

This Report Pertains to MERIDIAN COMMUNITY CARE (1366)

Notes:

(1) Reporting for Claims Received from 01NOV16 thru 30NOV16

(2) This Report Produced on 11JAN17 From Extract Created 07JAN17

Board	Batch	CS	PS	Claims	Quantity	Billed Amount	Allowed Amount	Co-Pay Amount	Other Carrier Amount	Withhold Amount	Net Amount
COLUB	76B000001	D	P	63	116.9	\$4,063.02	\$1,471.27	\$0.00	\$0.00	\$0.00	\$0.00
<i>COLUB</i>				63	116.9	\$4,063.02	\$1,471.27	\$0.00	\$0.00	\$0.00	\$0.00
MAHOA	76B000001	D	P	55	168.0	\$4,171.85	\$3,266.61	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	278	422.1	\$15,858.10	\$14,607.31	\$1113.66	\$0.00	\$0.00	\$13,493.65
<i>MAHOA</i>				333	590.1	\$20,029.95	\$17,873.92	\$1113.66	\$0.00	\$0.00	\$13,493.65
MAHOM	76B000001	D	F	1	0.5	\$107.15	\$105.44	\$0.00	\$0.00	\$0.00	\$0.00
<i>MAHOM</i>				1	0.5	\$107.15	\$105.44	\$0.00	\$0.00	\$0.00	\$0.00
STARB	76B000001	D	P	3	2.2	\$244.01	\$190.04	\$0.00	\$0.00	\$0.00	\$0.00
<i>STARB</i>				3	2.2	\$244.01	\$190.04	\$0.00	\$0.00	\$0.00	\$0.00
TRUMB	76B000001	D	P	55	63.4	\$3,060.44	\$1,182.12	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	12	18.0	\$1,807.14	\$1,557.12	\$0.00	\$0.00	\$0.00	\$1,557.12
<i>TRUMB</i>				67	81.4	\$4,867.58	\$2,739.24	\$0.00	\$0.00	\$0.00	\$1,557.12
<i>G.TOT</i>				467	791.1	\$29,311.71	\$22,379.91	\$1113.66	\$0.00	\$0.00	\$15,050.77