

PO Box 42049 Phoenix, Arizona 85080-2049 1-866-606-8198 www.TriWest.com

June 08, 2017

George Paul Ojala

RE: Secondary Authorization Request Authorization Number: 0003431661 SAR 5/22/2017

Authorizing VAMC: SAN FRANCISCO VAMC

Dear George Paul Ojala,

TriWest Healthcare Alliance has received a request from Huy Trieu, MD for additional services that were not originally authorized by your VA.

Your VA has not responded to the request within the specified time required and TriWest is unable to process without their approval. Please contact your VA Primary Care Manager or Non-VA Care Coordination Office for further direction.

The toll-free number to contact TriWest is 1-866-606-8198. If you have any questions or concerns, you may call us to speak with a patient service representative between 8am and 8pm Monday through Friday.

You and your healthcare are our number one priority.



PO Box 42049 Phoenix, Arizona 85080-2049 1-866-606-8198 www.TriWest.com

September 29, 2017

George Paul Ojala

RE: Secondary Authorization Request Authorization Number: 0003431661 SAR 9/12/2017

Authorizing VAMC: SAN FRANCISCO VAMC

Dear George Paul Ojala,

TriWest Healthcare Alliance has received a request from Huy Trieu, MD for additional services that were not originally authorized by your VA.

Your VA has not responded to the request within the specified time required and TriWest is unable to process without their approval. Please contact your VA Primary Care Manager or Non-VA Care Coordination Office for further direction.

The toll-free number to contact TriWest is 1-866-606-8198. If you have any questions or concerns, you may call us to speak with a patient service representative between 8am and 8pm Monday through Friday.

You and your healthcare are our number one priority.



PO Box 42049 Phoenix, Arizona 85080-2049 1-866-606-8198 www.TriWest.com

March 13, 2017

George Paul Ojala

RE:

VA Authorization Number: 0003431661 Valid Dates: Apr 13, 2017 - Aug 11, 2017

Dear George Ojala,

The Department of Veterans Affairs (VA) has confirmed your eligibility to use the Veterans Choice Card program to receive the community based services noted below. Under a contract with the VA, TriWest has been authorized to approve and arrange for this care and pay your provider claim.

PROCEDURE	CODE RANGE	QTY	TYPE	APPOINTMENT INFO	
Office/Outpatient Visit New	99201 - 99205	1	Visit	4/13/2017	9:30 am
Office/Outpatient Visit Est	99211 - 99215	2	Visits		
Hospital Outpt Clinic Visit	G0463 - G0463	1	Visit		
Colon Ca Scrn Not Hi Rsk Ind	G0121 - G0121	1	Unit		
Servicing Provider:	Specialty: S	urgery			
Huy Tricu, MD	Phone: (7	(07) 442-	4175		
2321 Harrison Ave	Fax: (7	707) 445-	1722		
Eureka, CA 95501	NPI: 1	16394043	353		

Any routine lab testing, xrays, cardiology 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 include this letter's authorization number on the order form for these services. Instruct the lab to include the authorization number when billing TriWest.

IMPORTANT INFORMATION

- Take this letter, your Choice Card, a current list of medications, OHI information, a photo ID and any documentation that may have been provided by VA to your appointment or when obtaining any prescriptions.
- · Plan to arrive for your appointment at least 15 minutes before your appointment time.
- For care to be covered in the Veterans Choice Card program, you must provide information on your coverage by Other Health Insurance (OHI) plans (not including Medicare or TRICARE).
- For treatment of a non-service connected condition, VA is secondary payer to OHI including Workers Compensation or injuries related to other accidents.
- This authorization only includes the services listed above; additional care must be approved in advance by VA or TriWest.
- Please call the provider as soon as possible to confirm your appointment and provide important registration information.

"Whatever It Takes"