

Client Information Sheet

314 882 5530

Source: Facebook

Appt Date \_\_\_\_\_  
Appt Time \_\_\_\_\_  
SOA done \_\_\_\_\_

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Supp

Name: Mary Franklin

Address: 1727 S. Market

County: Wichita 67211

Phone: \_\_\_\_\_

DOB: 9/30/59

Email: \_\_\_\_\_

HICN: 1CR6-J48-AD64

Part A 3/10/2010

Part B 3/10/2010

Medicaid Number \_\_\_\_\_

Current Coverage: \_\_\_\_\_

Rx: Pharmacy Used: Broadway Pharmacy

I-enroll	
faxed	
mailed	
Bconnected	
Scope Sent	
Docs Filed	

dentures

conazipam - anxiety	Soma 350	Amtrixiline
noreo 7.5 3as	Lexipro	Symbicore

\$47.00

Notes: \_\_\_\_\_

Physicians:	UHC Provider #	Provider notes
PCP Andrew Barklay - Anderson ✓		
Spec: -		
Spec: _____		
Spec: _____		
Spec: _____		
Spec: _____		
Spec: _____		
Spec: _____		

Effective Date: \_\_\_\_\_ Medicare Drug ID: \_\_\_\_\_ QMB Status: \_\_\_\_\_ Plans Avail:

Election Period: \_\_\_\_\_ Medicaid: \_\_\_\_\_

LIS Qualification: \_\_\_\_\_ Income: \_\_\_\_\_

Chronic Illness: Diabetes \_\_\_\_\_ password \_\_\_\_\_ Single / Married \_\_\_\_\_

ESRD: \_\_\_\_\_ Other coverage options: \_\_\_\_\_

VA: \_\_\_\_\_

TriCare: \_\_\_\_\_

Noreo - generic is hydrocodone/acetaminophen

Soma - generic is carisaprodo TAB

Lexapro - generic esциталпram oxalate TAB