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December 18, 2018

*****AUTO**MIXED AADC 852 Tray 43 : Piece 14369
14369 1 MB 0.424
George Paul Ojala

This is Your Appointment Letter

RE: Authorization Number: 0006109903
Valid Dates: DEC 19, 2018 - FEB 17, 2019

Dear George Ojala,

The U.S. Department of Veterans Affairs (VA) has confirmed your eligibility to use the Veterans Choice Program to receive the community based services noted below.

CT Scan SEOC 1.0.1

Description: This authorization covers services associated with all medical care listed below for the referred condition.

Duration: 60 days

Frequency: One visit

Procedural Overview

1. CT scan for the referred condition indicated on consult

Additional Information:

- * Additional consultations needed relevant to the patient complaint/condition require VA review and approval.
- * All routine medications must be faxed/sent to the VA to be dispensed by the VA.
- * Urgent/emergent prescriptions can be provided for a 14-day supply only.
- * The Veteran will be required to pay out of pocket for any urgent/emergent medications and can submit a reimbursement request to their local VA facility.

PROCEDURE	CODE RANGE	QTY	TYPE	APPOINTMENT INFO
All clinically necessary covered services for Radiology CT scan in the office, outpatient setting and in network participating facilities.				12/19/2018 2:45 pm

Servicing Provider:

Mad River Comm Hospital
3800 Janes Rd
Arcata, CA 95521

Specialty: General Acute Care Hospital

Phone: (707) 822-3621

Fax: (707) 825-4929

NPI: 1518996040

Any routine lab testing, xrays, cardiology clearance testing, immunizations and specific preventive care services when medically necessary for the authorized care, are included in this authorization, whether conducted in the provider's office or by a third-party. Be sure to take your authorization letter to the lab when you go. Remind the lab to include the authorization when billing TriWest. For

"Whatever It Takes"