

This Report Pertains to NEIL KENNEDY RECOVERY CLINIC (1365)

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
MAHOA	76B000001	D	P	2	2.0	\$177.00	\$177.00	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	296	296.0	\$26,196.00	\$26,196.00	\$0.00	\$0.00	\$0.00	\$26,196.00
MAHOA				298	298.0	\$26,373.00	\$26,373.00	\$0.00	\$0.00	\$0.00	\$26,196.00
G.TOT				298	298.0	\$26,373.00	\$26,373.00	\$0.00	\$0.00	\$0.00	\$26,196.00