Active Spine & Sports Care

2370 Las Posas Rd, Suite B
Camarillo, CA 93010
Phone: (805) 384-0101 Fax: 805-384-0220

Superbill

Superbill Date: 08/17/2020 **Service** 3/1/2020 thru 8/17/2020

Patient Information

ELIZABETH MAHONEY
5025 THACHER ROAD
OJAI, CA 93023

Account: 6953
Date of birth: 12/4/1970
Employer:

Payor Information

Insurance Phone:
Insured ID:
Insurance Policy Group:
Insurance Plan Name:

Dx: (M99.01) Seg and somatic dysf of cervical reg, (M99.02) Seg and somatic dysf of thoracic reg, (M54.5) Low back pain, (M25.552) Pain in LT hip, (M25.551) Pain in RT hip

Date	Type	Code	Mod	Units	Description	Date of injury	POS	Tax	Amount
06/02/2020	PCS				Payment-Cash			0.00	(70.00)
06/09/2020	CPT	00003		1	CTX TREAT			0.00	70.00
06/09/2020	PCC				Payment-Credit Card			0.00	(70.00)

Provider Information

Name: Romeo E. Dimaano, D.C.
License: DC 30203
Tax ID: 461160820
NPI: 1962754200

Total Charges	$820.00
Total Taxes	$0.00
Total	$820.00
Total Payments	$820.00