

Dear: Palmetto GBA  
Review Dept.  
PO BOX 100238  
Columbia, SC 29202

From: Agency Name  
Agency Address  
Agency City, State Zip

#### ADR Claims

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To Whom It May Concern:

Please see attached claims that include the Physicians progress note as well as Order, Oasis, Notes, POC and all additional information throughout the care.

Page Numbers to locate documentation:

Initial Referral from Physician – Page #

Face to Face Encounter Visit– Page #

Oasis Validation report– Page #

Plan of Care-Signed and Dated– Page #

Visit Notes– Page #

Modification Orders– Page #

Thank you,

Administrator