

CareIG Specialty Pharmacy — Claim Submission

Provider NPI: 1234567893

Provider Tax ID: 47-3821056

Patient & Insurance

Patient: Holloway, Margaret

DOB: 03/14/1961

Member ID: SPA-00291847

Payer: SilverPath Medicare Advantage

ICD-10: D83.9 — CVID, unspecified

Claim Details

DOS: 02/14/2026

Claim Frequency Code: 1 (Original)

Claim Reference: CLM-REF-20260218-9931

Submission Date: 02/18/2026

PA Number: SPA-PA-2026-3302

Physician NPI: 1487203956

Line Items

J1560: IVIG Octagam 10%, 80 units — \$4,800.00

99600: Home infusion nursing, first hour, 1 unit — \$185.00

99603: Home infusion nursing, add'l hour x2, 2 units — \$260.00

J7030: Normal saline 500mL, 3 units — \$90.00

J0171: Diphenhydramine 50mg, 1 unit — \$35.00

A4221: IV infusion supplies, 1 unit — \$770.00

Benefit Tier Billed: Medical

Total Billed: \$6,140.00