

This Report Pertains to CLEVELAND DEPARTMENT OF HEALTH (1073)

Notes:

(1) Reporting for Claims Received from 01AUG16 thru 31AUG16

(2) This Report Produced on 07NOV16 From Extract Created 05NOV16

Board	Batch	CS	PS	Claims	Quantity	Billed Amount	Allowed Amount	Co-Pay Amount	Other Carrier Amount	Withhold Amount	Net Amount
CUYAA	18A000001	P	P	14	84.0	\$11,232.00	\$11,232.00	\$0.00	\$0.00	\$0.00	\$11,232.00
<i>CUYAA</i>				<i>14</i>	<i>84.0</i>	<i>\$11,232.00</i>	<i>\$11,232.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$11,232.00</i>
<i>G.TOT</i>				<i>14</i>	<i>84.0</i>	<i>\$11,232.00</i>	<i>\$11,232.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$11,232.00</i>