

This Report Pertains to EPILEPSY ASSOCIATION (10272)

Notes:

(1) Reporting for Claims Received from 01OCT16 thru 31OCT16

(2) This Report Produced on 05DEC16 From Extract Created 03DEC16

Board	Batch	CS	PS	Claims	Quantity	Billed Amount	Allowed Amount	Co-Pay Amount	Other Carrier Amount	Withhold Amount	Net Amount
CUYAM	18M000001	D	P	2	10.0	\$213.30	\$213.30	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	13	52.0	\$1,109.16	\$1,109.16	\$0.00	\$0.00	\$0.00	\$1,109.16
<i>CUYAM</i>				<i>15</i>	<i>62.0</i>	<i>\$1,322.46</i>	<i>\$1,322.46</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$1,109.16</i>
<i>G.TOT</i>				<i>15</i>	<i>62.0</i>	<i>\$1,322.46</i>	<i>\$1,322.46</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$1,109.16</i>