

This Report Pertains to CENTER FOR FAMILIES AND CHILDREN (10608)

Notes:

(1) Reporting for Claims Received from 01SEP16 thru 30SEP16

(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	A	P	135	-261.5	\$-16,206.15	\$-9,542.97	\$0.00	\$0.00	\$0.00	\$-9,542.97
			U	2	-4.2	\$-218.40	\$-127.49	\$0.00	\$0.00	\$0.00	\$-127.49
		D	P	160	381.3	\$20,453.70	\$11,958.50	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	1,513	3,843.9	\$212,059.50	\$124,286.21	\$146.88	\$0.00	\$0.00	\$124,139.33
			U	2	6.7	\$468.00	\$275.59	.	\$0.00	\$0.00	\$275.59
<i>CUYAM</i>				<i>1,812</i>	<i>3,966.2</i>	<i>\$216,556.65</i>	<i>\$126,849.84</i>	<i>\$146.88</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$114,744.46</i>
LAKEB	18M000001	P	H	2	1.3	\$142.35	\$84.59	\$0.00	\$0.00	\$0.00	\$84.59
<i>LAKEB</i>				<i>2</i>	<i>1.3</i>	<i>\$142.35</i>	<i>\$84.59</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$84.59</i>
MEDIB	18M000001	D	F	2	3.0	\$111.15	\$63.99	\$0.00	\$0.00	\$0.00	\$0.00
<i>MEDIB</i>				<i>2</i>	<i>3.0</i>	<i>\$111.15</i>	<i>\$63.99</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>
SUMMB	18M000001	D	P	16	61.0	\$2,260.05	\$1,301.13	\$0.00	\$0.00	\$0.00	\$0.00
<i>SUMMB</i>				<i>16</i>	<i>61.0</i>	<i>\$2,260.05</i>	<i>\$1,301.13</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>
<i>G.TOT</i>				<i>1,832</i>	<i>4,031.5</i>	<i>\$219,070.20</i>	<i>\$128,299.55</i>	<i>\$146.88</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$114,829.05</i>