

R&S Report: SubOwner Recoupments

Texas Medicaid & Healthcare Partnership
 Remittance and Status Report
 Date: 02/01/2016

Mail original claim to:
 Texas Medicaid & Healthcare Partnership
 P.O. Box 200555
 Austin, Texas 78720-0555

Texas Provider
 P.O. BOX 848484
 Dallas, TX 75888-1234
 (214) 555-4141

Mail all other correspondence to:
 Texas Medicaid & Healthcare Partnership
 12357-B Riata Trace Parkway
 Austin, Texas 78727-6422

TPI: 1234567-01
 NPI/API: 1234567890
 Taxonomy: 193400000X
 Benefit Code:
 Report Seq. Number: 33
 R&S Number: 99999999

(800) 925-9126

CONTROL NUMBER	RECOUPMENT AMOUNT	PROGRAM
***** FINANCIAL TRANSACTIONS *****		
SUB-OWNER RECOUPMENTS		
RECOUPMENT IS A RESULT OF YOUR AFFILIATION WITH ANOTHER PROVIDER.		
201699999999	10.53	MEDICAID
201699999999	9.47	MGD CARE
TOTAL RECOUPED:	\$ 20.00	
