

**Outpatient**

<b>Group ID</b>	<b>Member ID</b>	<b>Date Entered</b>	<b>Event Close Date</b>	<b>Refrl Start Dt</b>	<b>Refrl End Dt</b>	<b>Primary ICD-9</b>
U81001	04112	12/7/2016				I12.9
U81001	00441	12/13/2016		7/22/2014	7/22/2014	M75.121
U81001	00531	3/28/2017		9/22/2011	9/22/2011	E05.20
U81001	00561	1/26/2017		9/23/2016	12/23/2016	J44.9
U81001	01351	12/5/2016	12/21/2016	9/6/2013	10/6/2013	E11.65
U81001	01452	10/28/2016		6/13/2011	6/14/2011	J35.3
U81001	06451	3/6/2017		2/7/2017	2/9/2017	M50.120
U81001	05281	3/30/2017		9/28/2015	10/27/2015	H91.20
U81001	04771	3/13/2017		8/13/2015	8/17/2015	E21.0
U81001	03521	1/19/2017		2/18/2013	2/21/2013	M25.569
U81001	01911	11/7/2016		2/18/2013	2/19/2013	Z12.11
U81001	01931	12/12/2016	12/20/2016	4/9/2012	4/9/2012	E10.9
U81001	02441	1/9/2017		1/24/2013	1/25/2013	Z12.11
U81001	02442	1/9/2017		1/24/2013	1/25/2013	K22.10
U81001	01752	11/18/2016		11/28/2011	12/2/2011	M48.06
U81001	02201	11/9/2016		9/14/2010	10/14/2010	
U81001	02202	8/8/2016		9/14/2010	10/14/2010	G43.009
U81001	02234	2/2/2017		2/19/2016	3/19/2016	S92.254G
U81001	03625	12/6/2016		5/7/2015	5/8/2015	M48.06
U81001	03625	12/9/2016		5/7/2015	5/8/2015	
U81001	03625	12/9/2016		5/7/2015	5/8/2015	
U81001	03082	3/9/2017		1/17/2011	1/17/2011	
U81001	03082	2/16/2017		1/17/2011	1/17/2011	M17.11

**Inpatient**

<b>Group ID</b>	<b>Member ID</b>	<b>Date Entered</b>	<b>Event Close Date</b>	<b>Auth Admsn D</b>	<b>Admsn Dt</b>	<b>Act Dischg Dt</b>
U81001	04941	2/8/2017	2/15/2017	2/14/2017	2/14/2017	2/14/2017

**Primary ICD-9 Desc**

HTN CKD W/STAGE 1-4 CKD/UNS CKD  
 CMPL ROT CUFF TEAR/RUPT RT SHOULDR  
 THYROTOXICOS TMG NO THYROTOX CRISIS  
 COPD UNSPECIFIED

TYPE 2 DM W/HYPERGLYCEMIA

HYPERTROPHY TONSILS W/HYP ADENOIDS

MID-CERVICAL DISC DISORDER UNSPEC

SUDDEN IDIOPATHIC HEAR LOSS UNS EAR

PRIMARY HYPERPARATHYROIDISM

PAIN IN UNSPECIFIED KNEE

ENC SCREEN MALIG NEOPLASM COLON

TYPE 1 DM WITHOUT COMPLICATIONS

ENC SCREEN MALIG NEOPLASM COLON

ULCER OF ESOPHAGUS WITHOUT BLEEDING

SPINAL STENOSIS LUMBAR REGION

MIGRAINE W/O AURA NOT INTRCT W/O SE

NDSPL FX NAVICULAR RT FT SUB DLAY

SPINAL STENOSIS LUMBAR REGION

UNI PRIM OSTEOARTHRITIS RT KNEE

Approved Days

**Secondary ICD- Secondary ICD-9 Desc**

J02.0

STREPTOCOCCAL PHARYNGITIS

E21.3

HYPERPARATHYROIDISM UNSPECIFIED

M54.17

RADICULOPATHY LUMBOSACRAL REGION

M22.41

CHONDROMALACIA PATELLAE RIGHT KNEE

Primary ICD-9

N35.011

Primary ICD-9 Desc

POST-TRAUMAT BULBOUS URETH STRICT

Third ICD-9 Third ICD-9 Desc

Fourth ICD

M51.36 OTH IV DISC DEGEN LUMBAR REGION

M47.896

M23.341 OTH DERANG ANT HORN LAT MENS RT KN

Secondary Secondary ICD-9 Desc

Third ICD-9

Fourth ICD-9 Desc	Fifth ICD-9	Fifth ICD-9 Desc	Procedure
			76770
			73221
			10022
			E1390
			A9276
			42820
			72141
			L8691
			70492
			73721
			A9276
			45380
			43239
OTHER SPONDYLOSIS LUMBAR REGION			63047
			74181
			70551
			28238
			63047
			72131
			72131
			29880
			29880

Third ICD-9 Desc	Fourth ICD-9	Fourth ICD-9 Desc	Fifth ICD-9
------------------	--------------	-------------------	-------------

**Procedure Description**

US EXAM ABDO BACK WALL COMP  
MRI JOINT UPR EXTREM W/O DYE  
FNA W/IMAGE  
O2 CONC 85%/>O2 CONC PRSC FLW RATE  
SENSOR; INVSV INTRSTL GLU MON SYS  
REMOVE TONSILS AND ADENOIDS  
MRI NECK SPINE W/O DYE  
AUDITORY OSSEOINTEGRTD EXT SND REPL  
CT SFT TSUE NCK W/O & W/DYE  
MRI JNT OF LWR EXTRE W/O DYE

SENSOR; INVSV INTRSTL GLU MON SYS  
COLONOSCOPY AND BIOPSY  
EGD BIOPSY SINGLE/MULTIPLE  
REMOVE SPINE LAMINA 1 LMBR  
MRI ABDOMEN W/O DYE  
MRI BRAIN STEM W/O DYE  
REVISION OF FOOT TENDON  
REMOVE SPINE LAMINA 1 LMBR  
CT LUMBAR SPINE W/O DYE  
CT LUMBAR SPINE W/O DYE  
KNEE ARTHROSCOPY/SURGERY  
KNEE ARTHROSCOPY/SURGERY

Fifth ICD-9 Desc

**Facility**

HME SPECIALISTS  
MINIMED DISTRIBUTION

COCHLEAR AMERICAS  
UNIVERSITY OF NEW MEXICO HOSPITAL  
CARLSBAD OPEN MRI  
CARLSBAD MEDICAL CENTER  
MINIMED DISTRIBUTION

LUBBOCK RADIOLOGY

LASER SPINE INSTITUTE

LUBBOCK HEART HOSPITAL  
LUBBOCK HEART HOSPITAL

Primary Dischrg ICD-9  
N35.011

**Provider**

NAVID SAIGAL  
JAMES BOSS  
ANDREW LANCASTER

MOHAMMED BAKDASH  
JAN HOBBS  
RICHARD GEORGE  
TAM NGUYEN

VANESSA MCGEE  
JUSTIN MCCARTHY  
JUSTIN MCCARTHY  
OMAR OSMANI

LEONEL PEREZ-LIMONTE  
LYLE FOLSOM  
TIMOTHY LUKE

JOSEPH WILSON  
JOSEPH WILSON

Primary Dischrg	ICD-9 Desc	Secondary	Secondary	Procedure	Procedure Description	Facility	Provider
	POST-TRAUMAT	BULBOUS	URETH	STRICT	53400 REVISE URETHRA STAGE	ST JOHN M	JAMES MCC

GEADY