATION has in his / her possession or under his / her control the documents described on the reverse hereof. That said documents are material to the issues involved in the case for the following reason: The materials sought are relevant to the lawsuit and may lead to discoverable evidence.

Declaration for Injuries on or After January 1, 1990 and before January 1, 1994

That an Employee's Claim for Workers' Compensation Benefits (DWC Form 1) has been filed in accordance with Labor Code Section 5401 by the alleged injured worker whose records are sought, or if the worker is deceased, by the dependant(s) of the decedent, and that a true copy of the form filed is attached hereto. (Check Box if applicable and part of declaration below; See instructions on front of subpoena.)

I declare under penalty of perjury that the forgoing is true and correct.

Executed on 01/25/2023 at Temecula, California



Signature

ONTELLUS, 27450 Ynez Road, #300 (951) 694-5770

Address

Telephone

ONTELLUS FOR:
THE INSURANCE CARRIER:
/S/

STATE FUND - RIVERSIDE - STATE CONTRACTS
DIANA MUNOZ
PO BOX 65005 ATTN: CLAIMS PROCESSING
FRESNO, CA 93650-5005
(888) 782-8338

DECLARATION OF SERVICE

STATE OF CALIFORNIA, County of: CA

I, the undersigned, state that I served the forgoing subpoena by showing the original and delivering a true copy thereof, together with a copy of the Declaration in support thereof, to each of the following named persons, personally, at the date and place set forth opposite each name.

Name of Person Served

Date

Place

Sarah Marin

January, 27 2023

330 N BRAND BLVD STE 700 , GLENDALE, CA 91203

I declare under penalty of perjury that the forgoing is true and correct.

Executed on _____ at GLENDALE, California



Signature

ADEL HANNA, BLUE CROSS OF CALIFORNIA C/O CT CORPORATION



Order Ref #: **1956857**

DECLARATION OF CUSTODIAN OF RECORDS

Regarding Adel Hanna Soc. Sec# _____

DOB (or other ID) _____ Our File No. 1956857

I am duly authorized as Custodian of Records (or other qualified witness for Blue Cross of California

_____ with authority to certify the records.

CERTIFICATION OF RECORDS COPIES (Custodian's Initials: SW)

Including this declaration, all documents, records and other things called for in the Subpoena Duces Tecum or Authorization which are in my custody have been photocopied (on microfilm) at my office, in my presence, under my direction and control; and the copy submitted with declaration is a true copy thereof.

To the best of my knowledge all records referred to above were prepared or compiled by the personnel of the above named business, in the ordinary course of business, at or near the time of acts, conditions, or events recorded.

No documents, records or other things have been withheld in order to avoid their being photocopied.

Certain records were omitted because Please note; medical records will be with provider of service.

CERTIFICATION OF NO RECORDS (Custodian's Initials: _____)

A thorough search of business revealed no records described in the attached subpoena or authorization for the following reason(s):

- Patient never treated at this facility
- records were destroyed after: 3 5 7 10 years
- records were lost/misplaced
- records were destroyed due to: theft fire water
- records purged/nothing found
- storage facilities were searched, and no records found
- patient has his/her records
- X-Rays are: lost destroyed non-existent not at this facility
- Billing: misplaced/lost not kept because this is a prepaid Health Plan
- this person has never been employed at our offices
- other- comments:

This certification is limited to the information supplied to me in the attached document: records may exist under another name, another spelling or other identifying data.

I DECLARE under penalty of perjury that the forgoing is true and correct.

Executed on February 2, 2023 at Woodland Hills, California

Print Name Shantea Walker Signed Shantea Walker

CERTIFICATION OF PROFESSIONAL PHOTOCOPIER

I, the undersigned, declare:

The attached copy of records was transmitted or distributed to the authorized persons or entities.

I declare under penalty of perjury that the forgoing is true and correct.

Executed on _____ at _____

To the extent this request seeks claims data that is over five years old, Anthem objects to the request because it is overly broad, burdensome and seeks discovery from a source that is not reasonably accessible without undue burden or cost. More specifically, Anthem maintains five years' worth of claims data in a live storage environment. After five years, the data is moved to an offline archive environment. For data privacy and security reasons, the archive environment has enhanced internal access controls and requires significant IT resources and effort to search, identify, collect, and produce data stored within it. Accordingly, Anthem is limiting its production to claims data stored within the live storage environment (i.e., data that is less than five years old).

Non-Pharmacy Claims Utilization for: Adel Hanna, Hc_Id: 226A67822.

Service Start Date	Service End Date	Claim Id	Provider Name	Billed Charge Amount	Discount Amount	Discount Covered Amount	Copay Amount	Coins Amount	Deduc Amount	Paid Amount	Paid Date
01/04/18	01/04/18	18018CM4592	Michael K Louie	355.00	55.52	299.48	20.00	0.00	0.00	279.48	01/18/18
04/16/18	04/16/18	18136BC8306	Jason S Hamilton	422.00	351.48	70.52	20.00	0.00	0.00	50.52	05/21/18
05/02/18	05/02/18	18136BQ7422	Chaparral Medical Group Inc	240.00	137.88	102.12	20.00	0.00	0.00	82.12	05/16/18
05/02/18	05/02/18	18136BQ7424	Christopher J Harper	240.00	137.88	102.12	20.00	0.00	0.00	82.12	05/17/18
08/14/18	08/14/18	18235CU6675	Misc Lab	676.05	585.44	90.61	0.00	0.00	58.83	31.78	08/24/18
08/21/18	08/21/18	18235BP8494	Michael K Louie	275.00	75.11	199.89	20.00	0.00	0.00	179.89	08/24/18
08/22/18	08/22/18	18248BT8126	Exosome Diagnostics Inc	795.00	0.00	0.00	0.00	0.00	0.00	0.00	09/11/18
08/22/18	08/22/18	18279132515	Exosome Diagnostics Inc	795.00	0.00	0.00	0.00	0.00	0.00	0.00	10/25/18
09/07/18	09/07/18	18253BN4935	Michael K Louie	195.00	49.16	145.84	20.00	0.00	0.00	125.84	10/19/18
09/13/18	09/13/18	18258BC6471	Clayton S Lau	312.00	83.45	228.55	20.00	0.00	0.00	208.55	09/15/18
09/13/18	09/13/18	18261BG1156	Arnold J Rotter	32.78	0.00	32.78	0.00	0.00	32.78	0.00	09/18/18
09/13/18	09/13/18	18262BE3581	Liyong Cai	35.00	0.00	35.00	0.00	0.00	35.00	0.00	09/19/18
09/13/18	09/13/18	18351CY8801	City Of Hope National Medical Center	2,422.00	1,881.21	540.79	0.00	108.16	0.00	432.63	12/17/18
09/14/18	09/14/18	18302DA0432	City Of Hope National Medical Center	250.00	177.32	72.68	0.00	14.54	0.00	58.14	10/29/18
09/17/18	09/17/18	18263BC9917	Evelyn J Bonilla	860.00	154.72	705.28	0.00	66.38	373.39	265.51	09/20/18
09/17/18	09/17/18	18263BC9970	Clayton S Lau	786.86	298.11	488.75	0.00	97.75	0.00	391.00	09/20/18
09/17/18	09/17/18	18265BD6155	Huiqing Wu	1,690.97	867.35	823.62	0.00	164.72	0.00	658.90	09/22/18
09/17/18	09/17/18	19021CL7075	City Of Hope National Medical Center	19,195.90	12,493.38	6,702.52	0.00	1,340.51	0.00	5,362.01	01/21/19
09/25/18	09/25/18	18276BI5906	Clayton S Lau	167.00	41.01	125.99	20.00	0.00	0.00	105.99	10/03/18
09/25/18	09/25/18	18316CO9240	City Of Hope National Medical Center	250.00	177.32	72.68	0.00	14.54	0.00	58.14	11/12/18
10/30/18	10/30/18	18309CZ6495	Anshul Varshney	235.00	81.65	153.35	20.00	0.00	0.00	133.35	11/06/18
12/13/19	12/13/19	19352DS8038	Johnson B Lightfoote	400.00	297.76	102.24	0.00	0.00	102.24	0.00	12/19/19
12/13/19	12/13/19	19361CM2717	Jeffrey K Nakashioya	988.00	0.00	0.00	0.00	0.00	0.00	0.00	12/28/19
12/13/19	12/15/19	19364BK6941	Ronald C Chang	896.00	496.78	399.22	0.00	0.29	397.76	1.17	12/30/19
12/13/19	12/13/19	20030253673	Jeffrey K Nakashioya	988.00	522.13	465.87	0.00	93.17	0.00	372.70	04/18/20
12/13/19	12/15/19	20050CL7846	Pomona Valley Hospital Medical Center	67,089.40	56,690.40	10,399.00	0.00	2,079.80	0.00	8,319.20	02/19/20
12/13/19	12/13/19	20055DK3793	American Medical Response Amr	1,996.46	0.00	1,996.46	0.00	399.29	0.00	1,597.17	03/01/20
12/13/19	12/13/19	20102121010	Jeffrey K Nakashioya	988.00	0.00	0.00	0.00	0.00	0.00	0.00	04/18/20
12/14/19	12/14/19	20156CO0344	Kenneth W Lee	325.00	0.00	0.00	0.00	0.00	0.00	0.00	06/05/20
12/14/19	12/14/19	20156CO0344	Kenneth W Lee	950.00	0.00	0.00	0.00	0.00	0.00	0.00	06/05/20

Non-Pharmacy Claims Utilization for: Adel Hanna, Hc_Id: 226A67822.

Service Start Date	Service End Date	Claim Id	Provider Name	Billed Charge Amount	Discount Amount	Discount Covered Amount	Copay Amount	Coins Amount	Deduc Amount	Paid Amount	Paid Date
12/16/19	12/16/19	20015CH7820	Philip O Strassle	350.00	269.33	80.67	0.00	16.13	0.00	64.54	01/16/20
05/19/20	05/19/20	20178BM6542	Gary T Lai	100.00	99.28	0.72	0.00	0.00	0.00	0.72	07/01/20
05/27/20	05/27/20	20175DO5424	Misc Lab	100.00	0.00	100.00	0.00	0.00	0.00	100.00	07/01/20
05/28/20	05/28/20	20197DN7275	Kevin J Parkes	209.00	0.00	0.00	0.00	0.00	0.00	0.00	07/16/20
05/28/20	05/28/20	21099121138	Kevin J Parkes	209.00	0.00	0.00	0.00	0.00	0.00	0.00	04/12/21
05/31/20	05/31/20	201637A0245	American Medical Response Amr	1,990.67	0.00	0.00	0.00	0.00	0.00	0.00	07/13/20
05/31/20	05/31/20	201637A0347	American Medical Response Amr	1,990.67	0.00	0.00	0.00	0.00	0.00	0.00	07/13/20
05/31/20	05/31/20	20163CL3915	American Medical Response Amr	1,990.67	0.00	0.00	0.00	0.00	0.00	0.00	07/01/20
05/31/20	05/31/20	20210DO4360	American Medical Response Amr	1,990.67	0.00	0.00	0.00	0.00	0.00	0.00	08/01/20
05/31/20	05/31/20	20255126889	American Medical Response Amr	1,990.67	0.00	1,990.67	0.00	398.13	0.00	1,592.54	09/17/20
05/31/20	05/31/20	20294123929	American Medical Response Amr	1,990.67	0.00	0.00	0.00	0.00	0.00	0.00	11/03/20
06/01/20	06/01/20	20160BG2027	Jeffrey J Crudo	450.00	318.91	131.09	0.00	0.00	131.09	0.00	06/08/20
06/01/20	06/03/20	20161BK2950	Stanley Chou	2,295.00	1,813.80	481.20	0.00	62.83	167.06	251.31	06/09/20
06/01/20	06/01/20	20164BA0417	William N Paik	39.00	27.77	11.23	0.00	2.25	0.00	8.98	06/12/20
06/01/20	06/01/20	20168CO0907	Francisco R Ornelas	1,389.00	0.00	939.99	0.00	188.00	0.00	751.99	07/01/20
06/01/20	06/01/20	20168CO0907	Francisco R Ornelas	44.00	0.00	0.00	0.00	0.00	0.00	0.00	07/01/20
06/01/20	06/03/20	20171CZ6935	Chino Valley Medical Center	30,303.33	19,753.33	10,550.00	0.00	2,110.00	0.00	8,440.00	06/20/20
06/02/20	06/03/20	20160BG1940	Andrea L Glover	900.00	698.15	201.85	0.00	0.00	201.85	0.00	06/08/20
06/02/20	06/02/20	20161BK2950	Stanley Chou	150.00	103.90	46.10	0.00	9.22	0.00	36.88	06/09/20
06/03/20	06/03/20	20239CK1951	Zaheib Idrees	440.00	0.00	195.35	0.00	39.07	0.00	156.28	09/21/20
06/08/20	06/08/20	20239CK1169	Zaheib Idrees	315.00	0.00	178.77	0.00	71.51	0.00	107.26	09/01/20
07/06/20	07/06/20	20199CP8639	Said I Jacob	165.00	81.84	83.16	20.00	0.00	0.00	63.16	07/17/20
07/07/21	07/07/21	21197DL3091	Biocorp Clinical Laboratory Inc	370.00	329.72	40.28	0.00	0.00	0.00	40.28	07/16/21
07/09/21	07/09/21	21195EA0273	San Antonio Regional Hospital	951.00	794.97	156.03	0.00	0.00	156.03	0.00	07/15/21
07/09/21	07/09/21	21196EY5506	Mohamed S Ali	230.00	53.99	176.01	0.00	0.00	0.00	176.01	07/16/21
07/09/21	07/09/21	21205BB4382	Jeffrey G Karst	46.00	29.51	16.49	0.00	0.00	16.49	0.00	08/01/21
08/04/21	08/04/21	21231EO8108	Bryce D Beseth	630.00	424.81	205.19	35.00	0.00	0.00	170.19	08/20/21
08/06/21	08/06/21	21238EI3656	Mohamed S Ali	123.00	49.24	73.76	20.00	0.00	0.00	53.76	09/01/21
08/12/21	08/12/21	21231EL4324	San Antonio Regional Hospital	36,095.95	31,717.95	4,378.00	0.00	875.60	0.00	3,502.40	10/01/21
08/12/21	08/12/21	21232BJ1721	Choon S Koo	60.00	52.08	7.92	0.00	0.00	7.92	0.00	08/20/21

Non-Pharmacy Claims Utilization for: Adel Hanna, Hc_Id: 226A67822.

Service Start Date	Service End Date	Claim Id	Provider Name	Billed Charge Amount	Discount Amount	Discount Covered Amount	Copay Amount	Coins Amount	Deduc Amount	Paid Amount	Paid Date
08/12/21	08/12/21	21239CP7203	Reza Pakdaman	36.00	24.77	11.23	0.00	0.00	11.23	0.00	09/01/21
08/12/21	08/12/21	21258BN5819	Upland Surgical Associates	1,350.00	1,129.53	220.47	0.00	44.09	0.00	176.38	09/15/21
08/12/21	08/12/21	21258BN5819	Upland Surgical Associates	1,370.00	888.80	481.20	0.00	34.57	308.33	138.30	09/15/21
08/12/21	08/12/21	21264CL1757	Allied Anesthesia Med Grp Inc	1,536.00	818.11	717.89	0.00	143.58	0.00	574.31	09/21/21
11/08/21	11/08/21	21322ET0639	Mohamed S Ali	123.00	49.24	73.76	20.00	0.00	0.00	53.76	11/19/21
11/14/21	11/14/21	21327DD5443	Rishi Talwar	500.00	0.00	236.01	0.00	47.20	0.00	188.81	12/06/21
11/14/21	11/15/21	21328EU2492	San Antonio Regional Hospital	39,587.95	38,709.95	878.00	0.00	0.00	0.00	878.00	02/10/22
11/14/21	11/14/21	21333FB5203	Altaf L Ali	35.00	25.38	9.62	0.00	1.92	0.00	7.70	12/01/21
11/14/21	11/14/21	21336CZ0284	Peter Yoo	36.00	24.77	11.23	0.00	2.25	0.00	8.98	12/02/21
11/14/21	11/14/21	21341DD0035	Larry C Chan	465.00	295.29	169.71	0.00	33.94	0.00	135.77	12/14/21
11/14/21	11/14/21	21342ES6129	John A Abed	908.00	0.00	0.00	0.00	0.00	0.00	0.00	12/09/21
11/14/21	11/14/21	21350132496	Peter S Kim	50.00	0.00	0.00	0.00	0.00	0.00	0.00	02/01/22
11/14/21	11/14/21	21350980061	John A Abed	50.00	0.00	0.00	0.00	0.00	0.00	0.00	02/04/22
11/14/21	11/14/21	22005129153	John A Abed	908.00	0.00	0.00	0.00	0.00	0.00	0.00	02/01/22
11/14/21	11/14/21	22076133756	John A Abed	908.00	0.00	0.00	0.00	0.00	0.00	0.00	05/19/22
11/15/21	11/15/21	21330BU5667	Suraj P Rasania	380.00	277.92	102.08	0.00	20.42	0.00	81.66	12/01/21
11/15/21	11/15/21	21333FC6052	Altaf L Ali	35.00	25.38	9.62	0.00	1.92	0.00	7.70	12/01/21
11/15/21	11/15/21	21335DB1933	Mansurur R Khan	200.00	0.00	200.00	0.00	40.00	0.00	160.00	12/01/21
11/15/21	11/15/21	21336CY9313	Jeffrey G Karst	309.00	227.99	81.01	0.00	16.20	0.00	64.81	12/02/21
11/15/21	11/15/21	21341DD0035	Larry C Chan	75.00	28.90	46.10	0.00	9.22	0.00	36.88	12/14/21
11/15/21	11/15/21	21341DD0035	Larry C Chan	145.00	58.30	86.70	0.00	17.34	0.00	69.36	12/14/21
12/03/21	12/03/21	21354FI0803	Lela D Grayson	460.00	320.95	139.05	35.00	0.00	0.00	104.05	01/01/22
12/03/21	12/03/21	21354FI0803	Lela D Grayson	360.00	245.01	114.99	0.00	23.00	0.00	91.99	01/01/22
12/09/21	12/09/21	21352132651	Sanford R Weimer	200.00	23.42	176.58	20.00	0.00	0.00	156.58	01/01/22
12/13/21	12/13/21	21351CQ9976	Larry C Chan	380.00	250.18	129.82	20.00	0.00	0.00	109.82	12/17/21
12/23/21	12/28/21	22004DI0153	San Antonio Regional Hospital	170,299.38	153,686.38	16,613.00	0.00	1,684.15	0.00	14,928.85	01/13/22
12/23/21	12/23/21	22006CO8508	Stuart D Berry	43.00	29.59	13.41	0.00	2.68	0.00	10.73	01/06/22
12/28/21	12/28/21	22007CS5330	Larry C Chan	3,075.00	0.00	0.00	0.00	0.00	0.00	0.00	01/21/22
12/28/21	12/28/21	22012BM3379	Altaf L Ali	35.00	25.38	9.62	0.00	1.92	0.00	7.70	01/12/22
12/28/21	12/28/21	22020DA5818	Larry C Chan	15.00	5.38	9.62	0.00	0.00	0.00	9.62	01/21/22

Non-Pharmacy Claims Utilization for: Adel Hanna, Hc_Id: 226A67822.

Service Start Date	Service End Date	Claim Id	Provider Name	Billed Charge Amount	Discount Amount	Discount Covered Amount	Copay Amount	Coins Amount	Deduc Amount	Paid Amount	Paid Date
12/28/21	12/28/21	22111CY7110	Larry C Chan	3,075.00	0.00	0.00	0.00	0.00	0.00	0.00	05/07/22
12/28/21	12/28/21	22222CV7359	Larry C Chan	3,075.00	0.00	0.00	0.00	0.00	0.00	0.00	09/01/22
12/28/21	12/28/21	22320EZ7339	Larry C Chan	3,075.00	1,254.54	1,210.46	0.00	0.00	0.00	1,210.46	11/18/22
12/31/21	12/31/21	22059DQ6122	Larry C Chan	430.00	151.68	278.32	0.00	0.00	0.00	278.32	03/01/22
01/18/22	01/18/22	22025DQ0110	Larry C Chan	275.00	176.73	98.27	20.00	0.00	0.00	78.27	02/01/22
03/09/22	03/09/22	22075CW2906	Larry C Chan	275.00	176.73	98.27	20.00	0.00	0.00	78.27	03/16/22
03/23/22	03/23/22	22094BY3027	Anshul Varshney	235.00	71.41	163.59	35.00	0.00	0.00	128.59	04/04/22
07/10/22	07/10/22	22241CX0400	Larry C Chan	15.00	5.38	9.62	0.00	0.00	9.62	0.00	09/01/22
07/19/22	07/20/22	22208EY8744	San Antonio Regional Hospital	137,168.25	124,190.50	12,977.75	0.00	0.00	0.00	12,977.75	09/22/22
07/19/22	07/19/22	22210CQ5186	Reza Pakdaman	36.00	24.77	11.23	0.00	0.00	11.23	0.00	08/01/22
07/19/22	07/19/22	22213FM8805	Altaf L Ali	35.00	25.38	9.62	0.00	0.00	9.62	0.00	08/03/22
07/19/22	07/19/22	22215DJ8124	American Medical Response Amr	0.00	0.00	2,233.72	0.00	207.66	157.15	1,868.91	10/13/22
07/19/22	07/19/22	22215DJ8124	American Medical Response Amr	2,233.72	0.00	0.00	0.00	0.00	0.00	0.00	08/03/22
07/19/22	07/19/22	22225CJ2609	Tyler B Mitchell	908.00	0.00	0.00	0.00	0.00	0.00	0.00	08/15/22
07/19/22	07/19/22	22229123218	Haider Rizvi	50.00	0.00	0.00	0.00	0.00	0.00	0.00	09/17/22
07/19/22	07/19/22	22236CM3200	Mansurur R Khan	200.00	0.00	200.00	0.00	0.00	166.61	33.39	09/01/22
07/19/22	07/19/22	22238CK7045	Suraj P Rasania	30.00	10.76	19.24	0.00	0.00	19.24	0.00	09/01/22
07/20/22	07/20/22	22213ES9690	Altaf L Ali	35.00	25.38	9.62	0.00	0.00	9.62	0.00	08/02/22
07/20/22	07/20/22	22214CT0870	Larry C Chan	2,325.00	387.92	102.08	35.00	0.00	0.00	67.08	08/10/22
07/20/22	07/20/22	22236CM4386	Mansurur R Khan	200.00	0.00	200.00	0.00	0.00	76.57	123.43	09/01/22
07/26/22	07/26/22	22216DK1722	Sean S To	99.00	25.24	73.76	20.00	0.00	0.00	53.76	08/05/22
08/16/22	08/16/22	22235CW1918	Larry C Chan	275.00	176.73	98.27	20.00	0.00	0.00	78.27	08/23/22
08/19/22	08/19/22	22236EU5362	Sean S To	160.00	61.73	98.27	20.00	0.00	0.00	78.27	09/01/22
09/06/22	09/06/22	22263FB4086	Basim Z Abdelkarim	340.00	234.23	105.77	0.00	0.00	0.00	105.77	09/21/22
09/08/22	09/08/22	22262BA2241	Cellum Biomedical Inc	250.00	0.00	100.00	0.00	0.00	0.00	100.00	09/19/22
09/08/22	09/08/22	22279EN4574	Casa Colina Hospital And Centers For Healthcare	70.00	30.19	39.81	0.00	0.00	0.00	39.81	10/07/22
09/10/22	09/10/22	22260BB1327	Casa Colina Hospital And Centers For Healthcare	8,871.01	7,191.01	1,680.00	0.00	168.00	0.00	1,512.00	10/13/22
09/10/22	09/10/22	22280BH8533	Catherine Y Suen	175.00	134.66	40.34	0.00	0.00	40.34	0.00	10/07/22
09/10/22	09/10/22	22300BT6866	Basim Z Abdelkarim	1,550.00	1,257.30	292.70	0.00	0.00	0.00	292.70	11/01/22

Non-Pharmacy Claims Utilization for: Adel Hanna, Hc_Id: 226A67822.

Service Start Date	Service End Date	Claim Id	Provider Name	Billed Charge Amount	Discount Amount	Discount Covered Amount	Copay Amount	Coins Amount	Deduc Amount	Paid Amount	Paid Date
09/19/22	09/19/22	22270BP1084	Sean S To	250.00	121.11	128.89	0.00	0.00	0.00	128.89	10/01/22
09/19/22	09/19/22	22270BP1084	Sean S To	160.00	110.86	49.14	20.00	0.00	0.00	29.14	10/01/22
09/23/22	09/23/22	22276CS1374	Larry C Chan	275.00	176.73	98.27	20.00	0.00	0.00	78.27	10/03/22
				582,785.03	465,465.23	85,367.57	560.00	10,651.95	2,500.00	71,655.62	