

This Report Pertains to JEWISH FAMILY SERVICE ASSOCIATION OF CLEVELAND OHIO (4618)

Notes:

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

(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
CUYAM	18M000001	D	P	10	51.0	\$1,122.09	\$462.11	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	305	961.0	\$36,500.33	\$32,931.28	\$40.50	\$0.00	\$0.00	\$32,890.78
<i>CUYAM</i>				<i>315</i>	<i>1,012.0</i>	<i>\$37,622.42</i>	<i>\$33,393.39</i>	<i>\$40.50</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$32,890.78</i>
LAKEB	18M000001	D	P	2	7.0	\$236.25	\$33.75	\$0.00	\$0.00	\$0.00	\$0.00
<i>LAKEB</i>				<i>2</i>	<i>7.0</i>	<i>\$236.25</i>	<i>\$33.75</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>
<i>G.TOT</i>				<i>317</i>	<i>1,019.0</i>	<i>\$37,858.67</i>	<i>\$33,427.14</i>	<i>\$40.50</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$32,890.78</i>