



BlueCross BlueShield of Illinois

300 East Randolph
Chicago, Illinois 60601-5099



BB

Explanation of Benefits (EOB). **This is not a bill.***
BOEING TRADITIONAL MEDICAL PLAN
08-17-11



Customer Service: 1-888-802-8776

MICHAEL S LAHAM
PO BOX 66
RENTON WA 98057-0066

****THE IMPORTANT UPDATE SECTION IS NOT APPLICABLE TO ALL POLICIES OR PLANS****

Report # BCS-12-05-0078 (Sophia) (Yanika)
Ref. # BCS-12-05-0081

Claim Information

Member Name: MICHAEL S LAHAM
Group No.: 7SPE00
Identification No.: BHP831604964
Claim No.: 12295523W620H
Patient Name: ELANA LAHAM

SUMMARY

Total Billed: \$175.00
Total Benefits Approved: \$131.34
Amount You May Owe Provider: \$15.00

SERVICE INFORMATION

	Service Date	Amount Billed	Not Covered	Covered
NICOLE KAGEYAMA				
Medical Visits	08-11-11	175.00	28.66 (1)	146.34
Totals		\$175.00	\$28.66	\$146.34

COVERAGE INFORMATION

Totals	\$175.00	\$28.66	\$146.34
Deductions			
Your Copayment Amount	STOPPED PAYMENT	\$15.00	
Total Deductions			-\$15.00
Total Benefits Approved			\$131.34
Amount You May Owe Provider			\$15.00
Total covered benefits approved for this claim: \$131.34 to NICOLE on 08-17-11.			

Benefits are being paid at the higher level since you used a contracting provider in the PPO network.

Information About Amounts Not Covered

- (1) The amount billed is greater than the amount allowed for this service. You will not be billed for this amount.

Ideas To Help Keep Health Care Affordable

By simply buckling seat belts, wearing bicycle helmets and using other safety equipment - and making sure our children do, too - we can avoid the upset of unnecessary injuries and billions of dollars in unnecessary medical expenses. When it comes to the cost of health care, your choices make a difference.



CHK #2143 DTD 8/11/2011 TO: NORTH PACIFIC DERMATOLOGY SERVICES



RECEIPT

DATE 8.11.11

No. **451677**

RECEIVED FROM

Elana Baham

\$15.00

Fifteen dollars

NORTH PACIFIC DERMATOLOGY P.S.

DOLLARS

FOR RENT

FOR

CO-PAY

225370

ACCOUNT	
PAYMENT	<u>\$15.00</u>
BAL. DUE	

CASH

CHECK

MONEY ORDER

CREDIT CARD

FROM _____ TO _____

BY JS

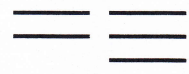
A-2701

T-46800/46802

FOR: CO-PAYMENT FOR OFFICE VISIT

RENTON
PO BOX 512380
LOS ANGELES, CA. 90051-0380

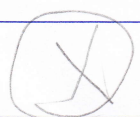
00384



IMPORTANT ACCOUNT NOTICE

0001321-0001321 LTR3 ----- GEN001 879688 TLSJ001 STEP05
** URGENT - OPEN IMMEDIATELY **
MICHAEL S LAHAM OR
ELANA LAHAM
PO BOX 66
RENTON WA 98057

DATE: AUGUST 12, 2011
FOR QUESTIONS, CALL (800) 238-4486



STOP PAYMENT ORDER CONFIRMATION

ACCOUNT NUMBER 6411002618	CHECK NUMBER(S) 2143	CHECK AMOUNT \$15.00	CONFIRMATION # 2240163
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At your request, a Stop Payment has been placed on the above item. If the information is not correct, call us immediately so that the Stop Payment can be corrected.

DATE ON CHECK: 08/11/11
PAYEE NAME: NORTH PACIFIC DERMATOLOGY SE
REASON: MISCELLANEOUS
DATE STOP PLACED: 08/12/11
TIME STOP PLACED: 01:00 PM
EXPIRATION DATE: 02/13/12

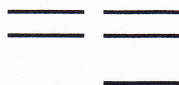
Your request to stop payment on the check or other item described on this confirmation has been placed. Please review all of the information on this notice for accuracy immediately. This Stop Payment Order will expire on the date shown above. If "Auto-renew" is indicated next to the expiration date, this stop payment will automatically renew at 6-month intervals, as long as this account remains on account analysis. This stop payment will continue to be renewed until you request its release. Otherwise, if you wish to renew this Stop Payment Order, you must place a new Stop Payment Order.

If any of the information is not correct, call us immediately at the telephone number listed above so that a new stop payment could be placed. If you do not notify us of the error in time for us to act, the Stop Payment Order may be ineffective and the item could be charged against your account.

Please refer to the Bank's disclosure and agreement for the complete terms and conditions governing your account.

RENTON
PO BOX 512380
LOS ANGELES, CA 90051-0380

0384



IMPORTANT ACCOUNT NOTICE

0004343-0004420 LTR3 ----- GEN001 880678 XCPJ260C XCP070
* * * URGENT - OPEN IMMEDIATELY * * *
MICHAEL S LAHAM OR
ELANA LAHAM
PO BOX 66
RENTON WA 98057

DATE: AUGUST 16, 2011
PAGE: 1
QUESTIONS: CALL 800 238-4486

RETURNED ITEM NOTICE

ACCOUNT NUMBER 6411002618	ENDING AVAILABLE BALANCE \$32,663.30		
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THE FOLLOWING ITEMS WERE RETURNED UNPAID ON AUGUST 17, 2011:

ITEM TYPE OR CHECK#	AMOUNT	RETURN REASON	DESCRIPTION
2143	15.00	PAYMENT STOPPED	INCLEARING CHECK
NUMBER OF RETURNED ITEMS	1	TOTAL	\$15.00