INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202012112912014475

SUBMITTER ID = SUNNYSI SUNNYSIDE

			-	
REG LOC 001	CLIENT 2004478	SERVICE 2004478	NAME ACERNO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # CLAIRE 01/28/1922 GNT04447100
INV # 217964 217964 217964 217964	LINE # 1 2 3 4	PROCEDURE T1019 T1019 T1019 T1019	CODE	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 20.00 75.60 11/20/12 11/20/12 14.00 52.92 11/21/12 11/21/12 20.00 75.60 11/23/12 11/23/12 20.00 75.60 CLAIM TOTAL 279.72 CLAIM ACCOUNT REF. 2179640012004478
REG LOC	CLIENT 2006118	SERVICE 2006118	NAME ALI	CLAIM TOTAL 279.72 CLAIM ACCOUNT REF. 2179640012004478 BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # AMRUNIS 10/05/1934 93703296700
INV # 217965 217965 217965 217965 217965 217965	LINE # 1 2 3 4 5 6	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 16.00 60.48 11/19/12 11/19/12 16.00 60.48 11/20/12 11/20/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/22/12 11/22/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 11/23/12 11/23/12 362.88 CLAIM ACCOUNT REF. 2179650012006118
REG LOC 001	CLIENT 2011654	SERVICE 2011654	NAME ALIX	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PEDRO 01/31/1937 GNT03916300
INV # 217966 217966 217966 217966 217966 217966 217966	LINE # 1 2 3 4 5 6	PROCEDURE S5126 S5126 S5126 S5126 S5126 S5126 S5126 S5126	CODE	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 1.00 196.56 11/18/12 11/18/12 1.00 196.56 11/19/12 11/19/12 1.00 196.56 11/20/12 11/20/12 1.00 196.56 11/21/12 11/21/12 1.00 196.56 11/22/12 11/22/12 1.00 196.56 11/22/12 11/22/12 1.00 196.56 11/23/12 11/23/12 1.00 196.56 11/23/12 11/23/12 1.00 196.56 CLAIM TOTAL 1,375.92 CLAIM ACCOUNT REF. 2179660012011654
REG LOC 001	CLIENT 2010843	SERVICE 2010843	NAME ALSTON	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ZULINE 05/07/1927 GNT06188400
INV # 217967 217967 217967 217967 217967 217967 217967 217967	LINE # 1 2 3 4 5 6 7 8	PROCEDURE T1019 T1019 T1019 T1019 T1019 T1019 T1019 T1019	CODE	FROM DT THRU DT UNITS AMOUNT 11/10/12 11/10/12 32.00 120.96 11/17/12 11/17/12 32.00 120.96 11/18/12 11/18/12 32.00 120.96 11/19/12 11/19/12 32.00 120.96 11/20/12 11/20/12 32.00 120.96 11/21/12 11/21/12 32.00 120.96 11/21/12 11/21/12 32.00 120.96 11/22/12 11/22/12 32.00 120.96 11/23/12 11/23/12 32.00 120.96 11/23/12 11/23/12 32.00 120.96 11/23/12 11/23/12 32.00 120.96 11/23/12 11/23/12 32.00 120.96
REG LOC 001	CLIENT 2011581	SERVICE 2011581	NAME ASH	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MARIE 08/11/1925 GNT06270600
INV #	LINE #	PROCEDURE	CODE	FROM DT THRU DT UNITS AMOUNT

REPORT DATE 11/ INPUT FILE = /V	29/12 SUNN OL444/COMPSUP/HIPAAIN/E320	YSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 2012112912014475
SUBMITTER ID =		
PROVIDER ID =	113502051 SUNNISIDE	NPI = 113440/492
217968 1 217968 2 217968 3	T1019 T1019 T1019	11/19/12 11/19/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 217968001201158
REG LOC CLIE 001 20078		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # JAMILA 02/19/1919 GNT00018500
INV # LINE 217969 1 217969 2 217969 3 217969 4 217969 5 217969 6 217969 7	S5125 S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 36.00 136.08 11/18/12 11/18/12 32.00 120.96 11/19/12 11/19/12 38.00 143.64 11/20/12 11/20/12 48.00 181.44 11/21/12 11/21/12 40.00 151.20 11/22/12 11/22/12 44.00 166.32 11/23/12 11/23/12 40.00 151.20 CLAIM TOTAL 1,050.84 CLAIM ACCOUNT REF. 217969001200781
REG LOC CLIE		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 10/30/1926 GNT06467800
INV # LINE 217970 1 217970 2	T1019	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 16.00 60.48 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 217970001201150
REG LOC CLIE 001 20117		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 11/08/1924 GNT00493600
INV # LINE 217971 1 217971 2 217971 3 217971 4 217971 5 217971 6 217971 7	S5125 S5125 S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 20.00 75.60 11/18/12 11/18/12 20.00 75.60 11/19/12 11/19/12 20.00 75.60 11/20/12 11/20/12 20.00 75.60 11/21/12 11/21/12 20.00 75.60 11/22/12 11/22/12 20.00 75.60 11/23/12 11/22/12 20.00 75.60 11/23/12 11/23/12 20.00 75.60 11/23/12 11/23/12 50.00 75.60 CLAIM TOTAL 529.20 CLAIM ACCOUNT REF. 217971001201176
REG LOC CLIE 001 20066		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # CONCETT 02/27/1916 GNT04556300
INV # LINE 217972 1 217972 2 217972 3 217972 4 217972 5	S5125	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 36.00 136.08 11/20/12 11/20/12 36.00 136.08 11/21/12 11/21/12 36.00 136.08 11/22/12 11/22/12 20.00 75.60 11/23/12 11/23/12 36.00 136.08 CLAIM TOTAL 619.92 CLAIM ACCOUNT REF. 217972001200663
REG LOC CLIE 001 20103		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 10/04/1935 GNT05955100
INV # LINE	# PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

DEDODT I	እጥሮ 11/20/	/12	CHMMV	CIDE CITYWIDE		מחדו	א האתא בידו	רב סבה∩סיד / הטויד027	/EDIS) PAGE 3
INPUT FI	LE = /VOL4	144/COMPSUP	SUNNY. HIPAAIN/E32020/	51DE CITYWIDE 012112912014475		HIPA	A DAIA FII	LE REPORT (PHLT837,	/EDIS) PAGE 3
	, , , , ,	,	,,						
	R ID = SUN		SUNNYSIDE						
PROVIDE	R ID = 113	3502051 SUI	NNYSIDE			N	PI = 11544	407492	
217973	1	S5125		11/17/12	11/17/12	40.00	151.20		
217973	2	S5125		11/18/12			151.20		
217973	3	S5125		11/19/12			151.20		
217973	4	S5125		11/20/12			151.20		
217973	5	S5125		11/21/12			151.20		
217973	6 7	S5125		11/22/12			151.20		
217973	/	S5125		11/23/12		40.00 IM TOTAL	151.20 1,058.40	CLAIM ACCOUNT	REF. 2179730012010374
					CLA	IM TOTAL	1,030.40	CHAIM ACCOONT	KEF: 21/9/300120103/4
REG LOC		SERVICE	NAME	BIF	RTH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #	
001	2011797	2011797	CARTAGENA	LUZ 10/	05/1948	GNT00039700			
TATE 7 44	T TNTD #	DDOGEDIJDE	CODE	EDOM DE	minii pm	INITEG	AMOTINE		
INV # 217974	LINE # 1	T1019	CODE	FROM DT 11/19/12			AMOUNT 75.60		
217974	2	T1019		11/23/12			75.60		
21,3,1	2	11019		11/23/12		IM TOTAL	151.20	CLAIM ACCOUNT	REF. 2179740012011797
REG LOC	CLIENT	SERVICE	NAME	DTE	RTH DATE	DECIDIENT II	מסדמת ת	AUTHORIZATION #	
001		2002769	CEPEDA		07/1932	93700964900		AUTHORIZATION #	
	2002707								
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
217975	1	T1019		11/19/12	11/19/12	24.00	90.72		
217975	2	T1019		11/20/12	11/20/12	24.00	90.72		
217975 217975	3 4	T1019 T1019		FROM DT 11/19/12 11/20/12 11/21/12 11/23/12	11/21/12	24.00 24.00	90.72 90.72		
21/9/5	4	11019		11/23/12	11/23/12 CLA	.IM TOTAL	362.88	CLAIM ACCOUNT	REF. 2179750012002769
REG LOC		SERVICE	NAME					AUTHORIZATION #	
001	2008320	2008320	COLAVITTI		23/1911	GNT04482200			
INV #	LINE #	PROCEDURE	CODE	FROM DT 11/17/12 11/18/12 11/19/12 11/20/12 11/21/12 11/22/12 11/23/12	דו דודוד די	UNITS	AMOUNT		
217976	1	S5125	CODE	11/17/12	11/17/12	32.00	120.96		
217976	2	S5125		11/18/12	11/18/12	32.00	120.96		
217976	3	S5125		11/19/12	11/19/12	32.00	120.96		
217976	4	S5125		11/20/12	11/20/12	32.00	120.96		
217976	5	S5125		11/21/12	11/21/12	32.00	120.96		
217976 217976	6 7	S5125 S5125		11/22/12	11/22/12	32.00 32.00	120.96 120.96		
21/9/0	/	55125		11/23/12	T1/23/12	JZ.00 IM TOTAL	846.72	CI.AIM ACCOUNT	REF. 2179760012008320
					CLI	1111 1011111	010.72	CERTIFI TICCOUNT	REI . 2179700012000320
REG LOC		SERVICE	NAME COLEMAN	BIF	RTH DATE	RECIPIENT I		AUTHORIZATION #	
001	2009790	2009790	COLEMAN	REGINA 11/	26/1958	GNT06002000	0		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
217977	1 LINE #	S5125	CODE		11/09/12		30.24		
217977	2	S5125			11/13/12		30.24		
217977	3	S5125		11/14/12	11/14/12	8.00	30.24		
217977	4	S5125		11/16/12			30.24		
217977	5	S5125		11/17/12			120.96		
217977 217977	6 7	S5125 S5125			11/18/12 11/20/12		120.96 75.60		
21/2//	,	22172		11/20/12	11/20/12	20.00	75.00		
1									

		DATA FILE REPORT (PHLT837/EDIS) PAGE 4
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SUBMITTER ID = SUNNYSI SUNNYSIDE PROVIDER ID = 113502051 SUNNYSIDE		I = 1154407492
217977 8 S5125 217977 9 S5125	11/21/12 11/21/12 20.00 11/23/12 11/23/12 8.00 CLAIM TOTAL	75.60 30.24 544.32 CLAIM ACCOUNT REF. 2179770012009790
REG LOC CLIENT SERVICE NAME 001 2011769 2011769 COMET	JULIA BIRTH DATE RECIPIENT ID 10/07/1934 GNT04442600	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 217978 1 T1019 217978 2 T1019 217978 3 T1019 217978 4 T1019 217978 5 T1019	FROM DT THRU DT UNITS 11/19/12 11/19/12 24.00 11/20/12 11/20/12 24.00 11/21/12 11/21/12 24.00 11/22/12 11/22/12 24.00 11/23/12 11/23/12 24.00 CLAIM TOTAL	AMOUNT 90.72 90.72 90.72 90.72 90.72 453.60 CLAIM ACCOUNT REF. 2179780012011769
REG LOC CLIENT SERVICE NAME 001 2011798 2011798 CUCALON	BIRTH DATE RECIPIENT ID 04/20/1926 GNT05761000	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 217979 1 S5125 217979 2 S5125 217979 3 S5125 217979 4 S5125 217979 5 S5125	FROM DT THRU DT UNITS 11/14/12 11/14/12 44.00 11/20/12 11/20/12 44.00 11/21/12 11/21/12 44.00 11/22/12 11/22/12 44.00 11/23/12 11/23/12 44.00 CLAIM TOTAL	AMOUNT 166.32 166.32 166.32 166.32 166.32 831.60 CLAIM ACCOUNT REF. 2179790012011798
REG LOC CLIENT SERVICE NAME 001 2011599 2011599 DELEON	JUANA BIRTH DATE RECIPIENT ID 04/18/1918 GNT04795000	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 217980 1 S5125 217980 2 S5125 217980 3 S5125 217980 4 S5125 217980 5 S5125	FROM DT THRU DT UNITS 11/19/12 11/19/12 24.00 11/20/12 11/20/12 24.00 11/21/12 11/21/12 24.00 11/22/12 11/22/12 24.00 11/23/12 11/23/12 24.00 CLAIM TOTAL	AMOUNT 90.72 90.72 90.72 90.72 90.72 90.72 453.60 CLAIM ACCOUNT REF. 2179800012011599
REG LOC CLIENT SERVICE NAME 001 2011799 2011799 DEZUNIGA	BIRTH DATE RECIPIENT ID 03/06/1924 GNT04191700	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 217981 1 T1019	FROM DT THRU DT UNITS 11/21/12 11/21/12 16.00 CLAIM TOTAL	AMOUNT 60.48 CLAIM ACCOUNT REF. 2179810012011799
REG LOC CLIENT SERVICE NAME 001 2009982 2009982 DIAZ 2	CARMEN BIRTH DATE RECIPIENT ID GNT6048400	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 217982 1 S5125 217982 2 S5125 217982 3 S5125	FROM DT THRU DT UNITS 11/17/12 11/17/12 24.00 11/19/12 11/19/12 32.00 11/20/12 11/20/12 32.00	AMOUNT 90.72 120.96 120.96

REPORT DA	TE 11/29/	12 44/COMPSUP/HIP	SUNNYSII TN / F 2 O 2 O 1 O 1	DE CITYWIDE	E 175	HIPA	A DATA FI	LE REPORT (PHLT83	7/EDIS) PAGE 5
INPOT FIL	ie – /von-	44/COMPSOP/HIP	AAIN/E3202012	2112912014	175					
	ID = SUN		SUNNYSIDE					405400		
PROVIDER	ID = 113	502051 SUNNYS	SIDE			N	PI = 1154	407492		
217982	4	S5125		11/21/1	12 11/21/12	32.00	120.96			
217982	5	S5125			12 11/22/12		120.96			
217982	6	S5125		11/23/1	12 11/23/12		120.96	GT 3 T14 3 GGGTTT		015000001000000
					CLF	AIM TOTAL	695.52	CLAIM ACCOUN	T REF.	2179820012009982
REG LOC	CLIENT	SERVICE NA	ME	I	BIRTH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #		
001	2006667	2006667 DI	AZ AI	LICIA (09/21/1918	GNT05048800				
INV #	LINE #	PROCEDURE COD	.7(FROM D	THRU DT	UNITS	AMOUNT			
217983	1	T1019	-		12 11/17/12		75.60			
217983	2	T1019			12 11/18/12		75.60			
217983	3	T1019			12 11/19/12		105.84			
217983 217983	4 5	T1019 T1019			l2 11/20/12 l2 11/21/12		105.84 105.84			
217983	6	T1019			12 11/21/12		105.84			
217983	7	T1019			12 11/23/12		105.84			
					CLA	AIM TOTAL	680.40	CLAIM ACCOUN	T REF.	2179830012006667
REG LOC	CLIENT	SERVICE NA	ME	ī	BIRTH DATE	RECIPTENT II	D PRIOR	AUTHORIZATION #		
001	2004554				09/17/1938	GNT01219900		110111011111111111111111111111111111111		
INV #	LINE #	PROCEDURE COD	NE.	FROM D	r THRU DT	UNITS	AMOUNT			
217984	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S5125)E		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		90.72			
217984	2	S5125			12 11/20/12		86.94			
217984	3	S5125			l2 11/22/12		90.72			
217984	4	S5125		11/23/1	l2 11/23/12		90.72	CT 7 TM 7 CCCITA	m	0170040010004554
					CLA	AIM TOTAL	359.10	CLAIM ACCOUN	T REF.	2179840012004554
REG LOC	CLIENT		ME		BIRTH DATE	RECIPIENT I		AUTHORIZATION #		
001	2011256	2011256 DU	IRAN CA	ARMEN (07/16/1925	GNT06350900				
INV #	LINE #	PROCEDURE COD	Œ	FROM D	THRU DT	UNITS	AMOUNT			
217985	1	S5125			12 11/19/12		98.28			
217985	2	S5125		, . ,	12 11/20/12		98.28			
217985 217985	3 4	S5125 S5125			l2 11/21/12 l2 11/22/12		98.28 98.28			
217985	5	S5125 S5125			12 11/22/12 12 11/23/12		98.28			
217503	J	55125		11/23/		AIM TOTAL	491.40	CLAIM ACCOUN	T REF.	2179850012011256
REG LOC	CLIENT	CEDUTCE MA	ME		מדטיינו האיים	DECIDIENT II	מסדמת מ	AUTHORIZATION #		
001	2006124		ME RLINGTON AI		BIRTH DATE 06/25/1947	RECIPIENT II GNT04981500		AUTHORIZATION #		
001		2000121 211			30, 23, 131,	011101701500				
INV #	LINE #	PROCEDURE COD	Œ	FROM D		UNITS	AMOUNT			
217986 217986	1 2	S5125 S5125			l2 11/17/12 l2 11/19/12		90.72 105.84			
217986	3	S5125 S5125			12 11/19/12 12 11/20/12		105.84			
217986	4	S5125			12 11/21/12		105.84			
217986	5	S5125			L2 11/22/12		105.84			
217986	6	S5125		11/23/1	L2 11/23/12		105.84	OT A TM A COOLIN		2170060012006124
					CLF	AIM TOTAL	619.92	CLAIM ACCOUN	I KEF.	2179860012006124
REG LOC	CLIENT	SERVICE NA	ME	I	BIRTH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #		
001	2009394	2009394 EC	KMAN LO	ois (04/02/1919	GNT05317600				
INV #	LINE #	PROCEDURE COD	Œ	FROM D	THRU DT	UNITS	AMOUNT			
		_ 1.00LL01(L 00D	_	110H D		01.110	12100111			

REPORT DA	TE 11/29/	12	SUNNY	SIDE CITYWIDE 012112912014475		HIPA	A DATA FII	LE REPORT (PHLT837/ED:	IS) PAGE 6
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SUBMITTER		NYSI 502051 SUI	SUNNYSIDE NNYSIDE			N	IPI = 11544	407492	
			WWIGIDE	11 /18 /10	11 /15 /10			107192	
217987 217987	1 2	T1020 T1020		11/17/12 11/18/12			196.56 196.56		
217987	3 4	T1020 T1020		11/19/12 11/20/12			196.56 196.56		
217987 217987	5	T1020		11/21/12			196.56		
217987 217987	6 7	T1020 T1020		11/22/12 11/23/12			196.56 196.56		
21/90/	,	11020		11/23/12		I.00 LIM TOTAL	1,375.92	CLAIM ACCOUNT RE	F. 2179870012009394
REG LOC	CLIENT	SERVICE	NAME		TH DATE	RECIPIENT I		AUTHORIZATION #	
001	2003052	2003052	ESCOBAR	DOMINGA 08/	04/1937	GNT04459300			
INV # 217988	LINE # 1	PROCEDURE S5125	CODE	FROM DT 11/13/12		UNITS 4.00	AMOUNT 15.12		
21/900	1	55125		11/13/12		IM TOTAL	15.12	CLAIM ACCOUNT RE	F. 2179880012003052
REG LOC	CLIENT 2007377	SERVICE 2007377	NAME ESPINOZA		TH DATE 23/1918	RECIPIENT I		AUTHORIZATION #	
				,					
INV # 217989	LINE # 1	PROCEDURE S5125	CODE	FROM DT 11/17/12		UNITS 30.00	AMOUNT 113.40		
217989	2	S5125		11/19/12	11/19/12	30.00	113.40		
217989 217989	3 4	S5125 S5125		11/20/12 11/21/12			113.40 113.40		
217989	5 6	S5125		11/22/12			113.40		
217989	ь	S5125		11/23/12		30.00 IM TOTAL	113.40 680.40	CLAIM ACCOUNT RE	F. 2179890012007377
REG LOC	CLIENT	SERVICE	NAME		TH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #	
001	2011890	2011890	ESTEVES	CARMEN 00/	00/0000	GNT033896			
INV # 217990	LINE # 1	PROCEDURE S5125	CODE	FROM DT 11/20/12	THRU DT	UNITS 20.00	AMOUNT 75.60		
217990	2	S5125 S5125		11/21/12	11/21/12	20.00	75.60		
217990 217990	3 4	S5125 S5125		11/22/12 11/23/12	11/22/12	20.00	75.60 75.60		
217990	1	03123		11/23/12		IM TOTAL	302.40	CLAIM ACCOUNT RE	F. 2179900012011890
REG LOC 001	CLIENT 2011220	SERVICE 2011220	NAME EXPOSITO		TH DATE 28/1924	RECIPIENT I		AUTHORIZATION #	
				,					
INV # 217991	LINE # 1	PROCEDURE T1019	CODE	FROM DT 11/01/12	THRU DT	UNITS 32.00	AMOUNT 120.96		
217991	2	T1019		11/10/12	11/10/12	32.00	120.96		
217991 217991	3 4	T1019 T1019		11/17/12 11/18/12	11/17/12 11/18/12	32.00 32.00	120.96 120.96		
217991	5	T1019		11/19/12	11/19/12	32.00	120.96		
217991 217991	6 7	T1019 T1019		11/21/12 11/22/12			120.96 120.96		
217991	8	T1019		11/23/12	11/23/12	32.00	120.96	OT A TM A OCCUPANT DES	3 2170010010011200
					CLA	IM TOTAL	967.68	CLAIM ACCOUNT REI	F. 2179910012011220

INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202012112912014475

SUBMITTER ID = SUNNYSI SUNNYSIDE

PROVIDER ID = 113502051 SUNNYSIDE	NPI = 1154407492
REG LOC CLIENT SERVICE NAME 001 2000600 2000600 FELICIANO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 10/17/1935 GNT04140800
INV # LINE # PROCEDURE CODE 217992	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 16.00 60.48 11/18/12 11/18/12 16.00 60.48 11/19/12 11/19/12 24.00 90.72 11/20/12 11/20/12 24.00 90.72 11/21/12 11/21/12 24.00 90.72 11/22/12 11/22/12 24.00 90.72 11/23/12 11/23/12 24.00 90.72 11/23/12 11/23/12 24.00 90.72 CLAIM TOTAL 574.56 CLAIM ACCOUNT REF. 2179920012000600
REG LOC CLIENT SERVICE NAME 001 2008314 FERNANDEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ANA 08/14/1947 GNT05242300
INV # LINE # PROCEDURE CODE 217993	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 16.00 60.48 11/18/12 11/18/12 16.00 60.48 11/19/12 11/19/12 16.00 60.48 11/20/12 11/20/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/23/12 11/23/12 12.00 45.36 CLAIM TOTAL 347.76 CLAIM ACCOUNT REF. 2179930012008314
REG LOC CLIENT SERVICE NAME 001 2011852 2011852 FERNANDEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # FELIX 11/20/1935 GNT04997300
INV # LINE # PROCEDURE CODE 217994 1 S5125 217994 2 S5125 217994 3 S5125 217994 4 S5125 217994 5 S5125	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 16.00 60.48 11/20/12 11/20/12 12.00 45.36 11/21/12 11/21/12 16.00 60.48 11/22/12 11/22/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 CLAIM TOTAL 287.28 CLAIM ACCOUNT REF. 2179940012011852
REG LOC CLIENT SERVICE NAME 001 2009960 FERRARA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ANN 07/27/1925 GNT05748600
INV # LINE # PROCEDURE CODE 217995	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 24.00 90.72 11/18/12 11/18/12 24.00 90.72 11/19/12 11/19/12 32.00 120.96 11/20/12 11/20/12 32.00 120.96 11/21/12 11/21/12 32.00 120.96 11/22/12 11/22/12 32.00 120.96 11/23/12 11/23/12 32.00 120.96 11/23/12 11/23/12 32.00 120.96 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 786.24 CLAIM ACCOUNT REF. 2179950012009960
REG LOC CLIENT SERVICE NAME 001 2009589 FERRO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # JOSEPHI 10/09/1915 GNT05940400
INV # LINE # PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

REPORT DA	TE 11/29/	12	SU	JNNYSIDE CITYWIDE 3202012112912014475		HIPAA	DATA FII	LE REPORT (PHLT837/	/EDIS) PAGE 8
INDOL FIT	E = /VOL4	44/COMPSUP	/HIPAAIN/E3	3202012112912014475	•				
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		502051 SUI		,1DE		NP	I = 11544	107492	
217996	1	T1019			11/17/12		90.72		
217996	2	T1019			11/18/12		60.48		
217996	3	T1019			11/19/12		181.44		
217996	4	T1019			11/20/12		181.44		
217996	5	T1019		11/21/12	11/21/12		181.44		
					CLA	IM TOTAL	695.52	CLAIM ACCOUNT	REF. 2179960012009589
REG LOC	CLIENT	SERVICE	NAME	RTE	TH DATE	PECIDIENT ID	DR T OR	AUTHORIZATION #	
001	2011800	2011800	FRANCIS		22/1924	GNT03398100	TRIOR	AUTHORIZATION #	
001	2011000	2011000	11011(010	VICIONI II,	22/1/21	011103330100			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
217997	1	S5125		11/19/12	11/19/12		105.84		
217997	2	S5125			11/20/12		105.84		
217997	3	S5125			11/21/12		105.84		
217997	4	S5125			11/22/12		105.84		
217997	5	S5125		11/23/12	11/23/12		105.84		
					CLA	IM TOTAL	529.20	CLAIM ACCOUNT	REF. 2179970012011800
REG LOC	CLIENT	SERVICE	NAME	BIE	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001	2011801	2011801	GARCIA		09/1930	GNT02860800	1101010		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
217998	1	S5125			11/17/12		105.84		
217998	2	S5125			11/18/12		105.84		
217998	3	S5125			11/19/12		105.84		
217998	4 5	S5125 S5125			11/20/12 11/21/12		105.84 105.84		
217998 217998	5 6	S5125 S5125			11/21/12		105.84		
217998	7	S5125 S5125			11/23/12		105.84		
21/990	,	33123		11/23/12		IM TOTAL	740.88	CLAIM ACCOUNT	REF. 2179980012011801
					CLA	IM TOTAL	740.00	CHAIM ACCOUNT	REF. 21/9900012011001
REG LOC	CLIENT	SERVICE	NAME	BIF	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001	2009435	2009435	GOMEZ	YOLANDA 11/	26/1934	GNT05745100			
TATE !!	T TATE !!	DDOGEDITA	CODE	EDOM 55	minii p	INITEG	334011377		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT 11/19/12	UNITS 16.00	AMOUNT 60.48		
217999 217999	1 2	T1019 T1019			11/19/12		60.48		
217999	3	T1019			11/21/12		75.60		
21/000	3	11019		11/25/12		IM TOTAL	196.56	CLAIM ACCOUNT	REF. 2179990012009435
REG LOC	CLIENT	SERVICE	NAME		TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001	2011662	2011662	GONZALEZ	MO RAMON 02/	10/1935	GNT02343300			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218000	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S5125	CODE		11/17/12		60.48		
218000	2	S5125 S5125			11/17/12		60.48		
218000	3	S5125			11/20/12		60.48		
218000	4	S5125			11/21/12		60.48		
218000	5	S5125			11/22/12		60.48		
218000	6	S5125			11/23/12		60.48		
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1									

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SUBMITTER ID = SUNNYSI SUNNYSIDE

REG LOC 001	CLIENT 2011821	SERVICE 2011821	NAME GONZALEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 00/00/0000 GNT0098100
INV #	LINE #	PROCEDURE	CODE	FROM DT THRU DT UNITS AMOUNT
218001	1	S5125		11/19/12 11/19/12 16.00 60.48
218001	2	S5125		11/20/12 11/20/12 16.00 60.48
218001	3	S5125		11/21/12 11/21/12 16.00 60.48
218001	4 5	S5125		11/22/12 11/22/12 16.00 60.48
218001	5	S5125		11/23/12 11/23/12 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2180010012011821
				CLAIM TOTAL 502.40 CLAIM ACCOUNT REF. 2100010012011021
REG LOC 001	CLIENT 2011822	SERVICE 2011822	NAME GREAVES	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # BARBARA 08/15/1945 GNT03748500
INV #	LINE #	PROCEDURE	CODE	FROM DT THRU DT UNITS AMOUNT
218002	1	T1019		11/19/12 11/19/12 16.00 60.48
218002	2	T1019		11/21/12 11/21/12 16.00 60.48
218002	3	T1019		11/23/12 11/23/12 16.00 60.48
				CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 2180020012011822
REG LOC 001	CLIENT 2010494	SERVICE 2010494	NAME GREENSPAN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ALICE 04/15/1942 GNT04498400
INV #	LINE #	PROCEDURE	CODE	FROM DT THRU DT UNITS AMOUNT
218003	1	S5125		11/17/12 11/17/12 20.00 75.60
218003	2	S5125		11/18/12 11/18/12 20.00 75.60
218003	3	S5125		11/19/12 11/19/12 20.00 75.60
218003	4	S5125		11/20/12 11/20/12 20.00 75.60
218003 218003	5 6	S5125		11/21/12 $11/21/12$ 20.00 75.60 $11/22/12$ $11/22/12$ 20.00 75.60
218003	7	S5125 S5125		11/22/12 11/22/12 20.00 75.60 11/23/12 11/23/12 20.00 75.60
210003	,	33123		CLAIM TOTAL 529.20 CLAIM ACCOUNT REF. 2180030012010494
REG LOC 001	CLIENT 2011770	SERVICE 2011770	NAME GUZMAN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ALICIA 05/26/2012 GNT00484900
INV #	LINE #	PROCEDURE	CODE	FROM DT THRU DT UNITS AMOUNT
218004	1	T1019		11/22/12 11/22/12 15.00 56.70
218004	2	T1019		11/23/12 11/23/12 16.00 60.48
				CLAIM TOTAL 117.18 CLAIM ACCOUNT REF. 2180040012011770
REG LOC 001	CLIENT 2011600	SERVICE 2011600	NAME GUZMAN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # EDELMIR 02/19/1944 GNT03023100
INV #	LINE #	PROCEDURE	CODE	FROM DT THRU DT UNITS AMOUNT
218005	1	S5125		11/12/12 11/12/12 16.00 60.48
218005	2	S5125		11/13/12 11/13/12 16.00 60.48
218005	3	S5125		11/14/12 11/14/12 16.00 60.48
218005	4	S5125		11/15/12 11/15/12 16.00 60.48
218005	5	S5125		11/16/12 11/16/12 16.00 60.48

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PROVIDER ID = 113502051 SUNNYSIDE		I = 1154407492
	CLAIM TOTAL	302.40 CLAIM ACCOUNT REF. 2180050012011600
REG LOC CLIENT SERVICE NAME 001 2011472 2011472 HENLEY	BIRTH DATE RECIPIENT ID 08/23/1927 GNT06160900	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 218006	FROM DT THRU DT UNITS 11/17/12 11/17/12 32.00 11/18/12 11/18/12 32.00 11/19/12 11/19/12 40.00 11/20/12 11/20/12 40.00 11/21/12 11/21/12 40.00 11/22/12 11/22/12 40.00 11/23/12 11/23/12 40.00 CLAIM TOTAL	AMOUNT 120.96 120.96 151.20 151.20 151.20 151.20 151.20 151.20 151.20 151.20 151.20 151.20
REG LOC CLIENT SERVICE NAME 001 2011252 2011252 HENRIQUEZ	BIRTH DATE RECIPIENT ID TERESA 10/15/1938 GNT06350600	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 218007	FROM DT THRU DT UNITS 11/17/12 11/17/12 16.00 11/18/12 11/18/12 16.00 11/19/12 11/19/12 32.00 11/20/12 11/20/12 32.00 11/21/12 11/21/12 32.00 11/22/12 11/22/12 32.00 11/23/12 11/23/12 32.00 CLAIM TOTAL	AMOUNT 60.48 60.48 120.96 120.96 120.96 120.96 120.96 120.96 725.76 CLAIM ACCOUNT REF. 2180070012011252
REG LOC CLIENT SERVICE NAME 001 2011823 2011823 HERNANDEZ	BIRTH DATE RECIPIENT ID 00/00/0000 GNT00568800	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 218008 1 S5125 218008 2 S5125 218008 3 S5125	FROM DT THRU DT UNITS 11/12/12 11/12/12 24.00 11/19/12 11/19/12 24.00 11/21/12 11/21/12 24.00 CLAIM TOTAL	AMOUNT 90.72 90.72 90.72 90.72 272.16 CLAIM ACCOUNT REF. 2180080012011823
REG LOC CLIENT SERVICE NAME 001 2011824 2011824 HICKS	SYLVIA BIRTH DATE RECIPIENT ID 00/00/0000 9370331550	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 218009	FROM DT THRU DT UNITS 11/17/12 11/17/12 16.00 11/18/12 11/18/12 16.00 11/19/12 11/19/12 30.00 11/20/12 11/20/12 26.00 11/21/12 11/21/12 31.00 11/22/12 11/22/12 26.00 11/23/12 11/23/12 30.00 CLAIM TOTAL	AMOUNT 60.48 60.48 113.40 98.28 117.18 98.28 113.40 661.50 CLAIM ACCOUNT REF. 2180090012011824
REG LOC CLIENT SERVICE NAME 001 2009400 2009400 HUSTIU	BIRTH DATE RECIPIENT ID 02/04/1929 GNT05850100	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE	FROM DT THRU DT UNITS	AMOUNT

11 /00 /10	
REPORT DATE 11/29/12 SUNN INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E320	NYSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 11 02012112912014475
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218010 1 S5125 218010 2 S5125	11/19/12 11/19/12 8.00 30.24 11/21/12 11/21/12 8.00 30.24 CLAIM TOTAL 60.48 CLAIM ACCOUNT REF. 2180100012009400
REG LOC CLIENT SERVICE NAME 001 2011864 2011864 IGLESIAS	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # JUANA 09/23/1918 GNT00117600
INV # LINE # PROCEDURE CODE 218011 1 S5125 218011 2 S5125 218011 3 S5125 218011 4 S5125 218011 5 S5125 218011 6 S5125	FROM DT THRU DT UNITS AMOUNT 11/18/12 11/18/12 48.00 181.44 11/19/12 11/19/12 48.00 181.44 11/20/12 11/20/12 96.00 362.88 11/21/12 11/21/12 96.00 362.88 11/22/12 11/22/12 96.00 362.88 11/23/12 11/23/12 96.00 362.88 11/23/12 11/23/12 96.00 362.88 11/23/12 11/23/12 96.00 362.88 CLAIM TOTAL 1,814.40 CLAIM ACCOUNT REF. 2180110012011864
REG LOC CLIENT SERVICE NAME 001 2010983 2010983 IRIMIA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # SIMONA 09/19/1938 GNT0360570
INV # LINE # PROCEDURE CODE 218012 1 T1019 218012 2 T1019 218012 3 T1019 218012 4 T1019	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 32.00 120.96 11/18/12 11/18/12 32.00 120.96 11/19/12 11/19/12 32.00 120.96 11/20/12 11/20/12 28.00 105.84 CLAIM TOTAL 468.72 CLAIM ACCOUNT REF. 2180120012010983
REG LOC CLIENT SERVICE NAME 001 2011601 2011601 JACKSON	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PATRICI 08/10/1960 GNT04501100
INV # LINE # PROCEDURE CODE 218013	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 20.00 75.60 11/20/12 11/20/12 20.00 75.60 11/21/12 11/21/12 20.00 75.60 11/23/12 11/23/12 20.00 75.60 11/23/12 11/23/12 30.00 75.60 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2180130012011601
REG LOC CLIENT SERVICE NAME 001 2003254 JIMENEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # EUGENIA 03/15/1931 GNT04164400
INV # LINE # PROCEDURE CODE 218014 1 T1019 218014 2 T1019 218014 3 T1019 218014 4 T1019 218014 5 T1019	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 42.00 158.76 11/19/12 11/19/12 46.00 173.88 11/20/12 11/20/12 46.00 173.88 11/21/12 11/21/12 46.00 173.88 11/23/12 11/23/12 42.00 158.76 CLAIM TOTAL 839.16 CLAIM ACCOUNT REF. 2180140012003254
REG LOC CLIENT SERVICE NAME 001 2006080 JOHNSON	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # DOROTHY 03/14/1932 GNT04334500
INV # LINE # PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

REPORT DATE 11/29/	12 SUNNY	SIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 12 012112912014475
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REG LOC CLIENT 001 2011855	SERVICE NAME 2011855 JONES	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # LUCILLE 02/05/1925 GNT04367400
INV # LINE # 218016 1 218016 2 218016 3 218016 4	PROCEDURE CODE T1019 T1019 T1019 T1019	FROM DT THRU DT UNITS AMOUNT 11/12/12 11/12/12 16.00 60.48 11/14/12 11/14/12 16.00 60.48 11/16/12 11/16/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2180160012011855
REG LOC CLIENT 001 2011848	SERVICE NAME 2011848 LANZILOTTA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ROSA 06/05/1925 93702509600
INV # LINE # 218017 1 218017 2 218017 3 218017 4 218017 5 218017 6 218017 7	PROCEDURE CODE \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 16.00 60.48 11/18/12 11/18/12 16.00 60.48 11/19/12 11/19/12 16.00 60.48 11/20/12 11/20/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/22/12 11/22/12 16.00 60.48 11/22/12 11/22/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 CLAIM TOTAL 423.36 CLAIM ACCOUNT REF. 2180170012011848
REG LOC CLIENT 001 2011771	SERVICE NAME 2011771 LEMOINE	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # RICARDA 05/14/2012 GNT03700100
INV # LINE # 218018 1 218018 2 218018 3	PROCEDURE CODE S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 16.00 60.48 11/18/12 11/18/12 16.00 60.48 11/19/12 11/19/12 16.00 60.48 CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 2180180012011771
REG LOC CLIENT 001 2011854	SERVICE NAME 2011854 LOPEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 00/00/0000 GNT02469800
INV # LINE # 218019 1 218019 2 218019 3 218019 4 218019 5 218019 6	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 24.00 90.72 11/18/12 11/18/12 24.00 90.72 11/19/12 11/19/12 28.00 105.84 11/20/12 11/20/12 28.00 105.84 11/21/12 11/21/12 28.00 105.84 11/22/12 11/22/12 28.00 105.84

REPORT DATE	= 11/29/ = /VOL4	12 44/COMPSUP/	SUNNY HIPAAIN/E3202/	SIDE CITYW1 01211291201	DE 14475		HIPAA	DATA FI	LE REPORT (PHLT837/EDIS) PAGE 13
			SUNNYSIDE NNYSIDE				NPI	= 1154	407492
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INV # I 218020	LINE # 1	PROCEDURE S5125	CODE	FROM 11/21	DT L/12	THRU DT 11/21/12 CLA	93702878100 UNITS 16.00 IM TOTAL	AMOUNT 60.48 60.48	CLAIM ACCOUNT REF. 2180200012011845
REG LOC	CLIENT	SERVICE	NAME	МДХТМТИ	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
INV # I 218021 218021	LINE # 1 2	PROCEDURE T1019 T1019	CODE	FROM 11/19 11/21	DT 9/12 1/12	THRU DT 11/19/12 11/21/12 CLA	UNITS 24.00 24.00 IM TOTAL	AMOUNT 90.72 90.72 181.44	CLAIM ACCOUNT REF. 2180210012011658
REG LOC 001 2	CLIENT 2011772	SERVICE 2011772	NAME MARIANI	MARIA	BIR'	TH DATE 24/1934	RECIPIENT ID GNT03761400	PRIOR	AUTHORIZATION #
INV # 1 218022 218022 218022 218022 218022 218022 218022	LINE # 1 2 3 4 5 6	PROCEDURE T1019 T1019 T1019 T1019 T1019 T1019	CODE	FROM 11/12 11/14 11/16 11/19 11/23	DT 2/12 4/12 5/12 9/12 1/12 8/12	THRU DT 11/12/12 11/14/12 11/16/12 11/19/12 11/21/12 11/23/12 CLA	UNITS 20.00 20.00 20.00 20.00 20.00 20.00 IM TOTAL	AMOUNT 75.60 75.60 75.60 75.60 75.60 453.60	CLAIM ACCOUNT REF. 2180220012011772
REG LOC 001 2	CLIENT	SERVICE 2011663	NAME MARTIN	RUTH	BIR'	TH DATE 25/1927	RECIPIENT ID GNT06371400	PRIOR	AUTHORIZATION #
INV # I 218023 218023 218023	LINE # 1 2 3	PROCEDURE S5126 S5126 S5126	CODE	FROM 11/17 11/18 11/19	DT 7/12 8/12 9/12	THRU DT 11/17/12 11/18/12 11/19/12 CLA	UNITS 1.00 1.00 1.00 IM TOTAL	AMOUNT 196.56 196.56 196.56 589.68	CLAIM ACCOUNT REF. 2180230012011663
REG LOC 001 2	2006830	SERVICE 2006830	NAME MARTINEZ	EMMA	BIR'	TH DATE 09/1920	RECIPIENT ID GNT05091300	PRIOR	AUTHORIZATION #
INV # 1 218024 218024 218024 218024 218024 218024	LINE # 1 2 3 4 5 6	PROCEDURE T1019 T1019 T1019 T1019 T1019 T1019	CODE	FROM 11/17 11/19 11/20 11/21 11/22 11/23	DT 7/12 9/12 9/12 1/12 1/12 2/12	THRU DT 11/17/12 11/19/12 11/20/12 11/21/12 11/22/12 11/23/12 CLA	UNITS 24.00 24.00 24.00 23.00 24.00 24.00 24.00 .IM TOTAL	AMOUNT 90.72 90.72 90.72 86.94 90.72 90.72 540.54	CLAIM ACCOUNT REF. 2180240012006830
	CLIENT	SERVICE 2009202	NAME MARTINEZ	GLORIA	BIR'	TH DATE 10/1937	RECIPIENT ID GNT00444700	PRIOR	AUTHORIZATION #

UNITS

AMOUNT

FROM DT THRU DT

INV # LINE # PROCEDURE CODE

REPORT DA				SIDE CITYWIDE 012112912014475		HIPAA	DATA FII	LE REPORT (PHLT837/EDIS) PAGE 14
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PROVIDER	ID = 113	502051 SUI	NNYSIDE			NP	I = 11544	407492
	_							
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218025 218025	2 3	S5125 S5125		11/21/12 11/23/12			75.60 75.60	
210025	3	55125		11/23/12		I ZU.UU IM TOTAL	226.80	CLAIM ACCOUNT REF. 2180250012009202
					CLI	1111 1011111	220.00	CEMIN NECOUNT NEIT. BIOUBSUSTEDUSED
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2011036	2011036	MASSOL	PEDRO A 09/	08/1934	GNT04564600		
INV #	LINE #	PROCEDURE	CODE	EDOM DE	miinii pm	INITEG	AMOTINE	
218026	1 1 TINE #	S5125	CODE	FROM DT 11/19/12	THRU DT	UNITS 20.00	AMOUNT 75.60	
218026	2	S5125		11/20/12			75.60	
218026	3	S5125		11/21/12			75.60	
					CLA	AIM TOTAL	226.80	CLAIM ACCOUNT REF. 2180260012011036
REG LOC 001	CLIENT 2011350	SERVICE 2011350	NAME		TH DATE 23/1934	RECIPIENT ID GNT06367800	PRIOR	AUTHORIZATION #
001	2011350	2011350	MCQUAIL	MAUREEN 10/	23/1934	GN10030/800		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218027	1	S5125		11/17/12	11/17/12	40.00	151.20	
218027	2	S5125		11/18/12			151.20	
218027	3	S5125		11/19/12			151.20	
218027	4	S5125		11/20/12	, -,		151.20	
218027 218027	5 6	S5125 S5125		11/21/12			151.20 94.50	
218027	7	S5125 S5125		11/22/12 11/23/12			151.20	
210027	,	55125		11/23/12			1,001.70	CLAIM ACCOUNT REF. 2180270012011350
							·	
REG LOC	CLIENT	SERVICE	NAME		TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2005943	2005943	MICHEL	DOROTHY 06/	05/1930	GNT03107500		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218028	1	S5125	CODE	11/17/12			120.96	
218028	2	S5125		11/18/12			120.96	
218028	3	S5125		11/19/12			120.96	
218028	4	S5125		11/20/12			120.96	
218028	5	S5125		11/21/12			120.96	
218028 218028	6 7	S5125 S5125		11/22/12 11/23/12			60.48 120.96	
210020	,	55125		11/23/12	, -,	IM TOTAL	786.24	CLAIM ACCOUNT REF. 2180280012005943
					CLI	1111 1011111	700.21	CEMIN NECOUNT NEIT. 2100200012003713
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2010425	2010425	MONCRIEF	LOIS 05/	29/1926	GNT06140100		
TNTX7 4	T TNEE #	DDOGEDUDE	CODE	EDOM DE	miinii pm	INITEG	AMOTINE	
INV # 218029	LINE # 1	PROCEDURE S5125	CODE	FROM DT 11/17/12	THRU DT	UNITS 32.00	AMOUNT 120.96	
218029	2	S5125 S5125		11/17/12			120.96	
218029	3	S5125		11/19/12			120.96	
218029	4	S5125		11/20/12	11/20/12	32.00	120.96	
218029	5	S5125		11/21/12			120.96	
218029	6	S5125		11/22/12	, ,		120.96	
218029	7	S5125		11/23/12	11/23/12	32.00	120.96	
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SUBMITTER ID = SUNNYSI PROVIDER ID = 113502051 SU	SUNNYSIDE NNYSIDE			NPI	= 11544	407492	
			CLA	IM TOTAL	846.72	CLAIM ACCOUNT REF.	2180290012010425
REG LOC CLIENT SERVICE 001 2011844	NAME MONTES A		RTH DATE /31/1930	RECIPIENT ID GNT02561100	PRIOR	AUTHORIZATION #	
INV # LINE # PROCEDURE 218030 1 S5125 218030 2 S5125 218030 3 S5125 218030 4 S5125 218030 5 S5125 218030 6 S5125 218030 7 S5125	CODE	11/18/12 11/19/12 11/20/12 11/21/12 11/22/12	THRU DT 11/17/12 11/18/12 11/19/12 11/20/12 11/21/12 11/22/12 11/23/12 CLA	24.00 24.00 24.00 24.00 24.00	AMOUNT 90.72 90.72 90.72 90.72 90.72 90.72 90.72 635.04		2180300012011844
REG LOC CLIENT SERVICE 001 2008149	NAME MOSCICKA J		RTH DATE /07/1916	RECIPIENT ID GNT04975800	PRIOR	AUTHORIZATION #	
INV # LINE # PROCEDURE 218031 1 T1019 218031 2 T1019 218031 3 T1019	CODE	11/18/12	THRU DT 11/17/12 11/18/12 11/19/12 CLA	48.00	AMOUNT 181.44 181.44 120.96 483.84	CLAIM ACCOUNT REF.	2180310012008149
REG LOC CLIENT SERVICE 001 2011860 2011860	NAME MOYA M		RTH DATE /25/1914	RECIPIENT ID GNT02982600	PRIOR	AUTHORIZATION #	
INV # LINE # PROCEDURE 218032 1 S5125 218032 2 S5125 218032 3 S5125 218032 4 S5125 218032 5 S5125	CODE	11/20/12 11/21/12 11/22/12	THRU DT 11/19/12 11/20/12 11/21/12 11/22/12 11/23/12 CLA	24.00 24.00 24.00	AMOUNT 90.72 90.72 90.72 90.72 90.72 453.60		2180320012011860
REG LOC CLIENT SERVICE 001 2002162 2002162	NAME MUSCAT C		RTH DATE /28/1927	RECIPIENT ID GNT04082300	PRIOR	AUTHORIZATION #	
INV # LINE # PROCEDURE 218033	CODE	11/20/12 11/21/12 11/22/12	THRU DT 11/19/12 11/20/12 11/21/12 11/22/12 11/23/12 CLA	20.00 20.00 20.00	AMOUNT 75.60 75.60 75.60 75.60 75.60 378.00	CLAIM ACCOUNT REF.	2180330012002162
REG LOC CLIENT SERVICE 001 2006117	NAME NETTLES D		RTH DATE /21/1955	RECIPIENT ID GNT04987100	PRIOR	AUTHORIZATION #	
INV # LINE # PROCEDURE 218034 1 S5125	CODE	FROM DT 11/19/12	THRU DT 11/19/12	UNITS 15.00	AMOUNT 56.70		

REPORT DATE 11/29/12 INPUT FILE = /VOL444/COMPSUP/HIR	SUNNYSIDE CITYWIDE PAAIN/E3202012112912014475	HIPAA DATA FILE REPORT (PHLT837/EDIS)	PAGE 16	
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SUBMITTER ID = SU PROVIDER ID = 11	NNYSI SUNNYSIDI 3502051 SUNNYSIDE	E NPI = 1154407492
218034 2	S5125	11/21/12 11/21/12 14.00 52.92 CLAIM TOTAL 109.62 CLAIM ACCOUNT REF. 2180340012006117
REG LOC CLIENT 001 2011874		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 02/23/1941 GNT06134500
INV # LINE # 218035 2 218035 3 218035 4 218035 5 218035 6 218035 7	PROCEDURE CODE \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 24.00 96.72 11/18/12 11/18/12 24.00 96.72 11/19/12 11/19/12 24.00 96.72 11/20/12 11/20/12 24.00 96.72 11/21/12 11/20/12 24.00 96.72 11/21/12 11/21/12 12.00 48.36 11/22/12 11/22/12 12.00 48.36 11/23/12 11/23/12 12.00 48.36 11/23/12 11/23/12 531.96 CLAIM ACCOUNT REF. 2180350012011874
REG LOC CLIENT 001 2002531		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # RAMONA 09/24/1934 GNT04415000
INV # LINE # 218036 1 218036 2 218036 3 218036 4 218036 5	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 20.00 75.60 11/20/12 11/20/12 20.00 75.60 11/21/12 11/21/12 20.00 75.60 11/22/12 11/22/12 20.00 75.60 11/23/12 11/23/12 20.00 75.60 11/23/12 11/23/12 30.00 75.60 CLAIM TOTAL 378.00 CLAIM ACCOUNT REF. 2180360012002531
REG LOC CLIENT 001 2010595		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ALBERT 11/01/1919 GNT04994800
INV # LINE # 218037 1 218037 2 218037 4 218037 5 218037 7 218037 7 218037 8 218037 9 218037 10 218037 11 218037 12	PROCEDURE CODE \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125	FROM DT THRU DT UNITS AMOUNT 11/12/12 11/12/12 24.00 90.72 11/13/12 11/13/12 48.00 181.44 11/14/12 11/14/12 24.00 90.72 11/15/12 11/15/12 24.00 90.72 11/16/12 11/16/12 24.00 90.72 11/17/12 11/17/12 48.00 181.44 11/18/12 11/18/12 48.00 181.44 11/19/12 11/19/12 24.00 90.72 11/20/12 11/20/12 48.00 181.44 11/19/12 11/19/12 24.00 90.72 11/20/12 11/20/12 48.00 181.44 11/21/12 11/21/12 24.00 90.72 11/22/12 11/22/12 48.00 181.44 11/23/12 11/22/12 48.00 90.72 11/22/12 11/22/12 48.00 181.44 11/23/12 11/23/12 24.00 90.72 CLAIM TOTAL 1,542.24 CLAIM ACCOUNT REF. 2180370012010595
REG LOC CLIENT 001 2004768		BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ANGELIN 10/01/1946 GNT02920000
INV # LINE # 218038 1 218038 2	PROCEDURE CODE T1019 T1019	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 16.00 60.48 11/20/12 11/20/12 16.00 60.48

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218038	3	T1019	11/21/12 11/21/12 16.00 60.48 CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 2180380012004768
REG LOC 001	CLIENT 2009392	SERVICE NAME 2009392 NUNEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 1815 09/07/1963 GNT05481000
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REG LOC 001	CLIENT 2011773	SERVICE NAME 2011773 NUNEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 11/28/1964 GNT02970200
INV # 218040 218040 218040 218040 218040	LINE # 1 2 3 4 5	PROCEDURE CODE T1019 T1019 T1019 T1019 T1019	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 16.00 60.48 11/20/12 11/20/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/22/12 11/22/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 11/23/12 11/23/12 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2180400012011773
REG LOC 001	CLIENT 2011875	SERVICE NAME 2011875 OCASIO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # FELIX 05/28/1929 GNT00182000
			FROM DT THRU DT UNITS AMOUNT 11/20/12 11/20/12 40.00 151.20 11/21/12 11/21/12 40.00 151.20 11/22/12 11/22/12 40.00 151.20 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2180410012011875
REG LOC 001	CLIENT 2011871	SERVICE NAME 2011871 OJEDA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # SARA 10/14/1939 GNT02646000
INV # 218042 218042 218042 218042 218042 218042 218042 218042	LINE # 1 2 3 4 5 6	PROCEDURE CODE \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT	FROM DT THRU DT UNITS AMOUNT 11/17/12 11/17/12 20.00 80.60 11/18/12 11/18/12 20.00 80.60 11/19/12 11/19/12 20.00 80.60 11/20/12 11/20/12 20.00 80.60 11/21/12 11/21/12 32.00 128.96 11/22/12 11/22/12 32.00 128.96 11/23/12 11/23/12 32.00 128.96 11/23/12 11/23/12 32.00 128.96 CLAIM TOTAL 709.28 CLAIM ACCOUNT REF. 2180420012011871
REG LOC 001	CLIENT 2011863	SERVICE NAME 2011863 OLMO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # GLORIA 04/20/1923 GNT03506500
INV # 218043 218043 218043 218043	LINE # 1 2 3 4	PROCEDURE CODE S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 11/19/12 11/19/12 16.00 60.48 11/20/12 11/20/12 16.00 60.48 11/21/12 11/21/12 16.00 60.48 11/22/12 11/22/12 16.00 60.48

REPORT DAT	ΓΕ 11/29/ Ε = /VOL4	12 44/COMPSUP/	SUNNY HIPAAIN/E3202	SIDE CITYWIDE 2012112912014475	HIPAA	DATA FI	LE REPORT (PHLT837/EDIS)	PAGE 18
SUBMITTER	ID = SUN		SUNNYSIDE			I = 1154	407492	
FROVIDER	1D - 113	302031 301	MISIDE		INF.	1 - 1134	10/10/2	
218043	5	S5125		11/23/12 11/23/1 CI	2 16.00 AIM TOTAL	60.48 302.40	CLAIM ACCOUNT REF.	2180430012011863
REG LOC 001	CLIENT 2010198	SERVICE 2010198	NAME ORLANDO	BIRTH DATE 02/09/1923	RECIPIENT ID GNT06098400	PRIOR	AUTHORIZATION #	
INV # 218044 218044 218044 218044	LINE # 1 2 3 4	PROCEDURE T1019 T1019 T1019 T1019	CODE	FROM DT THRU DT 11/19/12 11/19/12 11/20/12 11/20/12 11/21/12 11/21/12 11/23/12 CT	UNITS 2 20.00 2 20.00 2 20.00 2 20.00 2 20.00 AIM TOTAL	AMOUNT 75.60 75.60 75.60 75.60 302.40	CLAIM ACCOUNT REF.	2180440012010198
REG LOC 001	CLIENT 2005165	SERVICE 2005165	NAME ORTIZ	BIRTH DATE 07/04/1919	RECIPIENT ID GNT03867300	PRIOR	AUTHORIZATION #	
INV # 218045 218045 218045 218045 218045 218045 218045	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125			UNITS 2 36.00 2 36.00 2 36.00 2 36.00 2 36.00 2 36.00 2 34.00 2 36.00 AIM TOTAL	AMOUNT 136.08 136.08 136.08 136.08 128.52 136.08 945.00	CLAIM ACCOUNT REF.	2180450012005165
REG LOC 001	CLIENT 2011657	SERVICE 2011657	NAME ORTIZ	BIRTH DATE 11/03/1932	RECIPIENT ID GNT05073800	PRIOR	AUTHORIZATION #	
INV # 218046 218046 218046 218046 218046 218046	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT 11/17/12 11/17/1 11/18/12 11/18/1 11/19/12 11/19/1 11/21/12 11/21/1 11/22/12 11/22/1 11/23/12 11/23/1	UNITS 16.00 2 16.00 2 28.00 2 28.00 2 28.00 2 28.00 AIM TOTAL	AMOUNT 60.48 60.48 105.84 105.84 105.84 105.84 544.32	CLAIM ACCOUNT REF.	2180460012011657
REG LOC 001	CLIENT 2003087	SERVICE 2003087	NAME PAPHITIS	BIRTH DATE 05/14/1923	RECIPIENT ID GNT03006300	PRIOR	AUTHORIZATION #	
INV # 218047 218047 218047 218047	LINE # 1 2 3 4	PROCEDURE T1019 T1019 T1019 T1019	CODE	FROM DT THRU DT 11/19/12 11/19/12 11/20/12 11/20/12 11/21/12 11/21/12 11/23/12 11/23/12 11/23/12 11/23/12	UNITS 2 32.00 2 32.00 2 32.00 2 32.00 2 32.00	AMOUNT 120.96 120.96 120.96 120.96	CIAIM ACCOINT DEE	01004500100000

CLAIM TOTAL

UNITS

2009576 PAZIOULIS KLEONIK 10/16/1934 GNT04602500

FROM DT THRU DT

REG LOC CLIENT

001 2009576

INV # LINE # PROCEDURE CODE

SERVICE NAME

AMOUNT

BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION #

483.84

CLAIM ACCOUNT REF. 2180470012003087

	DATE 11/29/			SIDE CITYWIDE		HIPAA	DATA FIL	E REPORT (PHLT837/EDIS	S) PAGE 19
INPUT FI	LLE = /VOL4	44/COMPSUP	/HIPAAIN/E3202	012112912014475)				
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		502051 SU				NPI	I = 11544	07492	
218048	1	S5125			11/17/12		166.32		
218048	2	S5125 S5125			11/18/12 11/19/12		166.32 166.32		
218048 218048	3 4	S5125 S5125		11/19/12 11/20/12	11/19/12		166.32		
218048	5	S5125 S5125		11/21/12			166.32		
210040	5	55125		11/21/12		IM TOTAL	831.60	CLAIM ACCOUNT REF.	2180480012009576
REG LOC		SERVICE	NAME		RTH DATE	RECIPIENT ID	PRIOR 2	AUTHORIZATION #	
001	2000140	2000140	PENA	WALESKA 07/	06/1978	GNT02097600			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218049	1	T1019	CODE		10/13/12		120.96		
218049	2	T1019		11/10/12	11/10/12		105.84		
218049	3	T1019		11/11/12	11/11/12		105.84		
218049	4	T1019		11/17/12	11/17/12	32.00	120.96		
218049	5	T1019		11/18/12	11/18/12		120.96		
218049	6	T1019		11/19/12	11/19/12		120.96		
218049	7	T1019		11/20/12	11/20/12		120.96		
218049	8 9	T1019		11/21/12	11/21/12		120.96		
218049 218049	10	T1019 T1019		11/22/12 11/23/12	11/22/12 11/23/12		102.06 120.96		
210049	10	11019		11/23/12			1,160.46	CLAIM ACCOUNT REF.	2180490012000140
					CLIA	IN IOIAL	1,100.10	CHAIM ACCOUNT REF.	2100190012000110
REG LOC		SERVICE	NAME		RTH DATE		PRIOR A	AUTHORIZATION #	
001	2009232	2009232	PEREZ	MARIA 02/	04/1931	93703475500			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218050	1 LINE #	T1019	CODE		11/19/12		90.72		
218050	2	T1019		11/20/12	11/20/12		90.72		
218050	3	T1019			11/21/12		90.72		
					CLA	IM TOTAL	272.16	CLAIM ACCOUNT REF.	2180500012009232
REG LOC		SERVICE	NAME		RTH DATE	RECIPIENT ID	PRIOR I	AUTHORIZATION #	
001	2011411	2011411	PICHARDO	MARIA 05/	14/1923	GNT02908700			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218051	1	T1019	CODE		11/17/12		136.08		
218051	2	T1019		11/18/12	11/18/12		136.08		
218051	3	T1019		11/19/12	11/19/12		136.08		
218051	4	T1019		11/20/12	11/20/12		136.08		
218051	5	T1019			11/21/12		136.08		
218051	6 7	T1019		11/22/12	11/22/12		136.08		
218051	/	T1019		11/23/12	11/23/12	36.00 IM TOTAL	136.08 952.56	CLAIM ACCOUNT REF.	2190510012011411
1					СЦА	THI IOIAL	<i>93</i> ∠.30	CLAIM ACCOUNT REF.	2100310012011411
REG LOC	C CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR I	AUTHORIZATION #	
001	2010606	2010606	PINILLA	VICTOR 03/	23/1933	GNT05972000			
1									
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218052	1 2	S5125			11/17/12		75.60		
218052	2	S5125		11/18/12	11/18/12	20.00	75.60		
1									

REPORT DA				SIDE CITYWIDE 012112912014475		HIPAA	DATA FIL	E REPORT (PHLT837/EDIS)	PAGE 20
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PROVIDER	ID = 113	502051 SUN	NYSIDE			NP	I = 11544	07492	
010050	2	GE10E		11/10/10	11/10/10	20.00	75 60		
218052 218052	3 4	S5125 S5125		11/19/12 11/20/12	11/19/12		75.60 75.60		
218052	5	S5125 S5125		11/21/12	11/21/12		75.60		
218052	6	S5125		11/22/12	11/22/12		75.60		
218052	7	S5125			11/23/12		75.60		
				, -,	CLA	IM TOTAL	529.20	CLAIM ACCOUNT REF.	2180520012010606
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REG LOC 001	CLIENT 2010647	SERVICE 2010647	NAME PRADO		TH DATE 02/1950	RECIPIENT ID GNT00201400	PRIOR .	AUTHORIZATION #	
001	2010047	2010647	PRADO	NANCI 04/	02/1950	GN100201400			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218053	1	T1019		11/14/12	11/14/12	16.00	60.48		
218053	2	T1019		11/15/12	11/15/12		60.48		
218053	3	T1019			11/20/12		60.48		
218053	4	T1019		11/21/12	11/21/12		60.48		
218053	5	T1019		11/22/12	11/22/12	16.00 IM TOTAL	60.48 302.40	CLAIM ACCOUNT REF.	2190520012010647
					СЦА	IM IOIAL	302.40	CLAIM ACCOUNT REF.	2100330012010047
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR .	AUTHORIZATION #	
001	2002109	2002109	PROANO	ALICIA 09/	18/1924	93700845900			
T3777 II	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
INV # 218054	1 1 LINE #	S5125 TT	CODE	10/16/12			48.36		
218054	2	S5125 TT		11/18/12	11/18/12		44.33		
218054	3	S5125 TT		11/19/12	11/19/12		48.36		
218054	4	S5125 TT		11/20/12	11/20/12		48.36		
218054	5	S5125 TT		11/21/12	11/21/12	12.00	48.36		
218054	6	S5125 TT		11/22/12	11/22/12		48.36		
218054	7	S5125 TT		11/23/12			48.36		0100540010000100
					CLA	IM TOTAL	334.49	CLAIM ACCOUNT REF.	2180540012002109
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001	2007728	2007728	PROANO		06/1918	GNT04361600	1111011	iio iiiotti Eiii iiott	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218055	1	S5125 TT			10/16/12		80.60		
218055 218055	2	S5125 TT S5125 TT		11/16/12 11/17/12	11/16/12 11/17/12		80.60 64.48		
218055	4	S5125 TT		11/17/12	11/19/12		80.60		
218055	5	S5125 TT		11/20/12	11/20/12		80.60		
218055	6	S5125 TT		11/21/12	11/21/12		80.60		
218055	7	S5125 TT		11/22/12	11/22/12		80.60		
218055	8	S5125 TT		11/23/12	11/23/12		80.60		
					CLA	IM TOTAL	628.68	CLAIM ACCOUNT REF.	2180550012007728
REG LOC	CLIENT	SERVICE	NAME	סדם	TH DATE	RECIPIENT ID	DRIOD	AUTHORIZATION #	
001	2011774	2011774	OUINONES		29/1936	GNT03606700	PRIOR .	AUTHORIZATION #	
			£ - 11.01.110		,,				
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218056	1	T1019		11/12/12			60.48		
218056	2	T1019		11/13/12	11/13/12	16.00	60.48		

DEDODE	DAME 11 /00	/10	217	01DE 01E::::		****	, D.M	TH DEDODE (DITEONS DAGE 01
KELOKI,	DATE 11/29/	' 12 144 / COMDSTID	SUNNY COCFT/MTAAATM/	SIDE CITYWIDE 012112912014475		HIPAA	A DATA FII	LE REPORT (PHLT837/EDIS) PAGE 21
TIVE OI F.	- / VOL-	III/COMESUP	/ III F AAIN / E 3202	0121127120144/3	•			
SUBMITT	ER ID = SUN	NYSI	SUNNYSIDE					
PROVID	ER ID = 113	3502051 SU	NNYSIDE			NE	PI = 11544	107492
010056	2	T1010		11 /14 /10	11/14/10	16.00	60.40	
218056	3 4	T1019 T1019		11/14/12			60.48 60.48	
218056 218056	4 5	T1019 T1019		11/15/12 11/16/12			60.48	
218056	6	T1019		11/10/12			60.48	
218056	7	T1019		11/20/12			60.48	
218056	8	T1019		11/21/12			60.48	
218056	9	T1019		11/22/12			60.48	
218056	10	T1019		11/23/12			60.48	
					CLA	AIM TOTAL	604.80	CLAIM ACCOUNT REF. 2180560012011774
DEG TO	C CLIPNE	GDDIII GD	272.45	DIE		DECIDIONE IN	DDIOD	ALIENTOD TEATTON. II
REG LO		SERVICE 2011847	NAME RAMOS		TH DATE 06/1922	RECIPIENT ID GNT00206000) PRIOR	AUTHORIZATION #
00.	1 2011847	2011847	RAMOS	CECILIA 08/	06/1922	GN100206000		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218057	1	S5125		11/17/12			120.96	
218057	2	S5125		11/18/12	11/18/12	32.00	120.96	
218057	3	S5125		11/19/12			151.20	
218057		S5125		11/20/12			151.20	
218057	5	S5125		11/21/12			151.20	
218057		S5125		11/22/12			151.20	
218057	7	S5125		11/23/12			151.20 997.92	GLAIM AGGOIDTE DEE 0100E70010011047
					CLIF	AIM TOTAL	997.92	CLAIM ACCOUNT REF. 2180570012011847
REG LO	C CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
00	1 2010409	2010409	RAMOS	ESTHER 12/	21/1933	GNT06136400		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218058	1	T1019	CODE	10/15/12			45.36	
218058	2	T1019			11/19/12		45.36	
218058	3	T1019		11/20/12			45.36	
						AIM TOTAL	136.08	CLAIM ACCOUNT REF. 2180580012010409
REG LO		SERVICE	NAME		TH DATE	RECIPIENT ID) PRIOR	AUTHORIZATION #
00	1 2008453	2008453	RESTULA	VINCENT 01/	15/1929	GNT05473100		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218059	1	S5125	0022	11/19/12			60.48	
218059	2	S5125		11/20/12			60.48	
218059	3	S5125		11/23/12	11/23/12	16.00	60.48	
					CLA	AIM TOTAL	181.44	CLAIM ACCOUNT REF. 2180590012008453
DEG TO	C CLIPNE	GDDIII GD	272.45	DIE		DEGIDIENT IF	DDIOD	ALIENTOD TEATTON. II
REG LO		SERVICE 2011865	NAME RIVAS		TH DATE 21/1929	RECIPIENT ID GNT04947100	PRIOR	AUTHORIZATION #
00.	1 2011003	2011005	KIVAS	ANA UZ/	21/1929	GN10494/100		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218060	1	S5125		11/22/12	11/22/12	20.00	75.60	
					CLA	AIM TOTAL	75.60	CLAIM ACCOUNT REF. 2180600012011865
DEG TO	a at	GEDITE CE	272247			DEGIDING	DD TO-	ALIGNOD T GARGON III
REG LO		SERVICE	NAME		TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
00	1 2011659	2011659	RIVERA MARTI	GLOKIA 01/	22/1938	GNT02887600		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
	"		· -					

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INPUT FIL	LE 11/29/ LE = /VOL4	12 44/COMPSUP	SUNNY HIPAAIN/E3202/	012112912014475	5	HIPAA	DAIA FI	LE REPORT (PHLT837/EDIS) PAGE 2:
SUBMITTER		NYSI 502051 SUN	SUNNYSIDE			ND	[= 1154·	407492
FROVIDER	. 10 - 113	302031 501	NNISIDE			NE	1134	10/11/2
218061	1	S5125			11/17/12		102.06	
218061 218061	2	S5125 S5125			11/18/12 11/19/12		105.84 105.84	
218061	4	S5125 S5125			11/20/12		105.84	
218061	5	S5125		11/21/12			105.84	
218061	6	S5125			11/22/12		105.84	
218061	7	S5125		11/23/12	11/23/12	28.00 AIM TOTAL	105.84 737.10	
					CLIA	AIM IOIAL	737.10	CLAIM ACCOUNT REF. 218001001201105
REG LOC	CLIENT	SERVICE	NAME		RTH DATE		PRIOR	AUTHORIZATION #
001	2011491	2011491	RIVERA	RAMONIT 08	23/1943	GNT06231700		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218062	1	S5125		11/21/12	11/21/12		60.48	
					CLA	AIM TOTAL	60.48	CLAIM ACCOUNT REF. 2180620012011493
REG LOC	CLIENT	SERVICE	NAME	BIF	RTH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2010412	2010412	RODRIGUEZ	FABIOLA 06	23/1931	GNT06115800		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218063	1	T1019	CODE		11/17/12		60.48	
218063	2	T1019		11/18/12	11/18/12	16.00	60.48	
218063	3	T1019			11/19/12		60.48	
218063 218063	4 5	T1019 T1019		11/20/12	11/20/12		60.48 60.48	
218063	6	T1019		11/21/12			60.48	
218063	7	T1019		11/23/12			60.48	
					CLA	AIM TOTAL	423.36	CLAIM ACCOUNT REF. 218063001201041
REG LOC	CLIENT	SERVICE	NAME	BIF	RTH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2007969	2007969	RODRIGUEZ		/27/1938	GNT05256300		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218064	1	T1019	CODE		11/17/12		136.08	
218064	2	T1019		11/18/12	11/18/12	36.00	136.08	
218064	3	T1019			11/19/12		136.08	
218064 218064	4 5	T1019 T1019			11/20/12 11/21/12		136.08 136.08	
218064	6	T1019			11/22/12		136.08	
218064	7	T1019		11/23/12			136.08	
					CLA	AIM TOTAL	952.56	CLAIM ACCOUNT REF. 2180640012007969
REG LOC	CLIENT	SERVICE	NAME	BIF	RTH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2006650	2006650	ROJAS		22/1923	GNT04856900	-	- "
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
218065	1	S5125 TT		11/19/12	11/19/12	2 12.00	48.36	
218065	2	S5125 TT			11/20/12		48.36	
218065 218065	3 4	S5125 TT S5125 TT			11/21/12 11/23/12		48.36 48.36	
210005	4	33123 11		11/23/12	, -,	III.UU AIM TOTAL	193.44	
					<u>ЭШ</u> .			1 110000111 1121 . 2200000012000000

INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202012112912014475

SUBMITTER ID = SUNNYSI SUNNYSIDE

REG LOC 001	CLIENT 2006651	SERVICE 2006651	NAME ROJAS		PIENT ID PRIOR AUTHORIZATION # 04856800
INV # 218066 218066 218066	LINE # 1 2 3	PROCEDURE S5125 TT S5125 TT S5125 TT	CODE	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	UNITS AMOUNT 5.00 64.48 5.00 64.48 5.00 64.48
218066	4	S5125 TT		11/23/12 11/23/12 16. CLAIM TOT	5.00 64.48 PTAL 257.92 CLAIM ACCOUNT REF. 2180660012006651
REG LOC 001	CLIENT 2011777	SERVICE 2011777	NAME ROMAN		PPIENT ID PRIOR AUTHORIZATION # 02933300
INV # 218067 218067 218067 218067 218067 218067	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125	CODE	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	INITS AMOUNT 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96 2.00 120.96
REG LOC	CLIENT	SERVICE	NAME	BIRTH DATE RECIE	PIENT ID PRIOR AUTHORIZATION #
001	2006828	2006828	RUBIANO	MARIA 11/12/1925 GNT03	33390400
INV # 218068	LINE # 1	PROCEDURE S5125	CODE		JNITS AMOUNT 5.00 60.48 DTAL 60.48 CLAIM ACCOUNT REF. 2180680012006828
REG LOC 001	CLIENT 2003430	SERVICE 2003430	NAME SALJANIN		PIENT ID PRIOR AUTHORIZATION # 03006000
INV # 218069 218069 218069 218069 218069 218069	LINE # 1 2 3 4 5 6	PROCEDURE T1019 T1019 T1019 T1019 T1019 T1019	CODE	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	UNITS AMOUNT 2.00 120.96 5.00 136.08 5.00 136.08 5.00 136.08 5.00 136.08 5.00 136.08 5.00 136.08 5.00 136.08 5.00 136.08 5.00 136.08 5.00 136.08
REG LOC	CLIENT 1997789	SERVICE 1997789	NAME SANCHEZ	BIRTH DATE RECI	PRIOR AUTHORIZATION #
INV # 218070	LINE #	PROCEDURE T1019		FROM DT THRU DT UN	JNITS AMOUNT 5.00 60.48
REG LOC 001	CLIENT 1997789	SERVICE 1997789	NAME SANCHEZ		PIENT ID PRIOR AUTHORIZATION # 00370600
INV #	LINE #	PROCEDURE	CODE	FROM DT THRU DT UN	UNITS AMOUNT

REPORT DATE 11/29/12 SUNNYSIDE CITYWIDE	DDD0DE D1	77 11 /00 /	1.0	CIRRII	CIDD CIMILIDE			D		2) 222 04
SUBMITTER ID = SUBNYSI	REPORT DAT	E 11/29/	12 44/COMPSIID	SUNNY SUNNY ATRACTU/	SIDE CITYWIDE 012112912014475	:	HIPAA	DATA FIL	E REPORT (PHLT837/EDIS	S) PAGE 24
PROVIDER ID = 113502051 SUNNYSIDE	INFOI FILE	_ / VOLI4	44/ COMEDUE/	IIIFAAIN/EJZUZ	012112712014473	,				
218071	SUBMITTER	ID = SUN	NYSI	SUNNYSIDE						
218071	PROVIDER	ID = 113	502051 SUN	NNYSIDE			NPI	= 11544	07492	
218071	010071	1	m1 0 1 0		11 /17 /10	11/17/10	16.00	60 40		
218071 3 T1019 11/19/12 11/19/12 28.00 105.84 218071 5 T1019 11/20/12 28.00 105.84 218071 5 T1019 11/20/12 28.00 105.84 218071 6 T1019 11/20/12 28.00 105.84 218072 Calim Service Name Sherh Date Recipient ID 218072 1 T109 11/13/12 11/13/12 20.00 75.60 218072 2 T1019 11/13/12 11/13/12 20.00 75.60 218072 3 T1019 11/13/12 11/13/12 20.00 75.60 218072 5 T1019 11/13/12 11/13/12 20.00 75.60 218072 5 T1019 11/13/12 11/13/12 20.00 75.60 218072 6 T1019 11/13/12 11/13/12 20.00 75.60 218072 7 T1019 11/13/12 11/13/12 20.00 75.60 218072 7 T1019 11/13/12 11/13/12 20.00 75.60 218072 7 T1019 11/20/12 11/20/12 20.00 75.60 218072 8 T1019 11/20/12 11/20/12 20.00 75.60 218072 9 T1019 11/20/12 11/20/12 20.00 75.60 218072 7 T1019 11/20/12 11/20/12 20.00 75.60 218072 7 T1019 11/20/12 11/20/12 20.00 75.60 218073 7 T1019 11/20/12 11/20/12 20.00 75.60 218073 1 T1019 11/20/12 11/20/12 10/20/12 20.00 75.60 INV # LINE # PROCEDURE CODE FROM DT THEW DT UNITS AMOUNT 218073 1 T1019 11/20/12 11/20/12 16.00 60.48 218073 1 T1019 11/20/12 11/20/12 16.00 60.48 218073 2 T1019 11/20/12 11/20/12 16.00 60.48 218073 2 T1019 11/20/12 11/20/12 12.00 60.48 218074 2 S5125 11/20/12 11/20/12 12.00 60.48 218074 2 S5125 11/20/12 11/20/12 20.00 120.96 218074 3 S5125 11/20/12 11/20/12 20.00 120.96 218074 5 S5125 11/20/12 11/20/12 20.00 120.96 218074 5 S5125 11/20/12 11/20/12 20.00 120.96 218074 6 S5125 11/20/12 11/20/12 20.00 120.96 218074 7										
218071					, -,					
218071 5 T1019										
11/22/12 11/22/12 28.00 105.84		_								
REG LOC CLIENT SERVICE NAME OCTAVIO BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 2011841 SANTANA OCTAVIO 00/00/0000 GNT00231600										
OUL 2011841 2011841 SANTANA OCTAVIO OU.000/0000 ONTO0231600						CLA	IM TOTAL	544.32	CLAIM ACCOUNT REF	. 2180710011997789
OUL 2011841 2011841 SANTANA OCTAVIO OU./O/0000 ONTO/231600										
INV # LINE # PROCEDURE CODE								PRIOR .	AUTHORIZATION #	
218072 1 T1019	001	2011841	2011841	SANTANA	OCTAVIO 00/	00/0000	GNT00231600			
218072 1 T1019	TNW #	T.TNE #	DROCEDIIRE	CODE	TROM DT	יית ווקעיי	IINITTS	ΔMΩIINT'		
218072 2				CODE						
218072										
11/16/12 11/16/12 11/16/12 20.00 75.60			T1019					75.60		
218072	218072		T1019		11/15/12	11/15/12	20.00	75.60		
218072										
218072										
REG LOC CLIENT SERVICE NAME SERVICE NAME SIRTH DATE DATE RECIPIENT ID DATE										
CLAIM TOTAL 680.40 CLAIM ACCOUNT REF. 2180720012011841										
REG LOC CLIENT SERVICE NAME 05/19/1932 GRT02860500 PRIOR AUTHORIZATION # 05/19/1932 05/19/1932 GRT02860500 PRIOR AUTHORIZATION # 05/19/1932 DRIOR AUTHORIZATION # 05/19/19/1932 DRIOR AUTHORIZATION # 05/19/19/19/19/19/19/19/19/19/19/19/19/19/	218072	9	11019		11/22/12				CIAIM ACCOINT DEE	2190720012011941
NV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT 11/19/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/20/12 11/2						CLA	IIM IOIAL	000.40	CLAIM ACCOUNT REF	. 2100/20012011041
INV # LINE # PROCEDURE CODE	REG LOC	CLIENT	SERVICE	NAME	BIF	TH DATE	RECIPIENT ID	PRIOR .	AUTHORIZATION #	
218073	001	2011787	2011787	SANTIAGO	ARMINDA 05/	19/1932	GNT02860500			
218073		!!								
218073 2 T1019 11/20/12 11/20/12 16.00 60.48 218073 3 T1019 11/21/12 11/21/12 16.00 60.48 218073 4 T1019 11/22/12 11/22/12 16.00 60.48 218073 5 T1019 11/23/12 11/23/12 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2180730012011787 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID QRIVE SERVICE SANTIAGO TIA 11/16/1924 GNT02886300 INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT 218074 1 S5125 11/17/12 11/17/12 32.00 120.96 218074 2 S5125 11/18/12 11/18/12 32.00 120.96 218074 3 S5125 11/18/12 11/19/12 25.00 94.50 218074 4 S5125 11/20/12 11/20/12 32.00 120.96 218074 5 S5125 11/20/12 11/20/12 32.00 120.96 218074 5 S5125 11/23/12 11/23/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION #	**			CODE						
218073 3 T1019 11/21/12 11/21/12 16.00 60.48 218073 4 T1019 11/22/12 11/22/12 16.00 60.48 218073 5 T1019 11/23/12 11/23/12 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2180730012011787										
218073										
The content of the color of t		-								
REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT 218074 1 S5125 11/17/12 11/17/12 32.00 120.96 218074 2 S5125 11/18/12 11/18/12 32.00 120.96 218074 3 S5125 11/19/12 11/19/12 25.00 94.50 218074 4 S5125 11/20/12 11/20/12 32.00 120.96 218074 5 S5125 11/20/12 11/20/12 32.00 120.96 218074 6 S5125 11/21/12 11/21/12 32.00 120.96 218074 7 S5125 11/22/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 218074 9 S5125 11/23/12 32.00 120.96										
O01 2011851 2011851 SANTIAGO ILIA 11/16/1924 GNT02886300 INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT 218074 1 S5125 11/17/12 11/17/12 32.00 120.96 218074 2 S5125 11/18/12 11/18/12 32.00 120.96 218074 3 S5125 11/19/12 11/19/12 25.00 94.50 218074 4 S5125 11/20/12 11/20/12 32.00 120.96 218074 5 S5125 11/20/12 11/21/12 32.00 120.96 218074 5 S5125 11/21/12 11/21/12 32.00 120.96 218074 6 S5125 11/22/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # O01 2011859 2011859 SANTIAGO IVETH O0/00/0000 93703401100 PRIOR AUTHORIZATION #									CLAIM ACCOUNT REF	. 2180730012011787
O01 2011851 2011851 SANTIAGO ILIA 11/16/1924 GNT02886300 INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT 218074 1 S5125 11/17/12 11/17/12 32.00 120.96 218074 2 S5125 11/18/12 11/18/12 32.00 120.96 218074 3 S5125 11/19/12 11/19/12 25.00 94.50 218074 4 S5125 11/20/12 11/20/12 32.00 120.96 218074 5 S5125 11/20/12 11/21/12 32.00 120.96 218074 5 S5125 11/21/12 11/21/12 32.00 120.96 218074 6 S5125 11/22/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # O01 2011859 2011859 SANTIAGO IVETH O0/00/0000 93703401100 PRIOR AUTHORIZATION #										
INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT 218074 1 S5125 11/17/12 11/17/12 32.00 120.96 218074 2 S5125 11/18/12 11/18/12 32.00 120.96 218074 3 S5125 11/19/12 11/19/12 25.00 94.50 218074 4 S5125 11/20/12 11/20/12 32.00 120.96 218074 5 S5125 11/20/12 11/20/12 32.00 120.96 218074 6 S5125 11/21/12 11/21/12 32.00 120.96 218074 7 S5125 11/22/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 218074 9 S5125 1								PRIOR .	AUTHORIZATION #	
218074	001	2011851	2011851	SANTIAGO	ILIA 11/	16/1924	GNT02886300			
218074	TNW #	T.TNE #	DROCEDIIPE	CODE	TROM DT	יית ווקעיי	IINITTS	ΔMΩIINπ.		
218074 2 S5125 11/18/12 11/18/12 32.00 120.96 218074 3 S5125 11/19/12 11/19/12 25.00 94.50 218074 4 S5125 11/20/12 32.00 120.96 218074 5 S5125 11/21/12 11/21/12 32.00 120.96 218074 6 S5125 11/22/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100				CODE						
218074 3 S5125 11/19/12 11/19/12 25.00 94.50 218074 4 S5125 11/20/12 11/20/12 32.00 120.96 218074 5 S5125 11/21/12 11/21/12 32.00 120.96 218074 6 S5125 11/22/12 32.00 120.96 218074 7 S5125 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100										
218074 5 S5125 11/21/12 11/21/12 32.00 120.96 218074 6 S5125 11/22/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100										
218074 6 S5125 11/22/12 11/22/12 32.00 120.96 218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100	218074	4	S5125		11/20/12			120.96		
218074 7 S5125 11/23/12 11/23/12 32.00 120.96 CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100										
CLAIM TOTAL 820.26 CLAIM ACCOUNT REF. 2180740012011851 REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100										
REG LOC CLIENT SERVICE NAME 001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100	218074	7	S5125		11/23/12				GLATM AGGOINE SSS	0100740010011051
001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100						CLA	TW.LOLYF	820.26	CLAIM ACCOUNT REF	. 2180/40012011851
001 2011859 2011859 SANTIAGO IVETH 00/00/0000 93703401100	REG LOC	CLIENT	SERVICE	NAME	RTE	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
								I ICIOIC .	10 110111 1011	
INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT						-,				
	INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		

REPORT DA	TE 11/29/	12	SUNNYSI	DE CITYWIDE		НТРАЛ	A DATA FILE	E REPORT (PHLT837/EDI	S) PAGE 25
		44/COMPSUP/HIP					2	2 102 011 (11121007, 221)	2, 21102 23
SUBMITTER			SUNNYSIDE						
PROVIDER	ID = 113	502051 SUNNYS	SIDE			NI	PI = 11544(07492	
218075	1	S5125			2 11/18/12		60.48		
218075 218075	2	S5125 S5125		11/19/1	2 11/19/12 2 11/20/12		90.72 90.72		
218075	4	S5125		11/21/1	2 11/21/12	24.00	90.72		
218075 218075	5 6	S5125 S5125		11/22/1 11/23/1	2 11/22/12 2 11/23/12		90.72 90.72		
210075	0	55125		11/23/1	, -,	IM TOTAL	514.08	CLAIM ACCOUNT REF	. 2180750012011859
REG LOC	CLIENT	SERVICE NA	AME	P	IRTH DATE	RECIPIENT II	D PRIOR Z	AUTHORIZATION #	
001	2011788				1/18/1941	93701469700		AUTHORIZATION #	
INV #	LINE #	PROCEDURE COL	Œ	FROM DT		UNITS	AMOUNT		
218076 218076	1 2	T1019 T1019		11/19/1 11/20/1			60.48 60.48		
218076	3	T1019		11/21/1			60.48		
218076	4	T1019		11/22/1			60.48		
218076	5	T1019		11/23/1		16.00 IM TOTAL	60.48 302.40	CLAIM ACCOUNT REF	. 2180760012011788
REG LOC	CLIENT	SERVICE NA	AME	P	IRTH DATE	RECIPIENT II	D PRIOR A	AUTHORIZATION #	
001	2002124				2/05/1919	GNT03123900		TO THORIZITION	
INV #	LINE #	PROCEDURE COL	Œ	FROM DT		UNITS	AMOUNT		
218077 218077	1 2	T1019 T1019		11/18/1 11/19/1	2 11/18/12 2 11/19/12		105.84 102.06		
218077	3	T1019		11/20/1			105.84		
218077	4	T1019		11/21/1			105.84		
218077 218077	5 6	T1019 T1019		11/22/1 11/23/1	2 11/22/12 2 11/23/12		105.84 105.84		
220077	· ·	11013		11, 23, 1		AIM TOTAL	631.26	CLAIM ACCOUNT REF	. 2180770012002124
REG LOC	CLIENT		AME		IRTH DATE	RECIPIENT II	D PRIOR A	AUTHORIZATION #	
001	2011597	2011597 SC	DLIS J	UDITH 1	2/26/1931	GNT03904400			
INV #	LINE #	PROCEDURE COL	DΕ	FROM DT		UNITS	AMOUNT		
218078 218078	1 2	S5125 S5125		11/10/1 11/11/1	2 11/10/12 2 11/11/12		181.44 181.44		
218078	3	S5125		11/12/1			181.44		
218078	4	S5125		11/13/1			181.44		
218078 218078	5 6	S5125 S5125		11/17/1 11/18/1			181.44 181.44		
218078	7	S5125		11/19/1			181.44		
218078	8	S5125		11/20/1		48.00 AIM TOTAL	181.44 1,451.52	CLAIM ACCOUNT REF	. 2180780012011597
REG LOC	CLIENT	SERVICE NA	AME	פ	IRTH DATE	RECIPIENT II	•	AUTHORIZATION #	. 2100700012011357
001	2011781				2/12/1942	GNT04429300		AUTHORITARITON #	
INV #	LINE #	PROCEDURE COL	DΕ	FROM DT	-	UNITS	AMOUNT		
218079	1 2	S5125			2 11/16/12		136.08		
218079	2	S5125		11/19/1	2 11/19/12	36.00	136.08		

REPORT DA				YSIDE CITYWIDE 2012112912014475		HIPAA	DATA FIL	E REPORT (PHLT837/EDIS) PAGE 26
SUBMITTER	ID = SUN		SUNNYSIDE NNYSIDE	<u> </u>		NP.	I = 11544	.07492	
TROVIDER	. 10 113	502051 501	WIVIOIDE			111 .		.07152	
218079	3	S5125		11/20/12	11/20/12	12.00	45.36		
218079	4	S5125			11/21/12		136.08		
218079	5	S5125		11/22/12	11/22/12	12.00	45.36		
218079	6	S5125		11/23/12	11/23/12		136.08		
					CLA	IM TOTAL	635.04	CLAIM ACCOUNT REF.	2180790012011781
REG LOC 001	CLIENT 2011782	SERVICE 2011782	NAME THERMOSY		TH DATE 10/1917	RECIPIENT ID GNT02791600	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218080	1	S5125		11/10/12	11/10/12		75.60		
218080	2	S5125		11/12/12	11/12/12		120.96		
218080	3	S5125		, -,	11/13/12		120.96		
218080	4	S5125			11/14/12		120.96		
218080	5	S5125			11/15/12		120.96		
218080	6	S5125			11/16/12		120.96		
218080	7	S5125			11/17/12		75.60		
218080	8	S5125			11/19/12		120.96		
218080	9	S5125			11/20/12		120.96		
218080 218080	10 11	S5125 S5125			11/21/12		120.96 120.96		
218080	12	S5125 S5125			11/22/12 11/23/12		120.96		
210000	1.2	55125		11/23/12			1,360.80	CLAIM ACCOUNT REF.	2180800012011782
	~								
REG LOC 001	CLIENT 2011861	SERVICE 2011861	NAME TORRES		TH DATE 21/1931	RECIPIENT ID GNT03848300	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218081	1	T1019			11/18/12		90.72		
218081	2	T1019			11/19/12		120.96		
218081	3	T1019		11/20/12	11/20/12	32.00	120.96		
218081	4	T1019		11/21/12	11/21/12	32.00	120.96		
218081	5	T1019		11/22/12	11/22/12	24.00	90.72		
218081	6	T1019		11/23/12	11/23/12	32.00	120.96		
					CLA	IM TOTAL	665.28	CLAIM ACCOUNT REF.	2180810012011861
REG LOC 001	CLIENT 2011050	SERVICE 2011050	NAME TROISI		TH DATE 30/1925	RECIPIENT ID GNT06177500	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218082	1	T1019			11/17/12		120.96		
218082	2	T1019			11/19/12		120.96		
218082	3	T1019		11/20/12	11/20/12	32.00	120.96		
218082	4	T1019		11/21/12	11/21/12		120.96		
218082	5	T1019		11/22/12	11/22/12		120.96		
218082	6	T1019		11/23/12	11/23/12		120.96		
					CLA	IM TOTAL	725.76	CLAIM ACCOUNT REF.	2180820012011050
REG LOC 001	CLIENT 2011783	SERVICE 2011783	NAME VARGAS		TH DATE 06/1918	RECIPIENT ID GNT00492400	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		

REPORT DA				YSIDE CITYWIDE 2012112912014475	<u> </u>	HIPAA	A DATA FIL	E REPORT (PHLT837/E	EDIS) PAGE 27
SUBMITTER PROVIDER		NYSI 502051 SU	SUNNYSIDE NNYSIDE	<u> </u>		NE	PI = 11544	107492	
218083 218083 218083 218083 218083 218083 218083	1 2 3 4 5 6 7	T1019 T1019 T1019 T1019 T1019 T1019 T1019		11/18/12 11/19/12 11/20/12 11/21/12 11/22/12	11/17/12 11/18/12 11/19/12 11/20/12 11/21/12 11/22/12 11/23/12 CLA	20.00 20.00 20.00 20.00 20.00	75.60 75.60 75.60 75.60 75.60 75.60 75.60 529.20	CLAIM ACCOUNT R	EF. 2180830012011783
REG LOC 001	CLIENT 2011483	SERVICE 2011483	NAME VARGAS		TH DATE 23/1965	RECIPIENT ID	D PRIOR	AUTHORIZATION #	
INV # 218084 218084 218084	LINE # 1 2 3	PROCEDURE T1019 T1019 T1019	CODE	11/22/12	THRU DT 11/21/12 11/22/12 11/23/12 CLA	24.00	AMOUNT 45.36 90.72 45.36 181.44	CLAIM ACCOUNT R	EF. 2180840012011483
REG LOC 001	CLIENT 2008200	SERVICE 2008200	NAME VLAHOS		TH DATE 04/1932	RECIPIENT ID	D PRIOR	AUTHORIZATION #	
INV # 218085 218085 218085 218085 218085 218085 218085 218085	LINE # 1 2 3 4 5 6 7 8	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	11/17/12 11/18/12 11/19/12 11/20/12 11/21/12 11/22/12	THRU DT 11/13/12 11/17/12 11/18/12 11/19/12 11/20/12 11/21/12 11/22/12 11/23/12 CLA	48.00 48.00 32.00 32.00 32.00 32.00 32.00	AMOUNT 120.96 181.44 181.44 120.96 120.96 120.96 120.96 120.96	CLAIM ACCOUNT R	EF. 2180850012008200
REG LOC 001	CLIENT 2008892	SERVICE 2008892	NAME WEISZ		TH DATE 27/1920	RECIPIENT ID GNT04606900) PRIOR	AUTHORIZATION #	
INV # 218086 218086	LINE # 1 2	PROCEDURE S5125 S5125	CODE		THRU DT 11/19/12 11/21/12 CLA		AMOUNT 60.48 60.48 120.96	CLAIM ACCOUNT R	EF. 2180860012008892
REG LOC 001	CLIENT 2009618	SERVICE 2009618	NAME WEST		TH DATE 14/1933	RECIPIENT II GNT05953700) PRIOR	AUTHORIZATION #	
INV # 218087 218087 218087 218087	LINE # 1 2 3 4	PROCEDURE T1019 T1019 T1019 T1019	CODE	11/21/12 11/22/12	THRU DT 11/19/12 11/21/12 11/22/12 11/23/12 CLA	16.00 16.00	AMOUNT 60.48 60.48 60.48 60.48 241.92	CLAIM ACCOUNT R	EF. 2180870012009618
REG LOC 001	CLIENT 2003177	SERVICE 2003177	NAME WHITLEY		TH DATE 04/1950	RECIPIENT II GNT04373700) PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		

REPORT DA	TE 11/29/	12	SUNNY	SIDE CITYWIDE		HIPA	A DATA FILE	REPORT (PHLT837/EDIS) PAGE 28
INPUT FIL	E = /VOL4	44/COMPSUP	/HIPAAIN/E3202	01211291201447	5				
SUBMITTER			SUNNYSIDE				115440	77400	
PROVIDER	1D = 113	3502051 SU	NNYSIDE			NI	PI = 115440	17492	
218088	1	T1019		11/11/12	11/14/12	12.00	45.36		
218088	2	T1019			11/14/12		60.48		
218088	3	T1019			11/19/12		60.48		
218088	4	T1019			11/20/12		60.48		
218088	5	T1019			11/21/12		60.48		
218088	6	T1019			11/22/12		60.48		
					CLA	AIM TOTAL	347.76	CLAIM ACCOUNT REF.	2180880012003177
REG LOC	CLIENT	SERVICE	NAME		RTH DATE	RECIPIENT II		AUTHORIZATION #	
001	2006152	2006152	YI	CARLOS 04	/16/1959	GNT04057700			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	TRUIOMA		
218089	1 1	S5125	CODE		11/17/12		60.48		
218089	2	S5125		, ,	11/19/12		60.48		
218089	3	S5125			11/20/12		60.48		
218089	4	S5125			11/21/12		60.48		
218089	5	S5125			11/22/12		60.48		
218089	6	S5125			11/23/12		60.48		
					CLA	AIM TOTAL	362.88	CLAIM ACCOUNT REF.	2180890012006152
REG LOC	CLIENT	SERVICE	NAME		RTH DATE	RECIPIENT II		AUTHORIZATION #	
001	2005645	2005645	YIANTSELIS	VIRGINI 02,	/05/1930	GNT04795200			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218090	1	T1020	0022		11/17/12		196.56		
218090	2	T1020			11/18/12		196.56		
218090	3	T1020		11/19/12	11/19/12	1.00	196.56		
218090	4	T1020			11/20/12		196.56		
218090	5	T1020			11/21/12		196.56		
218090	6	T1020			11/22/12		196.56		
218090	7	T1020		11/23/12	11/23/12		196.56		01.000.001.000.5645
					CLA	IM TOTAL	1,375.92	CLAIM ACCOUNT REF.	2180900012005645
REG LOC	CLIENT	SERVICE	NAME	DTI	RTH DATE	RECIPIENT II	ת מ∩דמת ח	AUTHORIZATION #	
001		2011846	ZARAGOZA		/14/1933	GNT06005500		COMMONIZATION #	
001	2011010	2011010	21110100211	1011000	11,1000	GIVI 00003300			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218091	1	S5125			11/19/12		120.96		
218091	2	S5125			11/20/12		120.96		
218091	3	S5125			11/21/12		120.96		
218091	4	S5125			11/22/12		120.96		
218091	5	S5125		11/23/12	11/23/12		120.96		
					CLA	IM TOTAL	604.80	CLAIM ACCOUNT REF.	2180910012011846
REG LOC	CLIENT	SERVICE	NAME	דת	RTH DATE	RECIPIENT II	ת שחדתם ח	AUTHORIZATION #	
001	2011750	2011750	ZARE		/07/1943	GNT03716600		OTHORIZATION #	
	_011.00				,				
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218092	1	S5125			11/22/12		166.32		
218092	2	S5125		11/23/12	11/23/12		173.88		
					CLA	IM TOTAL	340.20	CLAIM ACCOUNT REF.	2180920012011750

REPORT DATE 11/29/12 SUNNYSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 29 INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202012112912014475

SUNNYSIDE

SUBMITTER ID = SUNNYSI PROVIDER ID = 113502051 SUNNYSIDE NPI = 1154407492

PROVIDER TOTALS, ID = 113502051 TOTAL # OF CLAIMS = 688

REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION #

001	1999328	1999328 ZUMAETA	FANNY 04	09/1936	GNT03663500			
INV #	LINE #	PROCEDURE CODE	FROM DT	THRU DT	UNITS	AMOUNT		
218093	1	T1019	11/17/12	11/17/12	28.00	105.84		
218093	2	T1019	11/18/12	11/18/12	28.00	105.84		
218093	3	T1019	11/19/12	11/19/12	40.00	151.20		
218093	4	T1019	11/20/12	11/20/12	40.00	151.20		
218093	5	T1019	11/21/12	11/21/12	40.00	151.20		
218093	6	T1019	11/23/12	11/23/12	40.00	151.20		
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TOTAL CLAIM AMOUNT = 70,718.45

INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202012112912014475

SUBMITTER ID = SUNNYSI SUNNYSIDE

PROVIDER ID = 113502051 SUNNYSIDE NPI = 1154407492

SUBMITTER TOTALS, ID = SUNNYSI TOTAL # OF CLAIMS = 688 TOTAL CLAIM AMOUNT = 70,718.45