

This Report Pertains to MERIDIAN COMMUNITY CARE (1366)

Notes:

(1) Reporting for Claims Received from 01APR18 thru 30APR18

(2) This Report Produced on 02JUL18 From Extract Created 30JUN18

Board	Batch	CS	PS	Claims	Quantity	Billed Amount	Allowed Amount	Co-Pay Amount	Other Carrier Amount	Withhold Amount	Net Amount
MAHOA	76B000001	A	P	20	-114.0	\$-1,425.00	\$-1,085.28	\$0.00	\$0.00	\$0.00	\$-1,085.28
		D	P	35	220.0	\$2,808.00	\$2,143.60	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	82	627.3	\$9,005.93	\$7,030.57	\$0.00	\$0.00	\$0.00	\$7,030.57
<i>MAHOA</i>				<i>137</i>	<i>733.3</i>	<i>\$10,388.93</i>	<i>\$8,088.89</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$5,945.29</i>
MAHOM	76B000001	D	P	1	4.0	\$108.00	\$90.00	\$0.00	\$0.00	\$0.00	\$0.00
<i>MAHOM</i>				<i>1</i>	<i>4.0</i>	<i>\$108.00</i>	<i>\$90.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>
TRUMB	76B000001	A	P	12	-45.2	\$-834.17	\$-682.85	\$0.00	\$0.00	\$0.00	\$-682.85
		D	P	112	317.9	\$42,956.34	\$15,364.86	\$0.00	\$0.00	\$0.00	\$0.00
		P	P	168	286.8	\$14,960.47	\$7,888.55	\$0.00	\$0.00	\$0.00	\$7,888.55
<i>TRUMB</i>				<i>292</i>	<i>559.5</i>	<i>\$57,082.64</i>	<i>\$22,570.56</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$7,205.70</i>
<i>G.TOT</i>				<i>430</i>	<i>1,296.8</i>	<i>\$67,579.57</i>	<i>\$30,749.45</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$0.00</i>	<i>\$13,150.99</i>