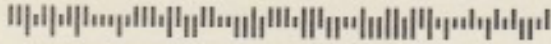
 **HCC** Life Insurance Company
P.O. Box 2005
Farmington Hills MI 48333-2005

Explanation of Benefits

RETAIN FOR TAX PURPOSES
THIS IS NOT A BILL



Forwarding Service Requested



*****SCH 3-DIGIT 945 35
10700 1 AT 0.406
DAVID L BELK MD
2070 CLINTON AVE
5TH FLOOR
ALAMEDA CA 94501

Customer Service

Date: 10/15/14
Phone: 866-400-7102 **Fax:** 317-262-2140
Email: service@hccmis.com
Mail to: HCC Life Insurance Company
P.O. Box 2005
Farmington Hills, MI 48333-2005

Certificate # [REDACTED]

Provider: DAVID L BELK MD

Claim #: [REDACTED]

Patient: [REDACTED]

Dates of Service	Service Code	Total Charge	Not Covered	Reason Code	Less Discount	Less Deductible	Less Co-Pay	Amt. Subject to Coinsurance	Paid Patient's Share At of Coinsurance	Payment Amount
09/25-09/25/2014	99386	\$200.00	\$200.00	47	\$0.00	\$0.00	\$0.00	\$0.00	80%	\$0.00
Column Totals		\$200.00	\$200.00		\$0.00	\$0.00	\$0.00	\$0.00		\$0.00
Total Patient's Responsibility: \$200.00									Other Credits or Adjustments	\$0.00
									Total Net Payment	\$0.00

Service Code Description

99386 1ST PREVENTIVE MEDICINE NEW PATIENT AGE 40-64YRS

Reason Code Description

47 Service not covered under plan

For 10/19