

# CONFIDENTIAL INFORMATION

**From :**

c/o Focus Care  
500 West Cummings Park  
Suite 2700  
Woburn, MA 01801

**To :**

Dr. HALLS, ALBERT JOHN  
20306 Badger Ln  
Onancock, VA, 234171224

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HALLS, ALBERT JOHN  
20306 Badger Ln  
Onancock, VA, 234171224

c/o Focus Care  
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Woburn, MA 01801

05/30/2022

Dear HALLS, ALBERT JOHN,

Virginia Premier, in partnership with Focus Care, provided a comprehensive health visit for your patient. The visit was conducted by a Focus Care clinician. Find attached a summary of the visit for:

CHELSEY BARKER  
04/30/1997  
10074050

This summary contains an environmental assessment, a summary of existing diagnoses, a list of current medications that may help you gain additional insight into your patient's health, as well as preventive and chronic care recommendations. Please discuss the findings with your patient at their next appointment or reach out to them for urgent concerns.

If you have any questions or if you want to set up an In-Home Health Review, please call us at 1-800-318-6023 (TTY/TDD 711), Monday through Friday, 8:30 am to 9:00 pm.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark Mattingly" followed by a stylized "mo".

Mark Mattingly, M.D.  
Vice President, Medical Affairs

# Patient Assessment Summary

Name	: CHELSEY BARKER	Age	: 25
Date of Birth	: 1997-04-30	Member ID	: 10074050
Evaluator Name	: test clinicianFE, FNP	Date	: 2022-5-31 02:55 PM
Gender	: Female	Address	: PO BOX 533,MELFA ,VA
Lob	: VPM4	Marital Status	: Separated
Email	: dharani.r@nuageedtech.com	Phone	: ,
Primary Language	:	Race	: No Ethnicity

## Vital Signs

Blood Pressure	/undefined mmHG	Pulse	bpm	Respiratory Rate	
Temp		Pulse Oximetry		Pain Scale /10	
Age	25	Patients Height		Patients Weight	
BMI					

## Allergies

None

## Current Medications

None

## Over the Counter Medications / Supplements

None

## Diagnoses under Chronic Care Management

None

## Care management related to patient's activity levels

Assisitive Devices and DME

None

Falls during the past year

None

## Care management related to past medical history

Number of times in the past 12 months seen PCP :

Number of times in past 12 months been to the Emergency Room :

Number of times in past 12 months stayed overnight in hospital :

Number of times in past 12 months been in a nursing home :

Had Surgery in the last 12 months :

## Providers:

Medical Specialty	Specialist	For
Primary Care Physician	HALLS, ALBERT JOHN	

## Family History:

None

## Care management related to preventive care

Screenings completed during today's visit:

Screening Name	Screening Completed	Exam Date	Screening Result	Diagnosis	Comments
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Lob : VPM4  
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Phone : ,  
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MICROALBUMIN	No				
FOBT	No				
A1C	No				
LDL	No				
RETINAL EYE EXAM	No				
DEXA	No				
PAD	No				

PHQ 2 Score:

## Preventative Follow up needed Screenings

None

## Social

None

## Disease Management

None

Assessor Comments	
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