

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

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	D	P	7	29.0	\$867.75	\$668.25	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	441	1,280.5	\$48,559.76	\$42,802.54	\$20.25	\$0.00	\$0.00	\$42,782.29
<i>CUYAM</i>				<i>448</i>	<i>1,309.5</i>	<i>\$49,427.51</i>	<i>\$43,470.79</i>	<i>\$20.25</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$42,782.29</i>
LAKEB	18M000001	P	H	3	8.0	\$270.00	\$270.00	\$0.00	\$0.00	\$0.00	\$270.00
<i>LAKEB</i>				<i>3</i>	<i>8.0</i>	<i>\$270.00</i>	<i>\$270.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$270.00</i>
<i>G.TOT</i>				<i>451</i>	<i>1,317.5</i>	<i>\$49,697.51</i>	<i>\$43,740.79</i>	<i>\$20.25</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$43,052.29</i>