

UnitedHealthcare Insurance Company
P.O. BOX 30555
Salt Lake City, UT 84130-0555



254CEISAA1002001-07467-01
STUART I ORSHER
9 EAST 71ST STREET
NEWYORK NY 10021

Patient:	Jeffrey J. Epstein
Ref #:	C7252113314GFOA
Member:	Jeffrey Epstein
Member ID:	XXXXX5597
Group:	SOUTHERN TRUST COMPANY
Group #:	0272605
Letter ID:	INFO002

September 9, 2017

Dear Stuart I. Orsher:

We reviewed your request regarding Jeffrey J. Epstein for \$1,490.00. Unfortunately, we do not have a record of a claim for this amount. If you would like us to consider these health care expenses, we need more information.

Please provide the following information:

- A copy of the UB-92 or CMS 1500 claim form (These forms are used by physicians, health care professionals or facilities to bill insurance companies.)
- A copy of this letter
- Any supporting documentation that shows the date the claim was originally submitted

Mail the information and this letter to the above return address.
Keep a copy for your records.

If you have questions about this letter, please call us toll-free at 1-877-842-3210.

Sincerely,
The UnitedHealthcare Team

