

MT HOOD WOMEN'S
HEALTH, PC

PROVIDER: REGIS
MCDONALD, CNM

2009-2012

PREGNANCY CLAIM
PATIENT NOTES

2/23/09 12:00 AM Ticket 225066: Visit Transferred to Collection
2/27/09 10:09 AM Ticket 225066: Visit Removed from Collection
2/27/09 10:09 AM Ticket 225066: PER MICHELLE AT BC NO CLAIM ON FILE. RESUBMIT.SK.
3/19/09 2:11 PM Ticket 225066: DENIAL FROM BC IN TODAY'S BATCH, 3/19/09.SK.
3/19/09 2:12 PM Ticket 229175: DENIAL FROM BC IN TODAY'S BATCH, 3/19/09.SK.
4/13/09 12:01 AM Ticket 225066: Visit Transferred to Collection
4/16/09 12:00 AM Ticket 229175: Visit Transferred to Collection
4/28/09 11:27 AM Ticket 225066: Email to Sherry requesting that she make payment arrangements with patient.
4/29/09 4:17 PM Ticket 225066: LM FOR PT TO CALL RE PMT PLAN.SK.
4/29/09 4:17 PM Ticket 225066: Received email from patient on 4/27/09. "My husand and I have sent an appeal and are waiting to hear back. Until then we would like to set up a payment plan- Is this done with you?"
5/21/09 3:01 PM Ticket 225066: SPOKE TO CINDY ENGALGAU @ BCBS OF OR. SHE IS GOING TO LOOK INTO THIS SITUATION AND TRY AND GET CLAIM PAID BY BC. WILL CALL ME BACK WITH ANY INFORMATION. MEM
5/21/09 3:02 PM Ticket 229175: Visit Removed from Collection
7/5/09 12:01 AM Ticket 225066: Visit Transferred to Collection
7/5/09 12:01 AM Ticket 229175: Visit Transferred to Collection
9/2/09 1:31 PM Ticket 225066: **long** BLUE CARD, SPOKE WITH LINDA AND SHE STATED OUR OFFICE HAD CALLED ON 7/28/09 AND WAS TOLD TO CONTACT HOME PLAN. GEORGIA SINCE MEMBER HAD APPEALED CLAIM WITH OUT OF STATE PLAN. HOME PLAN HAD DENIED STATING PROCEDURE NOT COVERED BY THIS CONTRACT PER LINDA. SPOKE WITH MICHELLE HERE IN OFFICE AND SHE HAD BEEN WORKING WITH CINDI INGELGAU AND GAVE ME HER NUMBER TO CONTACT AS CINDI WAS TO GET BACK WITH HER AND HAS NOT. CALLED 503-276-1960. SPOKE WITH CINDI AND SHE REMEMBERED THAT SHE HAD WORKED ON CLAIM AND SAID SHE WOULD MAKE A CALL TO BLUE CARD PROVIDER REP AND CALL US BACK.
9/30/09 1:22 PM Ticket 225066: CELL#971 563 5355, LM ON PATIENTS VOICE MAIL TO PLEASE CONTACT ME. WOULD LIKE TO SEE IF SHE HAS HAD ANY RESPONSE FROM BLUE CROSS.
10/2/09 11:13 AM Ticket 225066: PER MICHELLE M. CINDI FROM BLX HAD CALLED BACK AND SAID CLAIM DENIED. MICHELLE HAS CHART AND IS GOING TO TAKE TO ELAINE FOR REVIEW.
10/6/09 9:20 AM Ticket 225066: **long** CINDI RETURNED MY CALL TODAY AND STATED SHE HAD LEFT A MESSAGE ABOUT 3 WEEKS AGO ON A DIFFERENT EXT# BUT I MUST NOT HAVE RECEIVED IT. CINDI STATED HER PLAN DOES NOT COVER CNM'S PERIOD. I TOLD HER THAT WAS STRANGE AS THEY HAD PAID FOR ULTRASOUNDS AND LABS. GAVE HER CLAIMS THAT WERE PAID. CINDI STATED SHE WOULD LOOK BACK INTO IT AND CALL ME BACK.
10/8/09 8:26 AM Ticket 225066: CINDI RETURNED CALL YESTERDAY AND STATED THAT PATIENTS PLAN CHANGED AS OF 01/01/2009 AND PLAN DOES NOT COVER MIDWIFES. CINDI SUGGESTED PATIENT APPEAL SINCE SHE WAS 10 MONTHS PREGNANT AND NOT AWARE OF PLAN CHANGE.
11/2/09 12:25 PM Ticket 225066: **long** PATIENT CALLED TODAY AS SHE WAS TRYING TO SET UP AN APPEAL THROUGH REGENCE BLUE CROSS AND HAD SPOKE WITH A LADY BY THE NAME OF KATHY WHOM IS GOING TO TRY AND HELP PATIENT WITHOUT AN APPEAL. KATHY TOLD HER THAT SHE CAN GO BACK THROUGH THE ARCHIVE AND IF SHE CAN FIND TELEPHONE CALL WHERE STACEY WAS TOLD THEY WOULD COVER MIDWIFE SHE SHOULD NOT HAVE TO APPEAL. HER ORIGINAL PLAN WAS

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THROUGH OREGON WHICH RECOGNIZES MIDWIVES BUT PLAN THAT TOOK OVER 1/01/09 THROUGH GEORGIA DOES NOT RECOGNIZE MIDWIVES. TO KEEP ACCOUNT IN GOOD STANDING PATIENT HAS SET UP \$100 MONTHLY PAYMENT PLAN ON THE 5TH OF EVERY MONTH.

11/5/09 1:18 PM Ticket 225066: **long** KATHY FROM BC OF GEORGIA CALLED TO VERIFY REGIS MCDONALD IS A MIDWIFE. SHE SAID THEY SHOWED HER AS AN OBGYN UP UNTIL JAN 2009 THEN THEY STARTED SHOWING HER AS A NP/MW. TOLD HER SHE IS A NP/CNM. SHE IS WORKING WITH PT TO APPEAL BUT SAID THERE ARE NO GUARANTEES. SK.

12/15/09 11:24 AM Ticket 225066: **long** SARAH FROM BC OF GEORGIA CALLED WITH PT ON THE LINE. SARAH ASKED IF I WOULD CALL BLUE CARD TO SEE IF WHEN THEY SENT THE CLAIM OVER ELECTRONICALLY IF THERE WAS SOMETHING WRONG. PER CALL TO RYAN IN BLUE CARD HE SEES THAT REGIS MCDONALD CNM IS PARTICIPATING AND THERE WAS NO BREAK, HE CALLED BC OF GEORGIA AND WAS TOLD CNMS ARE A POLICY EXCLUSION BUT THERE IS AN OPEN APPEAL WITH A SUPERVISOR INVOLVED AND ALL WE CAN DO IS WAIT. SK.

11/4/10 2:30 PM Ticket 225066: **long** CELL# , SPOKE WITH PATIENT AS SHE DID NOT MAKE \$25 PAYMENT FOR OCTOBER AND THOUGHT THAT MAYBE SHE HAS RECEIVED RESPONSE FROM BLUE CROSS THAT THEY ARE PROCESSING CLAIMS. PATIENT SAID SHE HAS NOT RECEIVED ANY RESPONSE FROM BLUE CROSS. SHE TOLD ME SHE IS BURNED OUT AND JUST GAVE UP. "WHAT IS A PERSON TO DO?" I EXPLAINED THAT REGIS SENT OUT A LETTER BACK IN JUNE BUT WE NEVER RECEIVED A RESPONSE. PATIENT SAID SHE IS NOT SURPRISED, SHE WENT ALL THE WAY TO INSURANCE COMMISSIONER AND STILL HAS NOT RECEIVED A RESPONSE. PATIENT COMMENTED THAT SHE HAS BEEN PAYING \$25 MONTHLY BUT CANNOT CONTINUE, HUSBAND IS FULLY DISABLED. SHE STATED HOSPITAL HAD WRITTEN OFF BALANCE AND ASKED IF I COULD ASK REGIS MCDONALD, CNM TO WRITE OFF CLINIC BALANCE. I TOLD HER THE HOSPITAL HAS FINANCIAL AID/ASSIST. BUT OUR CLINIC DOES NOT. do

11/5/10 11:36 AM Ticket 225066: **long** SPOKE WITH ELAINE IN RE: TO THIS CLAIM. STILL HAVE HAD NO RESPONSE AND LETTER REGIS HAD WRITTEN WAS FAXED BACK IN JUNE AND NO RESPONSE. ELAINE WANTED ME TO GET IN CONTACT WITH CAROL CLEVELAND AT BLUE CROSS. I CALLED TODAY 503 525 6583 AND LM ON HER VOICE MAIL TO PLEASE RETURN CALL. WOULD LIKE TO KNOW STATUS. CLAIM STATUS IN 12/09 WAS OPEN AND IN REVIEW. do

11/8/10 2:50 PM Ticket 225066: **long** CAROL CLEVELAND RETURNED CALL TODAY AND INFORMED ME THE LAST CONVERSATION SHE HAD WITH MICHELLE M. IN OUR OFFICE WAS IN JUNE. CAROL HAD ESCALATED CLAIM BUT BC OF GA WOULD NOT EVEN LOOK AT CLAIM UNTIL PATIENT FILED AN APPEAL AND THEY DO NOT HAVE AN APPEAL ON FILE FROM THE PATIENT NOR A PHONE CALL. CAROL SAID SHE WOULD BE HAPPY TO HELP US BUT UNABLE TO DO ANYTHING UNTIL PT FILES AN APPEAL. CAROL ALSO SAID THAT THERE IS A TIME LIMIT FOR AN APPEAL AND IT IS PROBABLY ALREADY PAST BUT SHOULD TRY ANYWAY. TOLD CAROL I WOULD CONTACT PATIENT. CAROL SAID TO UPDATE HER AND SHE WOULD PURSUE IF POSSIBLE. CALLED PATIENT AND SPOKE WITH HER IN REGARDS TO INFO. I WAS GIVEN BY CAROL AND PATIENT SAID BLUE CROSS OF GA IS LYING. SHE HAS CONTACTED THEM AND THEY TOLD HER IT WAS TO LATE TO APPEAL. THE CLAIM AS IT WAS OVER 180 DAYS. PATIENT HAS LETTERS FROM BC OF GA AND FROM INSURANCE COMMISSIONER OF GA AND WILL BRING THEM INTO THE OFFICE SO I MAY COPY. PATIENT CAME INTO OFFICE AND I COPIED LETTERS AND ASKED PATIENT IF IT WOULD BE OK IF I FAXED THEM TO CAROL SO SHE MAY PURSUE GETTING CLAIM PAID AND SHE SAID THAT WAS FINE. I HAVE FAXED LETTERS TO ATTN: CAROL CLEVELAND AT 1-888-309-8761. do

11/7/11 10:56 AM Ticket 225066: **long** CALLED CAROL CLEVELAND 503 525 6583. WANTED TO KNOW HOW THE PLAN TO PLAN APPEAL WAS GOING. CAROL ANSWERED AND SAID SHE WAS JUST THINKING SHE NEEDED TO INQUIRE WITH DAWN IF THERE HAS BEEN ANY PROGRESS BUT DAWN IS OUT TODAY. CAROL WILL MAKE NOTE TO CHECK WITH HER ON MONDAY AND CALL AND LET ME KNOW IF ANY PROGRESS. do

1/11/11 10:50 AM Ticket 225066: **long** CAROL LEFT MESSAGE ON VOICE MAIL THAT DAWN HAD CONTACTED GAL AT THE OTHER PLAN AND SHE HAD BEEN OUT ILL AND THEN WITH THE HOLIDAY HAD GOTTEN BEHIND. CLAIM IS STILL IN REVIEW AND THEY ARE IN THE PROCESS OF PULLING ALL PHONE CALLS WITH THE MEMBER. CAROL IS HOPING TO HEAR SOMETHING BY THE END OF THIS WEEK. do

2/9/11 12:54 PM Ticket 225066: NOTE: 2/08/2011 CALLED 503 525 6583. LM ON CAROLS VOICE MAIL. STATED I WAS NOT TRYING TO PUSH BUT WAS CHECKING ON STATUS FOR PATIENTS CLAIM. I HAD LAST HEARD FROM HER ON 1/11/2011 AND THEY WERE PULLING PHONE RECORDINGS. do

2/10/11 8:43 AM Ticket 225066: **long** CAROL RETURNED MY CALL YESTERDAY AND LM THAT THEY DID HEAR BACK FROM THE OTHER PLAN AND THEY HAD PULLED CALLS AND SAID THEY DID INFORM THE MEMBER OF HER APPEAL RIGHTS. CAROL SAID THEY ARE DISAGREEING WITH THIS AND CAROL HAS ELEVATED TO ANOTHER EXECUTIVE WITHIN REGENCE. SHE TRIED CONTACTING HER TODAY AS THEY HAD SENT IT OFF BUT SHE DID NOT HAVE ANY LUCK GETTING IN TOUCH WITH HER. CAROL WILL KEEP TRYING TO GET IN TOUCH WITH HER AGAIN TODAY. CAROL WANTS TO FIND OUT IF EXECUTIVE CAN DO ANYTHING THAT THEY HAVE NOT BEEN ABLE TO DO. do

2/10/11 10:13 AM Ticket 225066: **long** CALLED CAROL AND SPOKE WITH HER IN RE: TO MESSAGE LEFT. I TOLD HER I DID NOT UNDERSTAND RE: APPEAL AS PATIENT DID FILE AN APPEAL. CAROL SAID GEORGIA IS SAYING THE APPEAL WAS NOT COMPLETE. MEMBER DID NOT FOLLOW THROUGH WITH ALL SHE WAS SUPPOSE TO. IN CAROLS OPINION SHE THINKS THERE WAS SOME MISCOMMUNICATION/MISUNDERSTANDING POSSIBLY THROUGH INSURANCE AND MEMBER. I AM SENDING OUR GUARANTOR NOTES TO CAROL SO SHE CAN HAVE ALL NAMES AND DATES THAT WE HAD CONTACTED BC AND RESPONSE. do

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3/30/11 9:20 AM Ticket 225066: CALLED CAROL, 503 525 6583, LM ON CAROL'S VOICE MAIL TO PLEASE CONTACT ME. WOULD LIKE TO BE UPDATED ON WHAT IS OR WHAT IS NOT HAPPENING WITH CLAIM. do
3/30/11 9:36 AM Ticket 225066: **long** CAROL CALLED AND L/M WITH UPDATE, STILL WORKING ON IT. THE ADMINISTRATIVE/MANAGEMENT PERSON HAS BEEN ON MEDICAL LEAVE FOR A COUPLE OF MONTHS AND HOPING TO RETURN NEXT WEEK. THE PERSON WORKING IN HER ABSENCE IS DECLINING THE EXCEPTION. CAROL STILL TRYING TO WORK ON THIS BECAUSE CAROL FEELS THIS IS SOMETHING THEY SHOULD COVER. do

5/10/11 11:52 AM Ticket 225066: **long** CALLED CAROL 503 525 6583. CAROL SAID SHE WAS JUST LOOKING TO SEE IF ANY UPDATED NEWS BUT THERE IS NOT. BLX GEORGIA STILL REFUSING TO PAY. CAROL SAID SHE HAD SPOKE WITH BLUE CARD REP THAT CAME OUT 2 WEEKS AGO AND HE SAID IF THE BENEFIT PLAN BOOKLET DID NOT SAY CNM'S WERE EXCLUDED THEN THEY WOULD HAVE TO PAY. THEY ARE TRYING TO GET THEIR HANDS ON A BENEFIT BOOKLET NOW. CAROL SAID THE GAL THAT MAKES ALL THE CALLS IS AWAY AT A CONFERENCE, CAROL IS UNABLE TO MAKE CALLS SO SHE WILL HAVE TO WAIT UNTIL SHE RETURNS. do

6/6/11 12:01 PM Ticket 225066: CALLED CAROL 503 525 6583, LM ON CAROL'S VOICE MAIL. MAKING MY MONTHLY CALL IN REGARDS TO PROGRESS IF ANY ON PATIENTS CLAIM. do
7/7/11 12:52 PM Ticket 225066: **long** CAROL RETURNED CALL AND L/M ON VOICE MAIL. CAROL STATED THEY HAD MADE A LITTLE BIT OF HEADWAY. FINALLY RECEIVED COPY OF BENEFIT BOOK AND IT IS BEING REVIEWED. FROM WHAT CAROL COULD TELL IS THE BOOK DOES NOT SAY IT COVERS CNM BUT IT DOESN'T SAY IT DOES NOT. SHE IS HOPING THEY WILL KNOW MORE IN ANOTHER WEEK. do

7/25/11 1:51 PM Ticket 225066: **long** CAROL CALLED TODAY TO LET US KNOW THAT WE WILL BE RECEIVING PAYMENT FOR PATIENTS DELIVERY IN '09'. THEY ARE PAYING AS A "SPECIAL ACCEPTANCE" MAY TAKE AWHILE TO RECEIVE CHECK. THEY ARE STILL CALCULATING BENEFITS BUT CAROL SAID IT WILL PROBABLY BE PAID AT 80%.
10/17/11 1:09 PM Ticket 229175: **long** PATIENT CALLED TODAY AND WAS UPSET THAT BLUE CROSS DID NOT PAY FOR LABS ON 2/27/09. SHE WANTED ME TO REBILL. I TOLD HER THAT IT WOULD MOST LIKELY BE DENIED DUE TO TIMELY FILING. SHE WANTED US TO TRY AND SAID SHE WOULD BE SENDING PAYMENT TOWARDS BALANCE. do



December 15, 2009

Claim:

Dear Mrs.

This letter is in regards to our conversation of 11/10/09 and 12/15/09. I found a purged call where you spoke to a representative in February 2009. I have requested this call to be pulled. If you were not advised of your benefit to appeal, I will open a new log and send back to appeals.

If you have any further questions, please call Customer Service at 1-800-441-2273; our hours are 7AM to 7PM EST.

Sincerely,

Blue Cross Blue Shield of Georgia
Customer Service Department

2357 Warm Springs Road, P.O. Box 7368, Columbus, GA 31908
An Independent Licensee of the Blue Cross Blue Shield Association

COPY

1.800.441.CARE (Members) / 1.800.241.7475 (Providers)
7AM - 9PM Weekdays / www.bcbsga.com
PO Box 9907 - Columbus, GA 31908-7368

Ineligible Provider.

4. Any services rendered or supplies provided while you are a patient or receive services at or from an Ineligible Provider.
3. Any services rendered or supplies provided while you are confined in an Ineligible Hospital.
2. Participant's Effective Date, and are covered by a prior carrier.
1. Inpatient Hospital admissions which begin before a Participant's Effective Date, continue after the Date, or after coverage ends. Such services and supplies shall include, but not be limited to Services rendered or supplies provided before coverage begins, i.e., before a Participant's Effective Date, or after coverage ends.
1. Care, supplies, or equipment not Medically Necessary, as determined by the Plan, for the treatment of an Injury or illness.

What's Not Covered

Your coverage does not provide benefits for:

Covered:

We can confirm claims for service rendered by Mary R. McDonald (Nurse Midwife) on January 1, 2009 and February 27, 2009 were denied as a non-covered benefit. The provider is ineligible and based on the terms of the employer group contract, ineligible providers are not covered. Please reference page 21 of the member's PPO Certificate Booklet under Limitations and Exclusions, item number four (4), What's Not Covered:

Ms. is enrolled in a self-insured, ERISA governed, PPO group plan that is provided through Sciele Pharma Sales, Inc. The policy became effective June 1, 2008 and is currently active.

This letter is a response to your inquiry pursuant to the above case.

Dear Ms. Uche:

Re: Member #:
Case #:
NAIC #:
CLN:

Ms. Stacey Uche, Investigator
Consumer Services Division
Office of Commissioner of Insurance
Seventh Floor, West Tower
Floyd Building
2 Martin Luther King, Jr., Drive
Atlanta, GA 30334

May 28, 2009



to pass
to Billing -
Sharon's Blue Cross & Dept
Phone on
Got office on
Spoke = Sarah
GA isn't covered
Bill of material per
1-1-09
CUM
R. McDonald was
prior to
for Sharon,
M.H.M.C. @

Ms. Stacey Uche, Investigator
Consumer Services Division
Office of Commissioner of Insurance
Seventh floor, West Tower
Floyd Building
2 Martin Luther King, Jr., Drive
Atlanta, GA 30334

Dear Stacey Uche,

I am writing this letter in conjunction with the BCBS GA denial of claims on my child's birth January 1, 2009. Originally, when I wrote you it was concerning a denial insurance statement bill from the Mt. Hood Women's Clinic that I had received regarding the birth of my son and services rendered by Mary R. McDonald, CNM on dates 1-1-09 and 2-27-09.

After further research of my own I have come up with numerous compilations of denial letters, insurance documents, and my own personal documentation of conversations with BCBS of GA, BCBS of OR, and Mt. Hood Women's clinic billing departments and customer service representatives.

I hope you do read in depth what I have uncovered and can help me on this insurance denial situation. Not only is this a large burden on my family, but the hours and hours on the phone to insurance companies with people telling me either Mary R. McDonald, CNM is not an in-network provider, she is an in-network provider, and being run in so many circles have taken me away from my family. I am contacting you again now with more specific and crucial documentation and am really counting on someone to do something that makes sense.

INS COVERAGE - I had requested billing documents after getting denials and was being told by BCBS of GA customer service rep that a bill from Mary McDonald, CNM had never been sent in. According to this specific rep a CNM doesn't send a bill to ins until the birth of the child. These insurance bills are actually a direct contradiction of what that customer service rep told me in April 2009. The billing document are located in this packet I have sent you. Consequently, through BCBS of GA a client only has 180 days to appeal a denial - I did not even receive a denial until bill was sent out April of 09.

Billing statements requested from Mt. Hood

Women's Clinic:

June 2008:

Hired on with Sciele on 5-12-08 and was in Atlanta when I found out about my pregnancy. Arriving home in June after Sciele Pharmaceutical training I contacted the phone # listed on my ins card for member questions. (FYI - I did not ever and still have not received a member PPO Certificate booklet) I did navigate through the phone line and spoke with a customer service rep at BCBS of GA and I let her know

I was pregnant, needed to find a prenatal provider, and wanted a CNM. She (I did not take her name as I did not know it to be relevant) directed me to www.bcbsga.com website and after putting in my member # and state zip would be given numerous providers in my area. I did put in the www.bcbsga.com email address along with zip code and the Mt. Hood Women's Health came up as having multiple providers to choose from. I contacted the clinic and was matched with Mary R. McDonald, CNM.

July 8, 2008

This was my first appointment at Mt. Hood women's clinic for my ultrasound. Upon checking in the receptionist and I discussed coverage and was informed that CNM McDonald was an in-network provider and as long as she was an in-network provider and on BCBS she would be covered by BCBS of GA.

As you will note that my appointment on 7-8-08 was billed under Mary Regis McDonald CN and was paid by BCBS on 10-31-08.

Now, the letter that you sent me 5-28-09 stated that I was being denied for services rendered by Mary R. McDonald, CNM due to what is stated on pg. 21 of the Member's PPO Certificate Booklet under "limitations and Exclusions and to reference item #4. The item says, " Any services rendered or supplies provided while you are a patient or receive services at or from an ineligible provider".

- Bill paid by BCBS to Mary R. McDonald, CNM for services rendered.

August 21, 2008

OB office visit received by Mary R. McDonald, CNM. This visit included another Ultrasound and ob/gyn care by Mary R. McDonald, CNM.

As you will note that my appointment on 8-21-08 was billed under Mary Regis McDonald, CN and was paid by BCBS on 9-10-08.

- Bill paid by BCBS to Mary R. McDonald, CNM for services rendered.

September 4, 2008

Established patients/ Level 3 visit.

I was diagnosed with pre-term labor and hooked up to a monitor under the care of Mary R. McDonald, CNM.

As you will note my appointment on 9-4-08 was billed under Mary R. McDonald, CN and was paid by BCBS on 10-31-08.

- Bill paid by Blue Cross - Oregon on 10-31-08

November 10, 2008

OB/GYN visit to include testing provided by Mary R. McDonald, CNM.

- Bill paid by Blue Cross - Oregon on 11-26-08

November 17, 2008

Seen in office for blood draw ordered by Mary R. McDonald, CNM.

- Bill paid by Blue Cross - Oregon 12-1-08.

December 12, 2008

- Ob visit and again another done by in-network provider Mary R. McDonald, CNM.
- Bill paid by Blue Cross - Oregon on 12-30-08.

There were also numerous office visits to Mary R. McDonald, CNM that were not billed.

January 1, 2009

Vaginal Delivery w/care provided by in-network provider Mary R. McDonald, CNM at in-network hospital Mt. Hood Medical Center.

- 4-20-09 Bill was denied "Per Blue Cross This provider is not eligible on your plan";

February 27, 2009

Office visit for post vaginal delivery follow up. done by in-network provider Mary R. McDonald, CNM. This was the same that had been done on 1-1-10-2008 and 12-12-08 and had been covered visits.

- 4-29-09 Bill was denied " Per Blue Cross provider is not eligible on your plan";

BCBS of GA

Upon receiving a denial letter I immediately called the customer service number on my insurance card April 2009: After speaking with a customer service agent this is what I was told and what I thought.

- Customer service rep - says that "CNM is not a covered benefit on BCBS"
- Customer service rep - says that "CNM's do not bill until after baby is born"
- Customer service rep - says that " That is too bad and this is my bill"
- I did let customer service rep know I called back in June and was told to look online by another rep to find a provider in my area. Customer service reps - says "He said, She said"

After getting no where with that customer service rep I called Mt. Hood Women's Clinic. I was told to write a letter to the insurance commission and was given an email address and address by Mrs. Eki. This is how Ms. Stacey Uche was contacted. I had originally sent my appeal through Insurance Commission of Oregon and that letter was forwarded to Insurance Commission of GA. I never received these letters and was caught in the middle still being told that Mt. Hood Women's Clinic would try to figure this out and all I can do is wait to hear back from the Ins. Commission.

At some point I received a letter back. This is the letter amongst the documented information in the packet enclosed. This letter is from Ms. Stacey Uche, Investigator to Patient and it details why the birth was denied on 1-1-09 and office visit 2-27-09 to Mary R. McDonald, CNM. The one thing the letter does not address is why previous bills were covered by the insurance company and under the in-network provider Mary R. McDonald, CNM.

- As you can see upon further review is that bills WERE paid to Mary R. McDonald, CNM for services rendered to
- After receiving the letter from Insurance Commission of GA I did call BCBS of GA and again asked about billing and was just told that it was denied due to provider being out-of-network.
- Waiting for a few months thinking that Mt.Hood Women's Clinic was going to figure out what was going on.

I called BCBS of GA again and spoke to another rep and again was just told "denied" due to out-of-

network provider and by this time supposedly I had not done enough and the appeal process for BCBS of GA was up. With Documentation of billing and Insurance Commission and contacting Mt. Hood Women's Health with not getting anywhere - who is the client suppose to go to?

November, 2009. Called back BCBS of GA and spoke with Kathy another customer service rep. She was understanding of the situation and was willing to look into the denial and try to figure out how she could help me. Kathy did let me know she would be calling Mt. Hood Women's clinic and BCBS of OR. This was the outcome:

- Per BCBS of Oregon a customer service rep there told Kathy the BCBS of GA that the birth bill was denied because Mary R. McDonald, CNM became an out-of-network provider as of 1-1-09. Kathy then stated that she asked if the customer service rep could fix that problem so the bill would be covered - outcome was still a denial due to provider Mary R. McDonald, CNM changing to out-of-network provider as of 1-1-09.
- Kathy was going to appeal on her level in the BCBS of GA company.
- 12-15-09 Patient received a call from Kathy with BCBS of GA stating that the denial stands because client Patient did not appeal in the appropriate 180 day time frame.
- Kathy asked client to contact HR department at Sciele to have them request that BCBS of GA write a letter to request out-of-network provider who was an in-network provider 12-31-08 to allow for coverage on the date of delivery.
- Due to client not having any personal contact with HR department at Sciele, Kathy agreed to call the HR department on Patient's behalf. As of 12-17-09 no phone calls have been received.
- 11-2-09 Client also asked Kathy for any pending bills, documents, and member handbook. To date client has not received any of these documents.

BCBS of OR

- 12-15-09 after contact with Kathy at BCBS of GA as getting information stating that BCBS of OR stated, Mary R. McDonald, CNM has changed to out-of-network provider and per Kathy those at BCBS of OR could do nothing to change the out-of-network provider list.
- 12-15-09 Client contacted BCBS of OR and spoke with Sarah BCBS of OR rep and after research on the BCBS of OR side found out that Mary R. McDonald, CNM is still and has been since 2007 an in-network provider for BCBS.
- 12-15-09 Patient was told by Sarah at BCBS of OR that if appeals are going to be honored there is a year window. According to BCBS of OR Patient's Year is up as of 1-1-10 although she did not receive a bill of denial until 4-2009.
- BCBS of OR did a three way call with Client Patient & Sarah rep @ BCBS of OR, and Sherril billing department rep at Mt. Hood Women's Health.

BCBS of OR and Mt. Hood Women's

Health conversation

- Phone call requested by client Patient between client, Sarah rep @ BCBS of OR, and Sherril billing specialist with Mt. Hood Women's Health.
- Outcome - Sarah rep/w BCBS of OR spoke with Sherril billing specialist with Mt. Hood Women's Health and they came up with realization that there is severe confusion with BCBS of GA denying birth and post-birth appointment as previous bills were covered.
- Sherril @ Mt. Hood Women's Health contacting Blue Card department and just being told Mary R. McDonald, CNM being an out-of-network provider - question addressed by Sherril, why were previous bills paid?

BCBS of GA and previous employee of Sciele Pharma Sales, LLC. Patient previous Client of

The day the patient delivered

Client *Patient* is requesting that all documentation in this packet be looked over.

- On the original letter sent to client a third party fax sent to Stacey Uche, Investigator from BCBS of GA does not state that previous bills in 2008 were covered and were paid to the in-network provider Mary R. McDonald, CNM. The only information documented that BCBS of GA touched on was what was sent to Stacey Uche, Investigator to review, which was only bills dated 1-1-09 and 2-27-09, but BCBS of GA left out the previous bills paid to Mary R. McDonald, CNM for services rendered.
- Client was never given a member certificate booklet.
- Client was not given adequate time to compile information to appeal this denial for services rendered by Mary R. McDonald, CNM.
- The first bill received was at the end of April 09, which would have only given the client 60 days to appeal.
- Client had no reason to believe that the birth on 1-1-09 would have been denied due to out-of-network provider because previous bills sent to BCBS and that were paid on behalf of services rendered by Mary R. McDonald, CNM.
- Client has documentation tracking appeal to denial and getting no where.

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Providerfinder

Search By Location | Lookup By Name | Provider Finder Help
Search Results

114 providers met the preferences you selected.
Search Criteria: Your short list:

State: OR
County: Multnomah

Plan: BlueCard PPO

Provider type: All providers

Specialty category: obstetrics and gynecology

There are no providers in your short list. You may select up to 5 providers.
Print short list | Print short list compare short list compare short list

Sort Results By:

Jump to:

Data update date: 10/16/2009

PREV 1 2 3 4 5 6 7 8 9 10 11 12 NEXT

Short List

Provider Address
Phone
Specialty
Links

map	obstetrics & gynecology	3181 SW Sam Jackson Park Rd Kirk, Edward P, MD Portland, OR 97239 (503) 494-8311
map	obstetrics & gynecology	24850 SE Stark St Ste 200 Knudsen, Anne M, MD Gresham, OR 97030 (503) 491-9444
map	obstetrics & gynecology	3181 SW Sam Jackson Park Rd Lee, David M, MD Portland, OR 97239 (503) 494-8417
map	obstetrics & gynecology, Reproductive	3181 SW Sam Jackson Park Rd Lee, David M, MD Portland, OR 97239 (503) 494-8311
map	obstetrics & gynecology, Reproductive	800 SW 13th Ave Lee, Michael J, MD Portland, OR 97205 (503) 221-0161
map	obstetrics & gynecology	2705 E Burnside St Ste 114 Leiva, Maria C, MD Portland, OR 97214 (503) 215-6262
map	obstetrics & gynecology	177 NE 102nd Ave Levin, Dina J, MD Portland, OR 97220 (503) 254-1399
map	obstetrics & gynecology	Lovejoy SurgiCenter Portland, OR 97220 (503) 254-1399

untitled

933 NW 25th Ave

Portland, OR 97210

(503) 221-1870 Ambulatory Surgical Center, Obstetrics &

map

Gynecology

McDonald, Mary R, CNM

24850 SE Stark St Ste 200

Gresham, OR 97030

(503) 491-9444

Nurse Midwife, Obstetrics & Gynecology map

PREV 1 2 3 4 5 6 7 8 9 10 11 12 NEXT

Printer FriendlyPrinter Friendly

Pay to:
 MT HOOD WOMENS HEALTH PC
 24850 SE Stark Street, Suite 200
 GRESHAM, OR 97030-3378
 (503) 491-9444

Amount Due	\$245.00
Amount Paid	\$245.00

Patient Receipt
 Thursday, May 02, 2013

Employer ID
 Provider ID

Date	Description	Check #	Fee	Units	Insurance	Patient
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/Mary R McDonald CNM/NP/210713

07/08/2008	PREG,SUPERVISE OTHER (V22.1)		\$20.00	1.0		\$20.00
07/08/2008			\$9.00	1.0		\$9.00
07/08/2008			\$18.00	1.0		\$18.00
07/08/2008			\$40.00	1.0		\$40.00
07/08/2008			\$13.00	1.0		\$13.00
07/08/2008			\$13.00	1.0		\$13.00
07/08/2008			\$28.00	1.0		\$28.00
07/08/2008			\$12.00	1.0		\$12.00
07/08/2008			\$31.00	1.0		\$31.00
07/29/2008	HMO W/O Adjustment from BLUE CROSS-OREGON	0010304346				(\$61.64)
07/29/2008	Insurance Payment from BLUE CROSS-OREGON	0010304346				(\$91.36)
10/31/2008	HMO W/O Adjustment from BLUE CROSS-OREGON	0010440876				(\$6.87)
10/31/2008	Insurance Payment from BLUE CROSS-OREGON	0010440876				(\$24.13)
Balance:						
			\$0.00			\$0.00
/Mary R McDonald CNM/NP/210526						
07/08/2008	OTHER ANTENATAL SCRIN (V28.8)		\$259.00	1.0		\$259.00
07/29/2008	HMO W/O Adjustment from BLUE CROSS-OREGON	0010304346				(\$23.20)
07/29/2008	Insurance Payment from BLUE CROSS-OREGON	0010304346				(\$235.80)
Balance:						
			\$0.00			\$0.00
/Mary R McDonald CNM/NP/210508						
07/08/2008	PREG,SUPERVISE OTHER (V22.1)		\$0.00	1.0		\$0.00
Balance:						
			\$0.00			\$0.00
/Mary R McDonald CNM/NP/214284						
08/21/2008	Other pre-existing hypertension, antepartum (642.23)		\$0.00	1.0		\$0.00
08/21/2008	OB OFFICE VISIT		\$0.00	1.0		\$0.00
09/10/2008	HMO W/O Adjustment from BLUE CROSS-OREGON	0010366759				(\$4.20)
09/10/2008	Insurance Payment from BLUE CROSS-OREGON	0010366759				(\$254.80)
Balance:						
			\$0.00			\$0.00
/Mary R McDonald CNM/NP/215980						
09/15/2008	PREG,SUPERVISE OTHER (V22.1)		\$0.00	1.0		\$0.00
Balance:						
			\$0.00			\$0.00
/Mary R McDonald CNM/NP/216253						
09/22/2008	PREG,SUPERVISE OTHER (V22.1)		\$0.00	1.0		\$0.00
Balance:						
			\$0.00			\$0.00

OB Services
 u/s

OV + Lat

Total Balance	\$0.00
Ins. Balance	\$0.00
Pat. Balance	\$0.00

Date	Description	QTY	AMOUNT	INS. BALANCE	PAT. BALANCE
12/12/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
12/12/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
12/12/2008	VAGINITIS,LEUKORRHEA (623.5)	1.0	\$0.00	\$0.00	\$0.00
11/24/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
11/24/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
12/01/2008	Insurance Payment from BLUE CROSS-OREGON		\$0.00	\$0.00	\$0.00
12/01/2008	Insurance Payment from BLUE CROSS-OREGON		(\$52.60)	\$0.00	\$0.00
12/01/2008	HMO W/O Adjustment from BLUE CROSS-OREGON		(\$35.40)	\$0.00	\$0.00
11/17/2008	Insurance Payment from BLUE CROSS-OREGON		\$12.00	\$0.00	\$0.00
11/17/2008	Insurance Payment from BLUE CROSS-OREGON		\$28.00	\$0.00	\$0.00
11/17/2008	Insurance Payment from BLUE CROSS-OREGON		\$28.00	\$0.00	\$0.00
11/17/2008	Insurance Payment from BLUE CROSS-OREGON		\$20.00	\$0.00	\$0.00
11/17/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
11/17/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
11/17/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
11/17/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
11/26/2008	HMO W/O Adjustment from BLUE CROSS-OREGON		(\$49.14)	\$0.00	\$0.00
11/26/2008	Insurance Payment from BLUE CROSS-OREGON		(\$100.86)	\$0.00	\$0.00
11/10/2008	Insurance Payment from BLUE CROSS-OREGON		\$50.00	\$0.00	\$0.00
11/10/2008	Insurance Payment from BLUE CROSS-OREGON		\$50.00	\$0.00	\$0.00
11/10/2008	Insurance Payment from BLUE CROSS-OREGON		\$50.00	\$0.00	\$0.00
11/10/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
11/10/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
11/07/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
11/07/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
10/24/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
10/24/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
10/13/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
10/13/2008	PREG,SUPERVISE OTHER (V22.1)	1.0	\$0.00	\$0.00	\$0.00
11/18/2008	Patient Payment from		\$1371	\$0.00	(\$20.00)
10/13/2008	Insurance Payment from BLUE CROSS-OREGON		\$102.00	\$82.00	\$20.00
09/04/2008	NAUSEA (787.02)	1.0	\$82.00	\$82.00	\$0.00
09/04/2008	VAGINITIS,LEUKORRHEA (623.5)	1.0	\$82.00	\$82.00	\$0.00
09/04/2008	ABDOMINAL PAIN GENERALIZED (789.07)	1.0	\$82.00	\$82.00	\$0.00

Tests

Lab Tests

Tests

Total Balance	Ins. Balance	Pat. Balance
\$3,453.00	\$0.00	\$3,453.00

11/18/2008	Patient Payment from					
11/13/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/218013	\$0.00	1.0	\$0.00	\$0.00
10/24/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/219246	\$0.00	1.0	\$0.00	\$0.00
11/07/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/220031	\$0.00	1.0	\$0.00	\$0.00
11/10/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/220487	\$0.00	1.0	\$0.00	\$0.00
11/10/2008			\$50.00	1.0	\$50.00	\$0.00
11/10/2008			\$50.00	1.0	\$50.00	\$0.00
11/10/2008			\$50.00	1.0	\$50.00	\$0.00
11/26/2008	HMO W/O Adjustment from BLUE CROSS-OREGON	0010490207	(\$49.14)			\$0.00
11/26/2008	Insurance Payment from BLUE CROSS-OREGON	0010490207	(\$100.86)			\$0.00
11/17/2008			\$20.00	1.0	\$20.00	\$0.00
11/17/2008			\$28.00	1.0	\$28.00	\$0.00
11/17/2008			\$28.00	1.0	\$28.00	\$0.00
11/17/2008			\$12.00	1.0	\$12.00	\$0.00
12/01/2008	HMO W/O Adjustment from BLUE CROSS-OREGON	0010504162	(\$35.40)			\$0.00
12/01/2008	Insurance Payment from BLUE CROSS-OREGON	0010504162	(\$52.60)			\$0.00
11/24/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/221348	\$0.00	1.0	\$0.00	\$0.00
12/12/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/222639	\$0.00	1.0	\$0.00	\$0.00
12/12/2008			\$50.00	1.0	\$50.00	\$0.00
12/12/2008			\$50.00	1.0	\$50.00	\$0.00
12/30/2008	HMO W/O Adjustment from BLUE CROSS-OREGON	0010547787	(\$49.14)			\$0.00
12/30/2008	Insurance Payment from BLUE CROSS-OREGON	0010547787	(\$100.86)			\$0.00
12/19/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/222322	\$0.00	1.0	\$0.00	\$0.00
12/29/2008	OB OFFICE VISIT	/Mary Regis McDonald CN/223741	\$0.00	1.0	\$0.00	\$0.00
12/29/2008			\$0.00	1.0	\$0.00	\$0.00

Patient

Tests

Lab Tests

Tests

Total Balance	\$0.00	Ins. Balance	\$0.00	Pat. Balance	\$0.00
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Date	Description	QTY	Rate	Amount	Balance
12/30/2008	HMO W/O Adjustment from BLUE CROSS-OREGON			\$0.00	\$0.00
12/30/2008	Insurance Payment from BLUE CROSS-OREGON			\$0.00	\$0.00
12/12/2008		1.0	\$50.00	\$50.00	\$0.00
12/12/2008		1.0	\$50.00	\$50.00	\$0.00
02/27/2009	Postpartum check-up (V2.2)			\$0.00	\$0.00
02/27/2009	Contract Init Other (V25.02)			\$0.00	\$0.00
02/27/2009	NO CHARGE VISIT (99499)			\$0.00	\$0.00
02/27/2009		1.0	\$50.00	\$50.00	\$0.00
02/27/2009		1.0	\$50.00	\$50.00	\$0.00
02/27/2009		1.0	\$50.00	\$50.00	\$0.00
04/29/2009	Transfer from Insurance			(\$150.00)	\$150.00
05/21/2009	PER BLUE CROSS THIS PROVIDER IS NOT ELIGIBLE ON YOUR PLAN. THANK YOU.				\$150.00
05/21/2009	Transfer from Patient			\$150.00	\$0.00
10/07/2009	Transfer from Insurance			\$150.00	\$150.00
03/01/2012	COLLECTIBLE BAD DEBT Adjustment from			\$0.00	(\$150.00)
/Mary R McDonald CNM/NP/283609					
Balance:					
				\$0.00	\$0.00
03/01/2012	COLLECTIBLE BAD DEBT Adjustment from			\$0.00	(\$25.00)
11/10/2011	Patient Payment from			\$0.00	(\$50.00)
10/21/2011	Patient Payment from			\$0.00	(\$25.00)
08/03/2011	Insurance Payment from BLUE CROSS-OREGON			(\$2,829.16)	\$0.00
08/03/2011	Risk Pool Adjustment from BLUE CROSS-OREGON			\$0.00	\$0.00
08/03/2011	HMO W/O Adjustment from BLUE CROSS-OREGON			(\$223.84)	\$0.00
08/03/2011	Transfer from Patient			\$3,053.00	(\$3,053.00)
01/03/2011	Patient Payment from			\$0.00	(\$25.00)
09/07/2010	Patient Payment from			\$0.00	(\$25.00)
07/26/2010	Patient Payment from			\$0.00	(\$25.00)
06/18/2010	Patient Payment from			\$0.00	(\$25.00)
04/19/2010	Patient Payment from			\$0.00	(\$25.00)
03/16/2010	Patient Payment from			\$0.00	(\$25.00)
10/07/2009	Transfer from Insurance			(\$3,303.00)	(\$3,303.00)
05/21/2009	Transfer from Patient			\$3,303.00	(\$3,303.00)
04/29/2009	PER BLUE CROSS THIS PROVIDER IS NOT ELIGIBLE ON YOUR PLAN. THANK YOU.				(\$3,303.00)
04/29/2009	Transfer from Insurance			\$3,303.00	\$0.00
01/01/2009	DELIVERY, NORMAL (650)			\$3,303.00	\$3,303.00
01/01/2009	Liveborn, single (V27.0)			\$3,303.00	\$3,303.00
12/29/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
12/29/2008	PREG,SUPERVISE OTHER (V22.1)			\$0.00	\$0.00
/Mary R McDonald CNM/NP/225066					
Balance:					
				\$0.00	\$0.00
12/19/2008	OB OFFICE VISIT	1.0	\$0.00	\$0.00	\$0.00
12/19/2008	PREG,SUPERVISE OTHER (V22.1)			\$0.00	\$0.00
/Mary R McDonald CNM/NP/223741					
Balance:					
				\$0.00	\$0.00
12/30/2008	Insurance Payment from BLUE CROSS-OREGON			(\$100.86)	\$0.00
12/30/2008	HMO W/O Adjustment from BLUE CROSS-OREGON			(\$49.14)	\$0.00
12/12/2008		1.0	\$50.00	\$50.00	\$0.00
12/12/2008		1.0	\$50.00	\$50.00	\$0.00
/Mary R McDonald CNM/NP/223232					
Balance:					
				\$0.00	\$0.00

Tests

Deliver

Tests

Pay to:

MT HOOD WOMENS HEALTH PC
24850 SE Stark Street, Suite 200
GRESHAM, OR 97030
(503) 491-9444

*AS of 1-1-09
Balance &
out-of-pocket
as per
provider*

atient Receipt
Tuesday, November 03, 2009

Amount Due	\$3,473.00
Amount Paid	\$20.00

Date	Description	Check #	Fee	Units	Insurance	Patient
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/Mary Regis McDonald CN/210713

07/08/2008			\$20.00	1.0		\$20.00
07/08/2008			\$9.00	1.0		\$9.00
07/08/2008			\$18.00	1.0		\$18.00
07/08/2008			\$40.00	1.0		\$40.00
07/08/2008			\$13.00	1.0		\$13.00
07/08/2008			\$13.00	1.0		\$13.00
07/08/2008			\$28.00	1.0		\$28.00
07/08/2008			\$12.00	1.0		\$12.00
07/08/2008			\$31.00	1.0		\$31.00
07/29/2008	HMO w/o Adjustment from BLUE CROSS-OREGON	0010304346	(\$61.64)			
07/29/2008	Insurance Payment from BLUE CROSS-OREGON	0010304346	(\$91.36)			
10/31/2008	HMO w/o Adjustment from BLUE CROSS-OREGON	0010440876	(\$6.87)			
10/31/2008	Insurance Payment from BLUE CROSS-OREGON	0010440876	(\$24.13)			
07/08/2008	Balance:		\$0.00			
07/08/2008	/Mary Regis McDonald CN/210526					
07/08/2008	OB Services U/S					
07/29/2008	HMO w/o Adjustment from BLUE CROSS-OREGON	0010304346	\$259.00	1.0		\$259.00
07/29/2008	Insurance Payment from BLUE CROSS-OREGON	0010304346	(\$23.20)			
07/29/2008	Balance:		\$0.00			
07/08/2008	/Mary Regis McDonald CN/210526					
07/08/2008	OB Services U/S					
07/08/2008	HMO w/o Adjustment from BLUE CROSS-OREGON	0010304346	\$259.00	1.0		\$259.00
07/08/2008	Insurance Payment from BLUE CROSS-OREGON	0010366759	(\$254.80)			
07/08/2008	Balance:		\$0.00			
07/08/2008	/Mary Regis McDonald CN/210508					
07/08/2008	OB OFFICE VISIT		\$0.00	1.0		\$0.00
07/08/2008	Balance:		\$0.00			
09/15/2008	OB OFFICE VISIT		\$0.00	1.0		\$0.00
09/15/2008	Balance:		\$0.00			
09/15/2008	/Mary Regis McDonald CN/215980					
09/15/2008	OB OFFICE VISIT		\$0.00	1.0		\$0.00
09/15/2008	Balance:		\$0.00			
09/22/2008	OB OFFICE VISIT		\$0.00	1.0		\$0.00
09/22/2008	Balance:		\$0.00			
09/22/2008	/Mary Regis McDonald CN/216253					
09/22/2008	OB OFFICE VISIT		\$0.00	1.0		\$0.00
09/22/2008	Balance:		\$0.00			
09/04/2008	/Mary Regis McDonald CN/217040					
09/04/2008	OB Services U/S					
09/04/2008	Insurance Payment from BLUE CROSS-OREGON	00102.00	\$82.00	1.0		\$82.00
09/04/2008	Balance:		\$0.00			
09/04/2008	Insurance Payment from BLUE CROSS-OREGON	0010423242	(\$82.00)			
09/04/2008	Balance:		\$0.00			

*Approved by Kathy
7669852882*

MT HOOD WOMENS HEALTH PC * 24850 SE STARK ST. SUITE 200 * GRESHAM, OR 97030-3378 * (503) 491-9444

Total Balance	\$3,453.00
Ins. Balance	\$0.00
Pat. Balance	\$3,453.00