INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202013021304004881

SUBMITTER ID = SUNNYSI SUNNYSIDE

	1110 111	DER ID	113	502051 501	VIVI DI DI					14	 1131	10 / 152		
RI	EG LO		LIENT 04478	SERVICE 2004478	NAME ACERNO	CLAIRE			TH DATE 28/1922	RECIPIENT I	PRIOR	AUTHORIZATION #		
:	INV = 228860 228860 228860)	NE # 1 2 3	PROCEDURE T1019 T1019 T1019	CODE	C	ROM D 02/05/ 02/07/ 02/08/	13 13		UNITS 20.00 20.00 16.00 IM TOTAL	AMOUNT 75.60 75.60 60.48 211.68	CLAIM ACCOUNT	REF.	2288600012004478
RI	EG LO		LIENT 06118	SERVICE 2006118	NAME ALI	AMRUNI			TH DATE 05/1934	RECIPIENT I 93703296700	PRIOR	AUTHORIZATION #		
	INV = 228862228862228862228862228862228862228862	L L L L	NE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125	CODE	0 0 0 0)2/04/)2/05/)2/06/)2/07/	13 13 13 13	THRU DT 02/02/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	UNITS 16.00 16.00 16.00 16.00 16.00 16.00	AMOUNT 60.48 60.48 60.48 60.48 60.48 362.88	CLAIM ACCOUNT	REF.	2288610012006118
RI	EG LO		LIENT L1654	SERVICE 2011654	NAME ALIX	PEDRO			TH DATE 31/1937	RECIPIENT I	PRIOR	AUTHORIZATION #		
	INV = 228862288622288622288622288622288622288622288622288622288622288622288622886228862288622886228862288622886228862288622886228862288622886228862288622886228862862	2 2 2 2 2 2	NE # 1 2 3 4 5 6 7	PROCEDURE S5126 S5126 S5126 S5126 S5126 S5126 S5126 S5126	CODE	0 0 0 0	02/03/ 02/04/ 02/05/ 02/06/ 02/07/	13 13 13 13 13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	UNITS 1.00 1.00 1.00 1.00 1.00 1.00 1.00	AMOUNT 196.56 196.56 196.56 196.56 196.56 196.56 196.56	CLAIM ACCOUNT	REF.	2288620012011654
RI	EG LO		LIENT	SERVICE 2010843	NAME ALSTON	ZULINE			TH DATE 07/1927	RECIPIENT I	PRIOR	AUTHORIZATION #		
	INV = 228863	3 3 3 3 3 3	NE # 1 2 3 4 5 6	PROCEDURE T1019 T1019 T1019 T1019 T1019 T1019 T1019	CODE	0 0 0 0 0)2/03/)2/04/)2/05/	13 13 13 13 13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	UNITS 32.00 32.00 32.00 32.00 32.00 32.00 32.00 30.00 IM TOTAL	AMOUNT 120.96 120.96 120.96 120.96 120.96 120.96 113.40 839.16	CLAIM ACCOUNT	REF.	2288630012010843
RI	EG LO		LIENT L2029	SERVICE 2012029	NAME ALVARADO	RUFINA			TH DATE 01/1913	RECIPIENT 1 93701384300	PRIOR	AUTHORIZATION #		
	INV :	‡ LII	JE #	PROCEDURE	CODE	F	ROM D	T	THRU DT	UNITS	AMOUNT			

REPORT DATE	E 02/13/2 = /VOL4	13 44/COMPSUP,	SUNNY /HIPAAIN/E3202	SIDE CITYWIDE 01302130400488	1	HIPAA	DATA FII	LE REPORT (PHLT837/EDIS) PAGE 2
SUBMITTER I PROVIDER I	ID = SUNI	NYSI	SUNNYSIDE				= 11544	107492
228864 228864 228864 228864 228864 228864 228864	1 2 3 4 5 6 7	S5125 S5125 S5125 S5125 S5125 S5125 S5125		02/03/13 02/04/13 02/05/13	02/08/13	28.00 28.00 28.00 28.00 28.00 28.00	105.84 105.84 105.84 105.84 105.84 105.84 740.88	CLAIM ACCOUNT REF. 2288640012012029
	CLIENT 2011581	SERVICE 2011581	NAME ASH		RTH DATE /11/1925	RECIPIENT ID GNT06270600	PRIOR	AUTHORIZATION #
INV # L 228865 228865	LINE # 1 2	PROCEDURE T1019 T1019	CODE		THRU DT 02/04/13 02/06/13 CLA		AMOUNT 52.92 60.48 113.40	CLAIM ACCOUNT REF. 2288650012011581
	CLIENT 2007817	SERVICE 2007817	NAME BEGUM		RTH DATE /19/1919	RECIPIENT ID GNT00018500	PRIOR	AUTHORIZATION #
INV # L 228866 228866 228866 228866 228866 228866	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	02/03/13 02/04/13 02/05/13 02/06/13	02/05/13 02/06/13 02/07/13	32.00 48.00 48.00 40.00	AMOUNT 136.08 120.96 181.44 181.44 151.20 166.32 937.44	CLAIM ACCOUNT REF. 2288660012007817
	CLIENT 2011503	SERVICE 2011503	NAME BERJASHEVIC		RTH DATE /30/1926	RECIPIENT ID GNT06467800	PRIOR	AUTHORIZATION #
INV # L 228867 228867	LINE # 1 2	PROCEDURE T1019 T1019	CODE		THRU DT 02/04/13 02/08/13 CLA		AMOUNT 60.48 105.84 166.32	CLAIM ACCOUNT REF. 2288670012011503
	CLIENT 2011767	SERVICE 2011767	NAME BERROCAL		RTH DATE /08/1924	RECIPIENT ID GNT00493600	PRIOR	AUTHORIZATION #
INV # L 228868 228868 228868 228868 228868 228868 228868 228868	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	02/03/13 02/04/13	02/07/13 02/08/13	20.00 20.00 20.00 20.00 20.00	AMOUNT 75.60 75.60 75.60 75.60 75.60 75.60 75.60 529.20	CLAIM ACCOUNT REF. 2288680012011767
	CLIENT 2011979	SERVICE 2011979	NAME BERRY		RTH DATE /14/1934	RECIPIENT ID GNT03239600	PRIOR	AUTHORIZATION #
INV # L	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	

REPORT DAT				SIDE CITYWIDE 013021304004881		HIPA	A DATA FI	LE REPORT (PHLT837/EDIS)	PAGE 3
SUBMITTER	ID = SUN	NYSI	SUNNYSIDE				DT 1154	405400	
PROVIDER	ID = 113	502051 SUN	INYSIDE			NI	PI = 1154	10/492	
228869	1	S5125		02/02/13			120.96		
228869	2	S5125		02/03/13 02/04/13			120.96		
228869 228869	3 4	S5125 S5125		02/04/13			120.96 120.96		
228869	5	S5125		02/05/13			120.96		
228869	6	S5125		02/08/13			120.96		
220003	Ŭ	03123		02/00/13	- , , -	AIM TOTAL	725.76	CLAIM ACCOUNT REF.	2288690012011979
REG LOC	CLIENT	SERVICE	NAME		TH DATE	RECIPIENT II		AUTHORIZATION #	
001	2006632	2006632	BUCARO	CONCETT 02/	27/1916	GNT04556300			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228870 228870	1 2	S5125 S5125		02/04/13 02/05/13			136.08 136.08		
228870	3	S5125		02/05/13			136.08		
228870	4	S5125		02/07/13			136.08		
228870	5	S5125		02/08/13			136.08		
						IM TOTAL	680.40	CLAIM ACCOUNT REF.	2288700012006632
REG LOC 001	CLIENT 2011960	SERVICE 2011960	NAME BUSTAMENTE		TH DATE 08/1938	RECIPIENT II 93702523200		AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228871	1 1 1 H	S5125	CODE	02/02/13			68.04		
228871	2	S5125		02/04/13			75.60		
228871	3	S5125		02/05/13			75.60		
228871	4	S5125		02/06/13			75.60		
228871	5	S5125		02/08/13			75.60		
					CLA	IM TOTAL	370.44	CLAIM ACCOUNT REF.	2288710012011960
REG LOC 001	CLIENT 2012164	SERVICE 2012164	NAME CALDERON		TH DATE 26/1929	RECIPIENT II GNT00036800		AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228872	1	S5125	CODE	02/02/13			181.44		
228872	2	S5125		02/03/13			181.44		
228872	3	S5125		02/04/13			181.44		
228872	4	S5125		02/05/13	02/05/13		181.44		
228872	5	S5125		02/06/13			181.44		
228872	6	S5125		02/07/13			181.44		
228872	7	S5125		02/08/13			181.44		
					CLA	IM TOTAL	1,270.08	CLAIM ACCOUNT REF.	2288720012012164
REG LOC 001	CLIENT 2011912	SERVICE 2011912	NAME CANINO		TH DATE 06/1941	RECIPIENT II GNT0279200	D PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228873	1	S5125		02/04/13			90.72		
228873	2	S5125		02/05/13			90.72		
228873	3	S5125		02/06/13			90.72		
228873	4	S5125		02/07/13	02/07/13	24.00	90.72		

REPORT DA INPUT FIL	TE 02/13/ E = /VOL4	13 44/COMPSUP	SUNNY HIPAAIN/E3202/	SIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 4 013021304004881
		NYSI 502051 SUN		NPI = 1154407492
228873	5	S5125		02/08/13 02/08/13 24.00 90.72 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2288730012011912
REG LOC 001	CLIENT 2011978	SERVICE 2011978	NAME CAQUIAS	
INV # 228874 228874 228874 228874 228874	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 16.00 60.48 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2288740012011978
REG LOC 001	CLIENT 2011797	SERVICE 2011797	NAME CARTAGENA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 10/05/1948 GNT00039700
INV # 228875 228875	LINE # 1 2			FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 20.00 75.60 02/08/13 02/08/13 20.00 75.60 CLAIM TOTAL 151.20 CLAIM ACCOUNT REF. 2288750012011797
REG LOC 001	CLIENT 2002769	2002769	NAME CEPEDA	TOMASA 09/07/1932 93700964900
INV # 228876 228876 228876 228876 228876	LINE # 1 2 3 4 5	PROCEDURE T1019 T1019 T1019 T1019 T1019	CODE	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 24.00 90.72 02/05/13 02/05/13 24.00 90.72 02/06/13 02/06/13 24.00 90.72 02/07/13 02/07/13 24.00 90.72 02/07/13 02/07/13 24.00 90.72 02/08/13 02/08/13 24.00 90.72 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2288760012002769
REG LOC 001	CLIENT 2012059	SERVICE 2012059	NAME CHICO	
INV # 228877 228877 228877 228877 228877 228877 228877	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 TT S5125 TT S5125 TT S5125 TT S5125 TT S5125 TT S5125 TT	CODE	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 32.00 128.96 02/03/13 02/03/13 32.00 128.96 02/04/13 02/04/13 24.00 96.72 02/05/13 02/05/13 24.00 96.72 02/06/13 02/06/13 24.00 96.72 02/07/13 02/07/13 24.00 96.72 02/08/13 02/08/13 24.00 96.72 02/08/13 02/08/13 24.00 96.72 02/08/13 02/08/13 24.00 96.72 02/08/13 02/08/13 24.00 96.72 CLAIM TOTAL 741.52 CLAIM ACCOUNT REF. 2288770012012059
REG LOC 001	CLIENT 2011981	SERVICE 2011981	NAME COHEN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ETHEL 09/19/1937 GNT06348000
INV # 228878	LINE #	PROCEDURE S5125	CODE	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 40.00 151.20

REPORT DA			SUNNY: HIPAAIN/E3202/		CITYWIDE		HIPA	A DATA FIL	E REPORT (PHLT837/EDIS) PAGE 5
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SUBMITTER			SUNNYSIDE							
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228878	3	S5125			02/03/13	02/03/13		105.84		
228878	4	S5125			02/06/13	02/06/13		105.84		
228878	5	S5125			02/07/13	02/07/13		105.84		
						CLA	IM TOTAL	619.92	CLAIM ACCOUNT REF.	2288780012011981
REG LOC	CLIENT	SERVICE	NAME		BIR	TH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #	
001	2008320	2008320	COLAVITTI	JEAN		23/1911	GNT04482200		110 1110111 11011	
INV # 228879	LINE # 1	PROCEDURE S5125	CODE		FROM DT 02/02/13	THRU DT 02/02/13	UNITS 32.00	AMOUNT 120.96		
228879	2	S5125 S5125			02/02/13	02/02/13		120.96		
228879	3	S5125			02/03/13	02/03/13		120.96		
228879	4	S5125			02/05/13	02/05/13		90.72		
228879	5	S5125			02/06/13	02/06/13		120.96		
228879	6	S5125			02/07/13	02/07/13		120.96		
228879	7	S5125			02/08/13	02/08/13		83.16		
						CLA	IM TOTAL	778.68	CLAIM ACCOUNT REF.	2288790012008320
REG LOC	CLIENT	SERVICE	NAME		BIR	TH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #	
001	2009790	2009790	COLEMAN	REGI		26/1958	GNT06002000		110 1110111 11011	
T2777 II	T T3TD	DD 0 GED11D E	G077					7140777777		
INV # 228880	LINE # 1	PROCEDURE S5125	CODE		FROM DT 02/02/13	THRU DT 02/02/13	UNITS 32.00	AMOUNT 120.96		
228880	2	S5125 S5125			02/02/13	02/02/13		120.96		
228880	3	S5125			02/03/13	02/03/13		75.60		
228880	4	S5125			02/05/13	02/05/13		75.60		
228880	5	S5125			02/06/13	02/06/13	20.00	75.60		
228880	6	S5125			02/07/13	02/07/13		75.60		
228880	7	S5125			02/08/13	02/08/13		75.60	CLAIM ACCOUNT DEE	2200000012000700
						CLA	IM TOTAL	619.92	CLAIM ACCOUNT REF.	2288800012009790
REG LOC	CLIENT	SERVICE	NAME		BIR	TH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #	
001	2012060	2012060	COLON	MARIA	A 05/	10/1925	GNT05960000			
INV #	LINE #	PROCEDURE	CODE		FROM DT	THRU DT	UNITS	AMOUNT		
228881	1	S5125			02/02/13	02/02/13		60.48		
228881	2	S5125			02/03/13	02/03/13		60.48		
228881	3	S5125			02/04/13	02/04/13		181.44		
228881	4	S5125			02/05/13	02/05/13		181.44		
228881	5	S5125			02/06/13	02/06/13		181.44		
228881	6 7	S5125			02/07/13	02/07/13		181.44		
228881	/	S5125			02/08/13	02/08/13	48.00 IM TOTAL	181.44 1,028.16	CLAIM ACCOUNT REF.	2288810012012060
								•		
REG LOC	CLIENT	SERVICE	NAME			TH DATE	RECIPIENT I		AUTHORIZATION #	
001	2011769	2011769	COMET	JULIA	10/	07/1934	GNT04442600			
INV #	LINE #	PROCEDURE	CODE		FROM DT	THRU DT	UNITS	AMOUNT		
228882	1	T1019			02/04/13	02/04/13		90.72		
228882	2	T1019			02/05/13	02/05/13	24.00	90.72		

REPORT DATE 02/13/	13 SUNNY	SIDE CITYWIDE HIPAA DA	ATA FILE REPORT (PHLT837/EDIS) PAGE 6
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SUBMITTER ID = SUN PROVIDER ID = 113	NYSI SUNNYSIDE 3502051 SUNNYSIDE		= 1154407492
228882 3 228882 4 228882 5		02/07/13 02/07/13 24.00 02/08/13 02/08/13 24.00 CLAIM TOTAL 4	90.72 90.72 90.72 90.72 453.60 CLAIM ACCOUNT REF. 2288820012011769
REG LOC CLIENT 001 2011798	SERVICE NAME 2011798 CUCALON	BIRTH DATE RECIPIENT ID 04/20/1926 GNT05761000	PRIOR AUTHORIZATION #
INV # LINE # 228883 1 228883 2 228883 3 228883 4	PROCEDURE CODE S5125 S5125 S5125 S5125	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	AMOUNT 166.32 158.76 166.32 166.32 166.32 157.72 CLAIM ACCOUNT REF. 2288830012011798
REG LOC CLIENT 001 2012185	SERVICE NAME 2012185 DANIELS	BIRTH DATE RECIPIENT ID MAGGIE 07/25/1932 GNT00057300	PRIOR AUTHORIZATION #
INV # LINE # 228884 1 228884 2	PROCEDURE CODE S5125 S5125	02/04/13 02/04/13 12.00 02/08/13 02/08/13 12.00	AMOUNT 45.36 45.36 90.72 CLAIM ACCOUNT REF. 2288840012012185
REG LOC CLIENT 001 2011953	SERVICE NAME 2011953 DE LA CRUZ		PRIOR AUTHORIZATION #
INV # LINE # 228885 1 228885 2 228885 3		02/06/13 02/06/13 22.00 02/07/13 02/07/13 28.00 1 02/08/13 02/08/13 19.00 CLAIM TOTAL 2	AMOUNT 83.16 L05.84 71.82 260.82 CLAIM ACCOUNT REF. 2288850012011953
REG LOC CLIENT 001 2011599	SERVICE NAME 2011599 DELEON		PRIOR AUTHORIZATION #
INV # LINE # 228886 1 228886 2 228886 3 228886 4 228886 5	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS A 02/04/13 02/04/13 24.00 02/05/13 02/05/13 24.00 02/06/13 02/06/13 24.00 02/07/13 02/07/13 24.00 02/08/13 02/08/13 24.00 02/08/13 02/08/13 24.00 CLAIM TOTAL 4	AMOUNT 90.72 90.72 90.72 90.72 90.72 90.72 453.60 CLAIM ACCOUNT REF. 2288860012011599
REG LOC CLIENT 001 2012128	SERVICE NAME 2012128 DELIGIANNAKI	BIRTH DATE RECIPIENT ID 09/17/1923 GNT06658000	PRIOR AUTHORIZATION #
INV # LINE # 228887 1 228887 2 228887 3 228887 4	PROCEDURE CODE T1019 T1019 T1019 T1019	02/02/13 02/02/13 23.00 02/03/13 02/03/13 16.00 02/04/13 02/04/13 44.00 1	AMOUNT 86.94 60.48 L66.32 L66.32

REPORT DATE 02/13/13 INPUT FILE = /VOL444/COMPSUP/H	SUNNYSIDE CITYWIDE HIPAAIN/E320201302130400488		DATA FILE REPORT (PHLT837/EDIS) PAGE 7
SUBMITTER ID = SUNNYSI PROVIDER ID = 113502051 SUNN	SUNNYSIDE NYSIDE	NPI	= 1154407492
228887 5 T1019 228887 6 T1019 228887 7 T1019	02/07/13	02/06/13 44.00 02/07/13 43.00 02/08/13 40.00 CLAIM TOTAL	166.32 162.54 151.20 960.12 CLAIM ACCOUNT REF. 2288870012012128
		RTH DATE RECIPIENT ID /28/1919 GNT6048400	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE C 228888 1 S5125		THRU DT UNITS 02/02/13 24.00 CLAIM TOTAL	AMOUNT 90.72 90.72 CLAIM ACCOUNT REF. 2288880012009982
		RTH DATE RECIPIENT ID /28/1919 GNT6048400	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE C 228889 1 S5125 228889 2 S5125		THRU DT UNITS 02/07/13 32.00 02/08/13 32.00 CLAIM TOTAL	AMOUNT 120.96 120.96 241.92 CLAIM ACCOUNT REF. 2288890012009982
		RTH DATE RECIPIENT ID /21/1918 GNT05048800	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE C 228890 1 T1019 228890 2 T1019 228890 3 T1019 228890 4 T1019 228890 5 T1019 228890 6 T1019 228890 7 T1019	02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13	02/05/13 28.00 02/06/13 28.00	AMOUNT 75.60 75.60 105.84 105.84 105.84 105.84 105.84 680.40 CLAIM ACCOUNT REF. 2288900012006667
		RTH DATE RECIPIENT ID GNT01219900	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE C 228891 1 S5125 228891 2 S5125 228891 3 S5125 228891 4 S5125	02/04/13 02/05/13 02/07/13		AMOUNT 90.72 90.72 90.72 90.72 90.72 362.88 CLAIM ACCOUNT REF. 2288910012004554
		RTH DATE RECIPIENT ID /16/1925 GNT06350900	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE C 228892 1 S5125 228892 2 S5125 228892 3 S5125 228892 4 S5125	02/04/13 02/05/13 02/06/13	THRU DT UNITS 02/04/13 26.00 02/05/13 26.00 02/06/13 26.00 02/07/13 26.00	AMOUNT 98.28 98.28 98.28 98.28

REPORT D	ATE 02/13/ LE = /VOL4	13 44/COMPSUP	SUNNY /HIPAAIN/E3202	SIDE CITYWIDE 01302130400488	L	HIPAA	DATA FI	LE REPORT (PHLT837/EDIS)	PAGE 8
		NYSI 502051 SU	SUNNYSIDE NNYSIDE	1		NP	I = 1154	407492	
228892	5			02/08/13	02/08/13 CLA	26.00 IM TOTAL	98.28 491.40		2288920012011256
REG LOC	2006124	2006124		ALBERTH 06	/25/1947	GNT04981500		AUTHORIZATION #	
INV # 228893 228893 228893 228893 228893 228893	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT 01/26/13 02/02/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 01/26/13 02/02/13 02/04/13 02/05/13 02/06/13 02/06/13 02/07/13 02/08/13	UNITS 24.00 24.00 28.00 28.00 28.00 28.00 28.00 28.00 IM TOTAL	AMOUNT 90.72 90.72 105.84 105.84 105.84 105.84 710.64	CLAIM ACCOUNT REF.	2288930012006124
REG LOC		SERVICE 2009394	NAME ECKMAN		RTH DATE /02/1919	RECIPIENT ID GNT05317600	PRIOR	AUTHORIZATION #	
INV # 228894 228894 228894 228894 228894 228894	LINE # 1 2 3 4 5 6 7	PROCEDURE T1020 T1020 T1020 T1020 T1020 T1020 T1020	CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	UNITS 1.00 1.00 1.00 1.00 1.00 1.00 1.00	AMOUNT 196.56 196.56 196.56 196.56 196.56 196.56	CLAIM ACCOUNT REF.	2288940012009394
REG LOC	CLIENT 2011963	SERVICE 2011963	NAME ENCARNACION	BII LUZ 05,	מחנו האתם	DEGIDIENE ID	DDTOD	AUTHORIZATION #	
INV # 228895 228895 228895 228895 228895	LINE # 1 2 3 4 5	PROCEDURE T1019 TT T1019 TT T1019 TT T1019 TT T1030	CODE	FROM DT 02/04/13 02/05/13 02/06/13 02/08/13 01/09/13	THRU DT 02/04/13 02/05/13 02/06/13 02/08/13 01/09/13 CLA	UNITS 16.00 16.00 16.00 16.00 1.00 IM TOTAL	AMOUNT 64.48 64.48 64.48 64.48 85.00 342.92	CLAIM ACCOUNT REF.	2288950012011963
REG LOC	CLIENT 2012061	SERVICE 2012061	NAME ENCARNANCION	BII MARTIN 05,	RTH DATE /07/1965	RECIPIENT ID GNT04160000	PRIOR	AUTHORIZATION #	
INV # 228896 228896 228896 228896 228896	LINE # 1 2 3 4 5	PROCEDURE T1019 TT T1019 TT T1019 TT T1019 TT T1019 TT	CODE	FROM DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	UNITS 12.00 12.00 12.00 12.00 12.00	AMOUNT 48.36 48.36 48.36 48.36	CLAIM ACCOUNT REF.	2200060012012061

REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2012493 2012493 ESPINOZA LUPE E 08/06/1929 GNT06559300

INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT

	00::::	1.0						
REPORT DA	TE 02/13/	13	SUNNY	SIDE CITYWIDE 013021304004881		HIPAA	DATA FII	LE REPORT (PHLT837/EDIS) PAGE 9
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228897	2	T1019			02/05/13		120.96	
228897	3 4	T1019 T1019			02/06/13 02/07/13		60.48 60.48	
228897 228897	5	T1019			02/07/13		60.48	
220097	5	11019		02/00/13		IM TOTAL	423.36	CLAIM ACCOUNT REF. 2288970012012493
					СПА	III IOIAL	123.30	CLAIM ACCOONT REF. 22009/0012012199
REG LOC 001	CLIENT 2012026	SERVICE 2012026	NAME ESTEVEZ	BIR JULIO M 07/	TH DATE 04/1955	RECIPIENT ID GNT04657700	PRIOR	AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
228898	1	S5125	CODE		02/04/13		136.08	
228898	2	S5125			02/06/13		136.08	
228898	3	S5125		02/08/13	02/08/13	32.00	120.96	
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REG LOC 001	CLIENT 2012026	SERVICE 2012026	NAME ESTEVEZ	JULIO M 07/	TH DATE 04/1955	RECIPIENT ID GNT04657700	PRIOR	AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
228899	1	T1030	CODE		01/10/13		85.00	
					CLA	IM TOTAL	85.00	CLAIM ACCOUNT REF. 2288990012012026
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2012112	2012112	ESTEVEZ	MARCIA 12/	01/2012	GNT00342800		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
228900	1	T1019		02/02/13	02/02/13	24.00	90.72	
228900	2	T1019		02/08/13	02/08/13		90.72	
					CLA	IM TOTAL	181.44	CLAIM ACCOUNT REF. 2289000012012112
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2000600	2000600	FELICIANO	JOAN 10/	17/1935	GNT04140800		
INV #	LINE #	PROCEDURE	CODE	FROM DT		UNITS	AMOUNT	
228901 228901	1 2	T1019 T1019			02/02/13 02/03/13		60.48 60.48	
228901	3	T1019			02/03/13		90.72	
228901	4	T1019			02/05/13		90.72	
228901	5	T1019			02/06/13		90.72	
228901	6	T1019		02/07/13	02/07/13		90.72	
228901	7	T1019		02/08/13	02/08/13	24.00	90.72	
					CLA	IM TOTAL	574.56	CLAIM ACCOUNT REF. 2289010012000600
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2011866	2011866	FELIPE	ROSA 12/	13/1930	GNT02393600		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
228902	1	S5125			02/02/13		60.48	
228902	2	S5125			02/03/13		60.48	
228902	3	S5125		02/04/13	02/04/13	16.00	60.48	
1								

REPORT DA	TE 02/13/	13	SUNNY	SIDE	CITYWIDE		HIPA	A DATA FI	LE REPORT (PHLT8		S) PAGE 10
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PROVIDER	ID = 113	502051 SUI	NNYSIDE				N	PI = 1154	407492		
228902	4	S5125			02/05/13			60.48			
228902 228902	5 6	S5125 S5125			02/06/13	02/06/13 02/07/13		60.48 60.48			
228902	7	S5125			02/08/13			60.48			
						CLA	IM TOTAL	423.36	CLAIM ACCOU	NT REF.	. 2289020012011866
REG LOC 001	CLIENT 2008314	SERVICE 2008314	NAME FERNANDEZ	ANA		TH DATE 14/1947	RECIPIENT II		AUTHORIZATION #		
INV #	LINE #	PROCEDURE	CODE		FROM DT		UNITS	AMOUNT			
228903	1	S5125				02/02/13		60.48			
228903 228903	2	S5125 S5125				02/03/13 02/04/13		60.48 60.48			
228903	4	S5125 S5125				02/04/13		60.48			
228903	5	S5125			02/05/13			60.48			
228903	6	S5125				02/07/13		60.48			
228903	7	S5125			02/08/13			60.48			
						CLA	IM TOTAL	423.36	CLAIM ACCOU	NT REF.	. 2289030012008314
REG LOC 001	CLIENT 2011852	SERVICE 2011852	NAME FERNANDEZ		X 11/	TH DATE 20/1935	RECIPIENT II		AUTHORIZATION #		
INV #	LINE #	PROCEDURE	CODE		FROM DT	THRU DT	UNITS	AMOUNT			
228904	1	S5125			02/05/13	02/05/13	16.00	60.48			
228904	2	S5125			02/06/13	02/06/13	22.00	83.16			
228904 228904	3 4	S5125 S5125			02/07/13	02/07/13	16.00 16.00	60.48 60.48			
220904	7	33123			02/00/13	CLA	IO.OU IM TOTAL	264.60		NT REF.	. 2289040012011852
REG LOC	CLIENT	SERVICE	NAME:		BIR	TH DATE	RECIPIENT I	D PRIOR	AUTHORIZATION #		
001		2009960	NAME FERRARA	ANN		27/1925	GNT05748600		THE THICKE BELLEVIOLE III		
INV #	LINE #	PROCEDURE	CODE		FROM DT		UNITS	AMOUNT			
228905 228905	1 2	S5125 S5125				02/02/13 02/03/13		90.72 90.72			
228905	3	S5125				02/03/13		120.96			
228905	4	S5125			02/05/13		32.00	120.96			
228905	5	S5125			02/06/13			120.96			
228905	6 7	S5125						120.96			
228905	/	S5125			02/08/13	02/08/13	32.00 IM TOTAL	120.96 786.24		איר פוד	. 2289050012009960
										VI KEF.	. 2209030012009900
REG LOC 001	CLIENT 2009589	SERVICE 2009589	NAME FERRO	JOSE		TH DATE 09/1915	RECIPIENT II GNT05940400		AUTHORIZATION #		
INV #	LINE #	PROCEDURE	CODE		FROM DT		UNITS	AMOUNT			
228906	1	T1019				02/02/13		90.72			
228906 228906	2	T1019 T1019				02/03/13 02/04/13		60.48 181.44			
228906	4	T1019 T1019				02/04/13		181.44			
228906	5	T1019				02/05/13		181.44			

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SUBMITTER ID = PROVIDER ID =	SUNNYSI SUNNY 113502051 SUNNYSIDE	SIDE	NPI = 11544	107492
228906 6			48.00 181.44	
228906 7	T1019	02/08/13 02/08/13	40.00 151.20	
		CLAIM	TOTAL 1,028.16	CLAIM ACCOUNT REF. 2289060012009589
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001 20118	00 2011800 FRANCIS	VICTORI 11/22/1924 GN	T03398100	
INV # LINE	# PROCEDURE CODE	FROM DT THRU DT	UNITS AMOUNT	
228907 1	S5125	02/02/13 02/02/13	28.00 105.84	
228907 2	S5125	02/04/13 02/04/13	28.00 105.84	
228907 3	S5125		28.00 105.84	
228907 4			28.00 105.84	
228907 5	2022		28.00 105.84	
228907 6			28.00 105.84	
228907 7			1.00 85.00	
228907 /	11030			GL 3 TM 3 GGOLDEE DEE 0000070010011000
		CLAIM	TOTAL 720.04	CLAIM ACCOUNT REF. 2289070012011800
REG LOC CLIE	NT SERVICE NAME	BIRTH DATE RE	CIPIENT ID PRIOR	AUTHORIZATION #
				AUTHORIZATION #
001 20118	01 2011801 GARCIA	MARIA A 09/09/1930 GN	T02860800	
T.T	U DD0.GED1177 G0D7	550V 55 550V 55		
INV # LINE		FROM DT THRU DT	UNITS AMOUNT	
228908 1			28.00 105.84	
228908 2			28.00 105.84	
228908 3			28.00 105.84	
228908 4	S5125	02/05/13 02/05/13	28.00 105.84	
228908 5	S5125	02/06/13 02/06/13	28.00 105.84	
228908 6	S5125	02/07/13 02/07/13	28.00 105.84	
228908 7			28.00 105.84	
		CLAIM '		CLAIM ACCOUNT REF. 2289080012011801
REG LOC CLIE	NT SERVICE NAME	BIRTH DATE RE	CIPIENT ID PRIOR	AUTHORIZATION #
001 20094			T05745100	
	55 2009155 001	102121311 11/20/1/31 011	103710100	
INV # LINE	# PROCEDURE CODE	FROM DT THRU DT	UNITS AMOUNT	
228909 1			16.00 60.48	
228909 2			16.00 60.48	
228909 3			20.00 75.60	
228909 3	11019	02/08/13 02/08/13 CLAIM '		GI 7 IN 7 GGOINE DEE 220000012000425
		CLAIM	TOTAL 196.56	CLAIM ACCOUNT REF. 2289090012009435
REG LOC CLIE	NT SERVICE NAME	BIRTH DATE RE	CIPIENT ID PRIOR	AUTHORIZATION #
				AUTHORIZATION #
001 20116	62 2011662 GONZALEZ	MO RAMON 02/10/1935 GN	T02343300	
INV # LINE	# PROCEDURE CODE	FROM DT THRU DT	UNITS AMOUNT	
			16.00 AMOUNT 60.48	
228910 1				
228910 2			16.00 60.48	
228910 3			16.00 60.48	
228910 4			16.00 60.48	
228910 5			16.00 60.48	
228910 6			16.00 60.48	
228910 7	S5125		16.00 60.48	
		CLAIM	TOTAL 423.36	CLAIM ACCOUNT REF. 2289100012011662
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SUBMITTER ID = SUNNYSI SUNNYSIDE

REG LOC 001	CLIENT 2011821	SERVICE 2011821	NAME GONZALEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # CARMEN 08/15/1948 GNT0098100
INV # 228911 228911 228911 228911 228911	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 16.00 60.48 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2289110012011821
REG LOC 001	CLIENT 2012111	SERVICE 2012111	NAME GONZALEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PABLO 02/01/1927 93702951400
INV # 228912 228912 228912 228912 228912 228912 228912	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 20.00 75.60 02/03/13 02/03/13 20.00 75.60 02/04/13 02/04/13 20.00 75.60 02/05/13 02/05/13 20.00 75.60 02/05/13 02/05/13 20.00 75.60 02/06/13 02/06/13 20.00 75.60 02/07/13 02/07/13 20.00 75.60 02/07/13 02/07/13 20.00 75.60 02/08/13 02/08/13 20.00 75.60 02/08/13 02/08/13 50.00 75.60 CLAIM TOTAL 529.20 CLAIM ACCOUNT REF. 2289120012012111
REG LOC 001	CLIENT 2011822	SERVICE 2011822	NAME GREAVES	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # BARBARA 08/15/1945 GNT03748500
INV # 228913 228913 228913	LINE # 1 2 3	PROCEDURE T1019 T1019 T1019	CODE	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 2289130012011822
REG LOC 001	CLIENT 2010494	SERVICE 2010494	NAME GREENSPAN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ALICE 04/15/1942 GNT04498400
INV # 228914 228914 228914 228914 228914 228914	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 20.00 75.60 02/03/13 02/03/13 20.00 75.60 02/04/13 02/04/13 20.00 75.60 02/06/13 02/06/13 20.00 75.60 02/06/13 02/07/13 20.00 75.60 02/07/13 02/07/13 20.00 75.60 02/08/13 02/08/13 20.00 75.60 02/08/13 02/08/13 20.00 75.60 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2289140012010494
REG LOC 001	CLIENT 2012037	SERVICE 2012037	NAME GUERRA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MAYRA 01/24/1958 GNT02427000
INV # 228915	LINE # 1	PROCEDURE T1019	CODE	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 20.00 75.60

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INPUT FIL	TE UZ/13/ E = /VOL4	44/COMPSUP/H	SUNNY: IPAAIN/E32020	SIDE CITYWIDE 013021304004881		HIPAA	DATA FI	LE REPORT (PHLT837/E	DIS) PAGE 13
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PROVIDER	ID = 113	502051 SUNN					I = 11544	107492	
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228915	4	T1019		02/05/13	02/05/13	24.00	90.72		
228915	5	T1019		02/06/13	02/06/13	24.00	90.72		
228915	6	T1019		02/07/13	02/07/13	24.00	90.72		
228915	7	T1019		02/08/13	02/08/13	ZI.UU IM TOTAL	79.38 593.46	CIAIM ACCOUNT B	EF. 2289150012012037
					CLIA	IM IOIAL	393.40	CLAIM ACCOUNT R	EF. 2209130012012037
REG LOC	CLIENT	SERVICE 1	NAME GUZMAN	BIR			PRIOR	AUTHORIZATION #	
001	2011770	2011770	GUZMAN	ALICIA 05/	26/2012	GNT00484900			
INV #	LINE #	PROCEDURE CO	ODE	FROM DT 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT	UNITS	AMOUNT		
228916	1	T1019		02/05/13	02/05/13	16.00	60.48		
228916	2	T1019		02/06/13	02/06/13	16.00	60.48		
228916	3	T1019		02/07/13	02/07/13	16.00	60.48		
228916	4	T1019		02/08/13	02/08/13	16.00	60.48	CLATM ACCOUNTED	BB 0000160010011770
					CLA	IM TOTAL	241.92	CLAIM ACCOUNT R	EF. 2289160012011770
REG LOC	CLIENT	SERVICE 1	NAME GUZMAN	BIR			PRIOR	AUTHORIZATION #	
001	2011600					GNT03023100			
INV #	LINE #	PROCEDURE CO	ODE	FROM DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT	UNITS	AMOUNT		
228917	1	S5125		02/04/13	02/04/13	22.00	83.16		
228917	2	S5125		02/05/13	02/05/13	22.00	83.16		
228917	3	S5125		02/06/13	02/06/13	22.00	83.16		
228917 228917	4 5	S5125		02/07/13	02/07/13	22.00 22.00	83.16 83.16		
220917	5	55125		02/00/13	02/06/13 CLA	IM TOTAL	415.80	CLAIM ACCOUNT R	EF. 2289170012011600
REG LOC	CLIENT	SERVICE 1	NAME HENLEY	BIR	TH DATE		PRIOR	AUTHORIZATION #	
001	2011472				23/1927				
INV #	LINE #	PROCEDURE CO	ODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13	THRU DT	UNITS	AMOUNT		
228918	1	T1019		02/02/13	02/02/13	32.00	120.96		
228918	2	T1019		02/03/13	02/03/13	32.00	120.96		
228918	3 4	T1019		02/04/13	02/04/13	40.00 40.00	151.20		
228918	4	11019		02/05/13	02/05/13 CT.A	IM TOTAL	151.20 544.32	CLAIM ACCOUNT R	EF. 2289180012011472
					C111	111 1011111	311.32	CEMIN NECOUNT N	11. 2209100012011172
REG LOC	CLIENT		NAME		TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001	2011252	2011252 I	HENRIQUEZ	TERESA 10/	15/1938	GNT06350600			
INV #	LINE #	PROCEDURE CO	ODE	FROM DT	THRU DT	UNITS	AMOUNT		
228919	1	S5125		02/02/13			60.48		
228919	2	S5125		02/03/13			60.48		
228919	3	S5125		02/04/13			120.96		
228919 228919	4 5	S5125 S5125		02/05/13 02/06/13			120.96 120.96		
228919	6	S5125 S5125		02/06/13			120.96		
228919	7	S5125		02/07/13			120.96		
						IM TOTAL	725.76	CLAIM ACCOUNT R	EF. 2289190012011252
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SUBMITTER ID = SUNNYSI SUNNYSIDE

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INV # 228920 228920 228920 228920 228920	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125	CODE	02/05/2 02/06/2 02/07/2	13 02/04/13 13 02/05/13 13 02/06/13 13 02/07/13 13 02/08/13	3 24.00 3 24.00 24.00	AMOUNT 90.72 90.72 90.72 90.72 90.72 453.60	
REG LOC 001	CLIENT 2011824	SERVICE 2011824	NAME HICKS		BIRTH DATE 00/00/0000	RECIPIENT ID 9370331550	PRIOR	AUTHORIZATION #
INV # 228921 228921 228921 228921 228921 228921 228921	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	02/03/3 02/04/3 02/05/3 02/06/3 02/07/3	13 02/02/13 13 02/03/13 13 02/04/13 13 02/05/13 13 02/06/13 13 02/07/13 13 02/08/13	3 16.00 3 30.00 3 26.00 3 30.00 3 26.00	AMOUNT 60.48 60.48 113.40 98.28 113.40 98.28 113.40 657.72	
REG LOC 001	CLIENT 2009400	SERVICE 2009400	NAME HUSTIU		BIRTH DATE 02/04/1929	RECIPIENT ID GNT05850100	PRIOR	AUTHORIZATION #
INV # 228922 228922	LINE # 1 2	PROCEDURE T1019 T1019	CODE		13 02/04/13 13 02/06/13		AMOUNT 30.24 30.24 60.48	
REG LOC 001	CLIENT 2011864	SERVICE 2011864	NAME IGLESIAS		BIRTH DATE 09/23/1918	RECIPIENT ID GNT00117600	PRIOR	AUTHORIZATION #
INV # 228923 228923 228923 228923 228923 228923 228923	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	02/03/1 02/04/1 02/05/1	13 02/02/13 13 02/03/13 13 02/04/13 13 02/05/13 13 02/06/13 13 02/07/13 13 02/08/13	3 96.00 3 96.00 3 96.00 3 96.00 3 96.00 3 96.00	AMOUNT 362.88 362.88 362.88 362.88 362.88 362.88 362.88	
REG LOC 001	CLIENT 2012309	SERVICE 2012309	NAME IRIMIA		BIRTH DATE 09/19/1938	RECIPIENT ID GNT0360570	PRIOR	AUTHORIZATION #
INV # 228924	LINE # 1	PROCEDURE T1019	CODE	FROM D'02/02/	T THRU DT 13 02/02/13	UNITS 32.00	AMOUNT 120.96	

REPORT DA				SIDE CITYWIDE 013021304004881		HIPAA	DATA FIL	E REPORT (PHLT837/EDIS) PAGE 15
SUBMITTER PROVIDER		NYSI 502051 SUN	SUNNYSIDE NNYSIDE			NPI	I = 11544	.07492
228924	2	T1019		02/03/13			120.96	
228924	3	T1019		02/04/13			120.96	
228924	4	T1019		02/05/13			120.96	
228924 228924	5 6	T1019 T1019		02/06/13 02/07/13			120.96 120.96	
228924	7	T1019		02/07/13			120.96	
220721	,	11019		02/00/15		AIM TOTAL	846.72	CLAIM ACCOUNT REF. 2289240012012309
REG LOC	CLIENT	SERVICE	NAME	BIR	TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2011980	2011980	IRIZARRY	ESTRELL 05/	16/1927	GNT02485000		
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
228925	1	S5125		01/29/13			75.60	
228925 228925	2	S5125 S5125		01/30/13 01/31/13			75.60 75.60	
228925	4	S5125 S5125		02/01/13			75.60	
228925	5	S5125		02/02/13			75.60	
228925	6	S5125			02/03/13		75.60	
228925	7	S5125		02/04/13			75.60	
228925	8	S5125		02/05/13			75.60	
228925	9	S5125		02/06/13			75.60	
228925	10 11	S5125 S5125		02/07/13 02/08/13	02/07/13		75.60 75.60	
228925	T.T.	55125		02/08/13		AIM TOTAL	831.60	CLAIM ACCOUNT REF. 2289250012011980
REG LOC 001	CLIENT 2011601	SERVICE 2011601	NAME JACKSON		TH DATE 10/1960	RECIPIENT ID GNT04501100	PRIOR	AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
228926	1	T1019		02/04/13	02/04/13	3 20.00	75.60	
228926	2	T1019		02/05/13			75.60	
228926	3	T1019			02/06/13		75.60	
228926	4 5	T1019		02/07/13	02/07/13		75.60	
228926	5	T1019		02/08/13		3 20.00 AIM TOTAL	75.60 378.00	CLAIM ACCOUNT REF. 2289260012011601
REG LOC 001	CLIENT 2011601	SERVICE 2011601	NAME JACKSON		TH DATE 10/1960	RECIPIENT ID GNT04501100	PRIOR	AUTHORIZATION #
INV # 228927	LINE # 1	PROCEDURE T1030	CODE	FROM DT 01/08/13	THRU DT	UNITS 1.00	AMOUNT 85.00	
220921	1	11030		01/06/13	- , , -	AIM TOTAL	85.00	CLAIM ACCOUNT REF. 2289270012011601
					CLL	1111 1011111	03.00	CEMIN RECOONT REF. 2207270012011001
REG LOC 001	CLIENT 2003254	SERVICE 2003254	NAME JIMENEZ		TH DATE 15/1931	RECIPIENT ID GNT04164400	PRIOR	AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	
228928	1"	T1019	· -	02/02/13			158.76	
228928	2	T1019		02/04/13	02/04/13	46.00	173.88	
228928	3	T1019		02/05/13	02/05/13		173.88	
228928	4	T1019		02/06/13	02/06/13	46.00	173.88	

DEDODE DA		1.2	CIDDI	ZOIDE OIENIA	TDE		IIIDA	3 D3 D3 DT	I I DEDODE (DILIERO27/EDIG) DAGE 16
INPUT FIL	TE 02/13/ LE = /VOL4	44/COMPSUP	SUNNY HIPAAIN/E3202	20130213040	1DE 04881		HIPA	A DATA FI	LE REPORT (PHLT837/EDIS) PAGE 16
SUBMITTER	R ID = SUN	NYSI 502051 SU	SUNNYSID	Z.				PI = 1154	407492
228928 228928	5 6	T1019 T1019				02/07/13 02/08/13	41.00	173.88 154.98	
						CLA	AIM TOTAL	1,009.26	CLAIM ACCOUNT REF. 2289280012003254
REG LOC 001	CLIENT 2006080	SERVICE 2006080	NAME JOHNSON	DOROTHY		TH DATE 14/1932	RECIPIENT I GNT04334500		AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM		THRU DT	UNITS	AMOUNT	
228929	1 2	S5125				02/02/13		177.66	
228929 228929	3	S5125 S5125				02/03/13 02/04/13		181.44 117.18	
228929	4	S5125				02/05/13		120.96	
228929	5	S5125				02/06/13		117.18	
228929	6	S5125		02/0	7/13	02/07/13 CLA	31.00 AIM TOTAL	117.18 831.60	
DEG TOG	OI TENE	CEDUTCE	NT 7 M I		DID				
REG LOC 001	CLIENT 2011855	SERVICE 2011855	NAME JONES	LUCILLE		TH DATE 05/1925	RECIPIENT I GNT04367400		AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM		THRU DT	UNITS	AMOUNT	
228930	1 2	T1019 T1019				02/04/13		60.48	
228930 228930	3	T1019 T1019				02/06/13 02/08/13		60.48 60.48	
220330	J	11017		027 0	0,13		IM TOTAL	181.44	
REG LOC 001	CLIENT 2011848	SERVICE 2011848	NAME LANZILOTTA	ROSA		TH DATE 05/1925	RECIPIENT I 93702509600		AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM	DT	THRU DT	UNITS	AMOUNT	
228931	1	S5125		02/0	3/13	02/03/13	16.00	60.48	
228931	2	S5125				02/04/13		60.48	
228931 228931	3 4	S5125 S5125				02/05/13 02/06/13		60.48 60.48	
228931	5	S5125				02/07/13		60.48	
228931	6	S5125				02/08/13		60.48	
228931	7	T1030		01/0	7/13	01/07/13	1.00 IM TOTAL	85.00 447.88	
REG LOC 001	CLIENT 2011771	SERVICE 2011771	NAME LEMOINE	RICARDA		TH DATE 14/2012	RECIPIENT I GNT03700100		AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM		THRU DT	UNITS	AMOUNT	
228932	1	S5125				02/02/13		60.48	
228932 228932	2	S5125 S5125				02/03/13 02/04/13		60.48 60.48	
228932	4	S5125				02/05/13		60.48	
228932	5	S5125				02/06/13		60.48	
228932 228932	6 7	S5125 S5125				02/07/13 02/08/13		60.48 60.48	
220332	/	53143		02/0	0/13		IN TOTAL	423.36	
REG LOC 001	CLIENT 2011854	SERVICE 2011854	NAME LOPEZ	CARMEN		TH DATE 05/1929	RECIPIENT I GNT02469800		AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM	DT	THRU DT	UNITS	AMOUNT	

REPORT DATE 02/13/13 SUNN	YSIDE CITYWIDE HIPAA	DATA FILE REPORT (PHLT837/EDIS) PAGE 17
INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E320		DATA FILE REPORT (PHILOS//EDIS) PAGE 1/
SUBMITTER ID = SUNNYSI SUNNYSIDE PROVIDER ID = 113502051 SUNNYSIDE		I = 1154407492
228933 1 S5125 228933 2 S5125 228933 3 S5125	12/27/12 12/27/12 28.00 01/18/13 01/18/13 28.00 01/28/13 01/28/13 28.00 CLAIM TOTAL	105.84 105.84 105.84 317.52 CLAIM ACCOUNT REF. 2289330012011854
REG LOC CLIENT SERVICE NAME 001 2011854 LOPEZ	BIRTH DATE RECIPIENT ID CARMEN 12/05/1929 GNT02469800	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 228934 1 S5125 228934 2 S5125 228934 3 S5125 228934 4 S5125 228934 5 S5125 228934 6 S5125 228934 7 S5125	FROM DT THRU DT UNITS 02/02/13 02/02/13 24.00 02/03/13 02/03/13 22.00 02/04/13 02/04/13 28.00 02/05/13 02/05/13 28.00 02/06/13 02/06/13 28.00 02/07/13 02/07/13 27.00 02/08/13 02/08/13 28.00 CLAIM TOTAL	AMOUNT 90.72 83.16 105.84 105.84 102.06 105.84 699.30 CLAIM ACCOUNT REF. 2289340012011854
REG LOC CLIENT SERVICE NAME 001 2011694 2011694 LORA	BIRTH DATE RECIPIENT ID FERNAND 08/20/1935 GNT03342600	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 228935	FROM DT THRU DT UNITS 02/04/13 02/04/13 32.00 02/05/13 02/05/13 32.00 02/06/13 02/06/13 32.00 02/07/13 02/07/13 32.00 02/08/13 02/08/13 24.00 CLAIM TOTAL	AMOUNT 120.96 120.96 120.96 120.96 90.72 574.56 CLAIM ACCOUNT REF. 2289350012011694
REG LOC CLIENT SERVICE NAME 001 2012062 2012062 LOZADA	BIRTH DATE RECIPIENT ID RAMON 12/17/1946 GNT00424300	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 228936	FROM DT THRU DT UNITS 02/02/13 02/02/13 24.00 02/04/13 02/04/13 24.00 02/05/13 02/05/13 27.00 02/06/13 02/06/13 24.00 02/07/13 02/07/13 24.00 02/07/13 02/07/13 24.00 02/08/13 02/08/13 24.00 CLAIM TOTAL	AMOUNT 90.72 90.72 102.06 90.72 90.72 90.72 90.72 555.66 CLAIM ACCOUNT REF. 2289360012012062
REG LOC CLIENT SERVICE NAME 001 2011845 2011845 LUGO	BIRTH DATE RECIPIENT ID DOLORES 12/19/1928 93702878100	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 228937 1 S5125 228937 2 S5125 228937 3 S5125 228937 4 S5125	FROM DT THRU DT UNITS 01/30/13 01/30/13 16.00 02/05/13 02/05/13 16.00 02/06/13 02/06/13 16.00 02/07/13 02/07/13 16.00 CLAIM TOTAL	AMOUNT 60.48 60.48 60.48 60.48 241.92 CLAIM ACCOUNT REF. 2289370012011845
REG LOC CLIENT SERVICE NAME 001 2011658 2011658 LUIS	BIRTH DATE RECIPIENT ID MAXIMIN 10/22/1941 GNT02759600	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE	FROM DT THRU DT UNITS	AMOUNT

REPORT DA	TE 02/13/ E = /VOL4	13 44/COMPSUP	SUNNY: /HIPAAIN/E3202	SIDE CITYWIDE 013021304004881	-	HIPA	A DATA FII	LE REPORT (PHLT837/E	DIS) PAGE 18
SUBMITTER	R ID = SUN		SUNNYSIDE				PI = 11544	407492	
228938 228938 228938	1 2 3	T1019 T1019 T1019		02/04/13 02/06/13 02/08/13	02/06/13 02/08/13	24.00	90.72 90.72 90.72 272.16	CLAIM ACCOUNT R	EF. 2289380012011658
REG LOC 001	CLIENT 2012018	SERVICE 2012018	NAME LUNA		RTH DATE (21/1945	RECIPIENT II GNT06614700	D PRIOR	AUTHORIZATION #	Er. 2209300012011030
INV # 228939 228939 228939 228939 228939	LINE # 1 2 3 4 5	PROCEDURE T1019 T1019 T1019 T1019 T1019 T1019	CODE	02/04/13 02/05/13 02/06/13 02/07/13	THRU DT 02/02/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	24.00 24.00 24.00 24.00	AMOUNT 90.72 90.72 90.72 90.72 90.72 90.72 544.32	CLAIM ACCOUNT R	EF. 2289390012012018
REG LOC 001	CLIENT 2002713	SERVICE 2002713	NAME MANGRAY		RTH DATE 10/1937	RECIPIENT II GNT04443200		AUTHORIZATION #	
INV # 228940 228940 228940 228940	LINE # 1 2 3 4	PROCEDURE T1019 T1019 T1019 T1019	CODE	02/05/13		29.00 23.00	AMOUNT 120.96 109.62 86.94 120.96 438.48	CLAIM ACCOUNT R	EF. 2289400012002713
REG LOC 001	CLIENT 2011985	SERVICE 2011985	NAME MANTILLA		RTH DATE /30/1941	RECIPIENT II GNT00533700		AUTHORIZATION #	
INV # 228941 228941 228941 228941 228941 228941 228941 228941 228941	LINE # 1 2 3 4 5 6 7 8 9	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125 T1030	CODE	02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 02/01/13 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 01/07/13 CLA	32.00 32.00 32.00 32.00 32.00 32.00 32.00	AMOUNT 120.96 120.96 120.96 120.96 120.96 120.96 120.96 120.96 85.00	CLAIM ACCOUNT R	EF. 2289410012011985
REG LOC 001	CLIENT 2011772	SERVICE 2011772	NAME MARIANI		RTH DATE 24/1934	RECIPIENT II GNT03761400		AUTHORIZATION #	
INV # 228942 228942 228942 228942 228942	LINE # 1 2 3 4 5	PROCEDURE T1019 T1019 T1019 T1019 T1019	CODE	02/05/13 02/06/13 02/07/13	THRU DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	16.00 16.00 16.00	AMOUNT 60.48 60.48 60.48 60.48		

INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202013021304004881

SUBMITTER ID = SUNNYSI SUNNYSID PROVIDER ID = 113502051 SUNNYSIDE	E NPI = 1154407492
	CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2289420012011772
REG LOC CLIENT SERVICE NAME 001 2011957 2011957 MARRERO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PHILLIP 07/16/1945 GNT00157200
INV # LINE # PROCEDURE CODE 228943	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 1.00 196.56 02/04/13 02/04/13 1.00 196.56 02/05/13 02/05/13 1.00 196.56 02/06/13 02/06/13 1.00 196.56 02/08/13 02/08/13 1.00 196.56 02/08/13 02/08/13 1.00 196.56 CLAIM TOTAL 982.80 CLAIM ACCOUNT REF. 2289430012011957
REG LOC CLIENT SERVICE NAME 001 2011663 2011663 MARTIN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # RUTH 08/25/1927 GNT06371400
INV # LINE # PROCEDURE CODE 228944 1 S5126 228944 2 S5126 228944 3 S5126 228944 4 S5126 228944 5 S5126 228944 6 S5126 228944 7 S5126	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 1.00 196.56 02/03/13 02/03/13 1.00 196.56 02/04/13 02/04/13 1.00 196.56 02/05/13 02/05/13 1.00 196.56 02/05/13 02/06/13 1.00 196.56 02/07/13 02/07/13 1.00 196.56 02/07/13 02/07/13 1.00 196.56 02/08/13 02/08/13 1.00 196.56
REG LOC CLIENT SERVICE NAME 001 2006830 2006830 MARTINEZ	CLAIM TOTAL 1,375.92 CLAIM ACCOUNT REF. 2289440012011663 BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # EMMA 05/09/1920 GNT05091300
INV # LINE # PROCEDURE CODE 228945 1 T1019 228945 2 T1019 228945 3 T1019 228945 4 T1019 228945 5 T1019 228945 6 T1019	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 20.00 75.60 02/04/13 02/04/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/06/13 02/06/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/08/13 02/08/13 28.00 105.84 02/08/13 02/08/13 28.00 105.84 CLAIM TOTAL 604.80 CLAIM ACCOUNT REF. 2289450012006830
REG LOC CLIENT SERVICE NAME 001 2009202 2009202 MARTINEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # GLORIA 04/10/1937 GNT00444700
INV # LINE # PROCEDURE CODE 228946	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 20.00 75.60 02/05/13 02/05/13 20.00 75.60 02/06/13 02/06/13 20.00 75.60 02/07/13 02/07/13 20.00 75.60 02/07/13 02/07/13 20.00 75.60 02/08/13 02/08/13 11.00 41.58 CLAIM TOTAL 343.98 CLAIM ACCOUNT REF. 2289460012009202
REG LOC CLIENT SERVICE NAME 001 2011036 2011036 MASSOL	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PEDRO A 09/08/1934 GNT04564600
INV # LINE # PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

REPORT DAY				SIDE CITYWIDE 013021304004881		HIPAA	DATA FIL	E REPORT (PHLT837/EDIS) PAGE 20
SUBMITTER PROVIDER		NYSI 502051 SUM	SUNNYSIDE NYSIDE			NPI	I = 11544	07492	
228947 228947	1 2 3	S5125 S5125 S5125		02/04/13 02/05/13 02/06/13		20.00	75.60 75.60 75.60		
228947 228947 228947	3 4 5	S5125 S5125 S5125		02/06/13 02/07/13 02/08/13	02/07/13 02/08/13	20.00	75.60 75.60 68.04 370.44	CLAIM ACCOUNT REF.	2289470012011036
REG LOC 001	CLIENT 2011965	SERVICE 2011965	NAME MATEO		TH DATE 10/1939	RECIPIENT ID GNT00408600		AUTHORIZATION #	2203170012011030
INV # 228948	LINE #	PROCEDURE S5125	CODE	FROM DT 02/02/13			AMOUNT 60.48		
228948 228948 228948 228948	2 3 4 5	S5125 S5125 S5125 S5125		02/03/13 02/04/13 02/05/13 02/06/13	02/03/13 02/04/13 02/05/13 02/06/13	32.00 32.00	60.48 120.96 120.96 120.96		
228948 228948	6 7	S5125 S5125 S5125		02/07/13 02/08/13	02/07/13 02/08/13	32.00	120.96 98.28 703.08	CLAIM ACCOUNT REF.	2289480012011965
REG LOC 001	CLIENT 2011350	SERVICE 2011350	NAME MCQUAIL		TH DATE 23/1934	RECIPIENT ID GNT06367800	PRIOR	AUTHORIZATION #	
INV # 228949	LINE #	PROCEDURE S5125	CODE	FROM DT 02/02/13			AMOUNT 151.20		
228949 228949	2 3	S5125 S5125		02/03/13 02/04/13	02/03/13 02/04/13 CLA		136.08 147.42 434.70	CLAIM ACCOUNT REF.	2289490012011350
REG LOC 001	CLIENT 2011350	SERVICE 2011350	NAME MCQUAIL		TH DATE 23/1934	RECIPIENT ID GNT06367800	PRIOR	AUTHORIZATION #	
INV # 228950 228950	LINE # 1 2	PROCEDURE S5125 S5125	CODE	FROM DT 02/05/13 02/06/13			AMOUNT 151.20 177.66		
228950	3	S5125		02/07/13	02/07/13		181.44 510.30	CLAIM ACCOUNT REF.	2289500012011350
REG LOC 001	CLIENT 2005943	SERVICE 2005943	NAME MICHEL	DOROTHY 06/	TH DATE 05/1930	RECIPIENT ID GNT03107500		AUTHORIZATION #	
INV # 228951 228951 228951 228951	LINE # 1 2 3 4	PROCEDURE S5125 S5125 S5125 S5125	CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13	32.00 32.00	AMOUNT 120.96 120.96 120.96 120.96		
228951 228951 228951 228951	5 6 7	S5125 S5125 S5125 S5125		02/06/13 02/07/13 02/08/13	02/06/13 02/07/13 02/08/13	32.00 32.00	120.96 120.96 90.72 816.48	CLAIM ACCOUNT REF.	2289510012005943
REG LOC 001	CLIENT 2011911	SERVICE 2011911	NAME MIMMS		TH DATE 24/1937	RECIPIENT ID GNT05194600		AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		

REPORT DAT				SIDE CITYWIDE 013021304004881		HIPAA	DATA FII	LE REPORT (PHLT837/EDIS) PAGE 21
SUBMITTER PROVIDER		NYSI 502051 SUN	SUNNYSIDE NYSIDE			NPI	= 11544	407492
228952 228952 228952 228952 228952 228952	1 2 3 4 5 6	S5125 S5125 S5125 S5125 S5125 S5125 S5125		02/02/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	24.00 24.00 24.00 24.00	90.72 90.72 90.72 90.72 90.72 90.72 544.32	CLAIM ACCOUNT REF. 2289520012011911
REG LOC 001	CLIENT 2010425	SERVICE 2010425	NAME MONCRIEF		TH DATE 29/1926	RECIPIENT ID GNT06140100	PRIOR	AUTHORIZATION #
INV # 228953 228953	LINE # 1 2	PROCEDURE S5125 S5125	CODE	FROM DT 01/18/13 01/24/13	01/24/13		AMOUNT 120.96 120.96 241.92	CLAIM ACCOUNT REF. 2289530012010425
REG LOC 001	CLIENT 2010425	SERVICE 2010425	NAME MONCRIEF		TH DATE 29/1926	RECIPIENT ID GNT06140100	PRIOR	AUTHORIZATION #
INV # 228954 228954 228954	LINE # 1 2 3	PROCEDURE S5125 S5125 S5125	CODE	FROM DT 02/05/13 02/06/13 02/07/13	02/06/13 02/07/13	32.00	AMOUNT 120.96 120.96 120.96 362.88	CLAIM ACCOUNT REF. 2289540012010425
REG LOC 001	CLIENT 2011877	SERVICE 2011877	NAME MONTALVO		TH DATE 13/1932	RECIPIENT ID GNT03799400	PRIOR	AUTHORIZATION #
INV # 228955 228955 228955 228955 228955	LINE # 1 2 3 4 5	PROCEDURE T1019 T1019 T1019 T1019 T1019	CODE	02/06/13 02/07/13	02/05/13 02/06/13 02/07/13 02/08/13	20.00 20.00 20.00	AMOUNT 75.60 75.60 75.60 75.60 75.60 378.00	CLAIM ACCOUNT REF. 2289550012011877
REG LOC 001	CLIENT 2011844	SERVICE 2011844	NAME MONTES		TH DATE 31/1930	RECIPIENT ID GNT02561100	PRIOR	AUTHORIZATION #
INV # 228956 228956 228956 228956 228956 228956 228956	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	02/07/13	02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	24.00 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	CLAIM ACCOUNT REF. 2289560012011844
REG LOC 001	CLIENT 2010407	SERVICE 2010407	NAME MORA		TH DATE 14/1931	RECIPIENT ID GNT06124800	PRIOR	AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	

INPUT FIL	TE 02/13/ E = /VOL4	44/COMPSUP/	HIPAAIN/E3202	013021304004881		HIPAA	DATA FII	LE REPORT (PHLT837/EDIS) PAGE 22
			SUNNYSIDE INYSIDE			NPI	= 11544	407492	
228957	1			02/07/13	CLIA	IN IOIAL	00.10	CHAIM ACCOONT REF.	2289570012010407
REG LOC 001	CLIENT 2012071	SERVICE 2012071	NAME MORALES	BIRT ISIDRO 04/0	TH DATE 05/1923	RECIPIENT ID GNT04846200	PRIOR	AUTHORIZATION #	
INV # 228958 228958 228958 228958 228958 228958 228958	LINE # 1 2 3 4 5 6 7	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	UNITS 24.00 24.00 24.00 24.00 24.00 24.00 24.00 24.00 24.00 IM TOTAL	AMOUNT 90.72 90.72 90.72 90.72 90.72 90.72 90.72 635.04	CLAIM ACCOUNT REF.	2289580012012071
	CLIENT	SERVICE 2011967	NAME MORALES	BIRT MARGARI 11/1	TH DATE			AUTHORIZATION #	
INV # 228959 228959 228959 228959 228959	LINE # 1 2 3 4 5	PROCEDURE T1019 T1019 T1019 T1019 T1019	CODE	FROM DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	UNITS 16.00 16.00 16.00 16.00 16.00 IM TOTAL	AMOUNT 60.48 60.48 60.48 60.48 302.40	CLAIM ACCOUNT REF.	2289590012011967
REG LOC	CLIENT 2008149	SERVICE 2008149	NAME MOSCICKA	JADWIGA 03/0	TH DATE 07/1916	RECIPIENT ID GNT04975800	PRIOR	AUTHORIZATION #	
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	CLIENT 2011860							AUTHORIZATION #	
INV # 228961 228961 228961 228961	LINE # 1 2 3 4	PROCEDURE S5125 S5125 S5125 S5125	CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 CLA	UNITS 20.00 20.00 24.00 24.00 IM TOTAL	AMOUNT 75.60 75.60 90.72 90.72 332.64	CLAIM ACCOUNT REF.	2289610012011860
REG LOC 001	CLIENT 2011860							AUTHORIZATION #	
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REG LOC 001	CLIENT 2006117	SERVICE 2006117	NAME NETTLES	DONNA		TH DATE 21/1955	RECIPIENT ID GNT04987100	PRIOR	AUTHORIZATION #
INV # 228964 228964	LINE # 1 2	PROCEDURE S5125 S5125	CODE	FROM 02/0 02/0	4/13	THRU DT 02/04/13 02/08/13 CLA		AMOUNT 56.70 60.48 117.18	
REG LOC 001	CLIENT 2002531	SERVICE 2002531	NAME NEWBOLD	RAMONA		TH DATE 24/1934	RECIPIENT ID GNT04415000	PRIOR	AUTHORIZATION #
INV # 228965 228965 228965 228965	LINE # 1 2 3 4	PROCEDURE S5125 S5125 S5125 S5125	CODE	FROM 02/0 02/0 02/0 02/0	5/13 6/13 7/13	THRU DT 02/05/13 02/06/13 02/07/13 02/08/13 CLA	3 20.00 3 20.00	AMOUNT 75.60 75.60 75.60 75.60 302.40	
REG LOC 001	CLIENT 2010595	SERVICE 2010595	NAME NISHIMURA	ALBERT		TH DATE 01/1919	RECIPIENT ID GNT04994800	PRIOR	AUTHORIZATION #
INV # 228966 228966 228966	LINE # 1 2 3	PROCEDURE S5125 S5125 S5125	CODE	FROM 02/0 02/0 02/0	1/13 2/13	THRU DT 02/01/13 02/02/13 02/03/13 CLA	48.00	AMOUNT 181.44 181.44 181.44 544.32	
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INV # 228967 228967 228967 228967 228967	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125	CODE	FROM 02/0 02/0 02/0 02/0 02/0	4/13 5/13 6/13 7/13	THRU DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	8 48.00 8 48.00 8 48.00	AMOUNT 181.44 181.44 181.44 181.44 907.20	
REG LOC 001	CLIENT 2004768	SERVICE 2004768	NAME NUNE Z	ANGELIN		TH DATE 01/1946	RECIPIENT ID GNT02920000	PRIOR	AUTHORIZATION #
INV #	LINE #	PROCEDURE	CODE	FROM	DT	THRU DT	UNITS	AMOUNT	

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SUBMITTER ID = SU. PROVIDER ID = 11	NNYSI SUNNYSIDE 3502051 SUNNYSIDE	1	NPI = 11	.54407492
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REG LOC CLIENT 001 2009392	SERVICE NAME 2009392 NUNEZ	BIRTH DATE 09/07/1963	RECIPIENT ID PRIGNT05481000	OR AUTHORIZATION #
INV # LINE # 228969 1 228969 2 228969 3 228969 4 228969 5 228969 6 228969 7 228969 8 228969 9 228969 10	PROCEDURE CODE \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125	FROM DT THRU DT 01/28/13 01/28/13 01/29/13 01/29/13 01/30/13 01/30/13 01/31/13 01/31/13 02/01/13 02/01/13 02/02/13 02/02/13 02/04/13 02/04/13 02/05/13 02/05/13 02/06/13 02/06/13 02/07/13 02/07/13 CLAI	UNITS AMOU 24.00 90. 24.00 90. 24.00 90. 24.00 90. 24.00 90. 24.00 90. 24.00 90. 24.00 90. 24.00 90. 24.00 90. 24.00 90.	72 72 72 72 72 72 72 72 72 72
REG LOC CLIENT 001 2011773	SERVICE NAME 2011773 NUNEZ		RECIPIENT ID PRIGNT02970200	OR AUTHORIZATION #
INV # LINE # 228970 1	PROCEDURE CODE T1030	FROM DT THRU DT 01/11/13 CLAI	UNITS AMOU 1.00 85. IM TOTAL 85.	00
REG LOC CLIENT 001 2011875	SERVICE NAME 2011875 OCASIO		RECIPIENT ID PRI GNT00182000	OR AUTHORIZATION #
INV # LINE # 228971 1 228971 2 228971 3 228971 4	PROCEDURE CODE T1019 T1019 T1019 T1019	FROM DT THRU DT 02/05/13 02/05/13 02/06/13 02/06/13 02/07/13 02/07/13 02/08/13 02/08/13 CLAI	UNITS AMOU 40.00 151. 40.00 151. 40.00 151. 40.00 151. M TOTAL 604.	20 20 20 20 20
REG LOC CLIENT 001 2011915	SERVICE NAME 2011915 OJEDA	BIRTH DATE 01/29/1936	RECIPIENT ID PRIGNT05774800	OR AUTHORIZATION #
INV # LINE # 228972 1 228972 2 228972 3 228972 4 228972 5 228972 6 228972 7	PROCEDURE CODE T1019 T1019 T1019 T1019 T1019 T1019 T1019	FROM DT THRU DT 02/02/13 02/02/13 02/03/13 02/03/13 02/04/13 02/04/13 02/05/13 02/05/13 02/06/13 02/06/13 02/07/13 02/07/13 02/08/13 02/08/13	UNITS AMOU 28.00 105. 28.00 105. 16.00 60. 24.00 90. 16.00 60. 24.00 90.	84 84 48 72

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INV # LINE # 228973 1 228973 2 228973 3 228973 4 228973 5 228973 6 228973 7	PROCEDURE CODE \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 19.00 76.57 02/03/13 02/03/13 20.00 80.60 02/04/13 02/04/13 31.00 124.93 02/05/13 02/05/13 32.00 128.96 02/06/13 02/06/13 32.00 128.96 02/08/13 02/08/13 32.00 128.96 01/08/13 01/08/13 1.00 85.00 CLAIM TOTAL 753.98 CLAIM ACCOUNT REF. 2289730012011871
REG LOC CLIENT 001 2011863	SERVICE NAME 2011863 OLMO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 04/20/1923 GNT03506500
INV # LINE # 228974 1 228974 2 228974 3 228974 4	PROCEDURE CODE S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 16.00 60.48 02/03/13 02/03/13 16.00 60.48 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2289740012011863
REG LOC CLIENT 001 2010198	SERVICE NAME 2010198 ORLANDO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 02/09/1923 GNT06098400
INV # LINE # 228975 1 228975 2 228975 3 228975 4 228975 5	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 20.00 75.60 02/05/13 02/05/13 18.00 68.04 02/06/13 02/06/13 20.00 75.60 02/07/13 02/07/13 20.00 75.60 02/08/13 02/08/13 20.00 75.60 02/08/13 02/08/13 20.00 75.60 CLAIM TOTAL 370.44 CLAIM ACCOUNT REF. 2289750012010198
REG LOC CLIENT 001 2011916	SERVICE NAME 2011916 ORTIZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 10/31/1940 93700799800
INV # LINE # 228976 1 228976 2 228976 3 228976 4 228976 5	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 28.00 105.84 02/04/13 02/04/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/06/13 02/06/13 28.00 105.84 02/08/13 02/08/13 28.00 105.84 02/08/13 02/08/13 28.00 105.84 CLAIM TOTAL 529.20 CLAIM ACCOUNT REF. 2289760012011916
REG LOC CLIENT 001 2011916	SERVICE NAME 2011916 ORTIZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ANTHONY 10/31/1940 93700799800
INV # LINE #	PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

INV # LINE # PROCEDURE CODE

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			SUNNYSIDE NNYSIDE			NPI	I = 1154·	407492	
228977	1	T1030		01/11/13	01/11/13 CLA	3 1.00 AIM TOTAL	85.00 85.00	CLAIM ACCOUNT REF.	. 2289770012011916
REG LOC 001	CLIENT 2005165	SERVICE 2005165	NAME ORTIZ	LAURA 07	RTH DATE /04/1919	RECIPIENT ID GNT03867300	PRIOR	AUTHORIZATION #	
INV # 228978 228978 228978 228978 228978 228978	LINE # 1 2 3 4 5 6 7	PROCEDURE \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125	CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	UNITS 3 36.00 3 36.00 3 36.00 3 36.00 3 36.00 3 36.00 3 36.00	AMOUNT 136.08 136.08 136.08 136.08 136.08 136.08 952.56	CLAIM ACCOUNT REF.	. 2289780012005165
001	CLIENT 2011999	SERVICE 2011999	NAME ORTIZ	LUISA 02,	RTH DATE /09/1921	RECIPIENT ID GNT04429700	PRIOR	AUTHORIZATION #	
INV # 228979 228979	LINE # 1 2	PROCEDURE S5125 S5125	CODE	FROM DT 02/02/13 02/03/13	THRU DT 02/02/13 02/03/13 CLP	UNITS 3 16.00 3 16.00 AIM TOTAL	AMOUNT 60.48 60.48 120.96	CLAIM ACCOUNT REF.	. 2289790012011999
REG LOC 001	2011657	SERVICE 2011657	NAME ORTIZ	BIE MERCEDE 11,	/03/1932	GNT05073800		AUTHORIZATION #	
INV # 228980 228980 228980 228980 228980 228980 228980	LINE # 1 2 3 4 5 6	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	UNITS 3 16.00 6 16.00 6 28.00 6 28.00 6 28.00 6 28.00 6 28.00 6 28.00 6 10 10 10 10 10 10 10 10 10 10 10 10 10	AMOUNT 60.48 60.48 105.84 105.84 105.84 105.84 650.16	CLAIM ACCOUNT REF.	. 2289800012011657
REG LOC	CLIENT	SERVICE	NAME	BII	RTH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
INV # 228981 228981 228981 228981 228981	LINE # 1 2 3 4 5 6	PROCEDURE T1019 T1019 T1019 T1019 T1019 T1019	CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/06/13 02/07/13 02/08/13	THRU DT 02/02/13 02/03/13 02/04/13 02/06/13 02/07/13 02/08/13 CL2	UNITS 3 40.00 6 40.00 6 40.00 6 40.00 6 40.00 6 40.00 6 40.00	AMOUNT 151.20 151.20 151.20 151.20 151.20 907.20	CLAIM ACCOUNT REF.	. 2289810012012073
	CLIENT 2003087	SERVICE 2003087	NAME PAPHITIS	BIE RICHARD 05,	RTH DATE /14/1923	RECIPIENT ID GNT03006300	PRIOR	AUTHORIZATION #	

FROM DT THRU DT

UNITS

AMOUNT

REPORT DATE 02/13/1 INPUT FILE = /VOL44	13 SUNNY 44/COMPSUP/HIPAAIN/E3202	SIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 27 013021304004881
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REG LOC CLIENT 001 2011913	SERVICE NAME 2011913 PATTERSON	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # RUMELLA 04/29/1939 GNT02544200
INV # LINE # 228983 1 228983 2 228983 3 228983 4	PROCEDURE CODE S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2289830012011913
REG LOC CLIENT 001 2012225	SERVICE NAME 2012225 PATTERSON	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # SHYRLE 12/02/1956 GNT00191700
INV # LINE # 228984 1 228984 2 228984 3 228984 4 228984 5 228984 6 228984 7	PROCEDURE CODE \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 28.00 105.84 02/03/13 02/03/13 28.00 105.84 02/04/13 02/04/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/08/13 02/08/13 28.00 105.84 02/08/13 02/08/13 28.00 105.84 CLAIM TOTAL 740.88 CLAIM ACCOUNT REF. 2289840012012225
REG LOC CLIENT 001 2009576	SERVICE NAME 2009576 PAZIOULIS	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # KLEONIK 10/16/1934 GNT04602500
INV # LINE # 228985 1 228985 2 228985 3 228985 4 228985 5	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 44.00 166.32 02/03/13 02/03/13 44.00 166.32 02/04/13 02/04/13 44.00 166.32 02/05/13 02/05/13 44.00 166.32 02/06/13 02/06/13 44.00 166.32 02/06/13 02/06/13 44.00 166.32 CLAIM TOTAL 831.60 CLAIM ACCOUNT REF. 2289850012009576
REG LOC CLIENT 001 2000140	SERVICE NAME 2000140 PENA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # WALESKA 07/06/1978 GNT02097600
INV # LINE # 228986 1 228986 2 228986 3 228986 4 228986 5 228986 6	PROCEDURE CODE T1019 T1019 T1019 T1019 T1019 T1019	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 32.00 120.96 02/03/13 02/03/13 32.00 120.96 02/04/13 02/04/13 32.00 120.96 02/05/13 02/05/13 40.00 151.20 02/06/13 02/06/13 32.00 120.96 02/07/13 02/07/13 32.00 120.96

REPORT DA	TE 02/13/ E = /VOL4	13 44/COMPSUP	SUNNY HIPAAIN/E3202/	SIDE CITYWIDE 013021304004881	HIPAA	DATA FIL	E REPORT (PHLT837/EDIS) PAGE 28
		NYSI 502051 SU	SUNNYSIDE NNYSIDE		NPI	= 11544	07492	
228986	7	T1019		02/08/13 02/08/13 CLA	32.00 AIM TOTAL	120.96 876.96	CLAIM ACCOUNT REF.	2289860012000140
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INV # 228987 228987 228987 228987	LINE # 1 2 3 4	PROCEDURE T1019 T1019 T1019 T1019	CODE	FROM DT THRU DT 02/04/13 02/04/13 02/06/13 02/06/13 02/07/13 02/07/13 02/08/13 02/08/13 CLA	UNITS 3 24.00 3 24.00 3 24.00 3 24.00 3 24.00 4 TOTAL	AMOUNT 90.72 90.72 90.72 90.72 362.88	CLAIM ACCOUNT REF.	2289870012009232
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REG LOC 001	CLIENT 2011989	SERVICE 2011989	NAME PICHARDO		GNT05056600	PRIOR .	AUTHORIZATION #	
INV # 228989 228989 228989 228989 228989 228989 228989	LINE # 1 2 3 4 5 6	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT 02/02/13 02/02/13 02/03/13 02/03/13 02/04/13 02/04/13 02/05/13 02/05/13 02/06/13 02/06/13 02/07/13 02/07/13 02/08/13 02/08/13	UNITS 3 16.00 8 16.00 8 16.00 8 16.00 8 16.00 8 16.00 8 16.00	AMOUNT 60.48 60.48 60.48 60.48 60.48 60.48 423.36	CLAIM ACCOUNT REF.	2289890012011989
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INV # 228990 228990 228990 228990	LINE # 1 2 3 4	PROCEDURE S5125 S5125 S5125 S5125	CODE	FROM DT THRU DT 02/02/13 02/02/13 02/03/13 02/03/13 02/04/13 02/04/13 02/05/13 02/05/13 CLA	UNITS 3 36.00 3 36.00 3 36.00 3 36.00 AIM TOTAL	AMOUNT 136.08 136.08 136.08 136.08 544.32	CLAIM ACCOUNT REF.	2289900012010606

REG LOC CLIENT SERVICE NAME BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 001 2011990 2011990 POLANCO BRIGIDA 07/04/2012 GNT03633500

FROM DT THRU DT UNITS

AMOUNT

INV # LINE # PROCEDURE CODE

DEDODE DA	mm 00/10/	1.2	CLININIX	OTDE CIMVITTE		IIIDAA	D3/II3 E37	E DEDODE /DILEMONT/EDIC) PAGE 29
REPORT DA			SUNNY. HIPAAIN/E3202/	SIDE CITYWIDE 013021304004881	_	HIPAA	DAIA FII	LE REPORT (PHLT837/EDIS	PAGE 29
SUBMITTER		NYSI 502051 SUN	SUNNYSIDE			ND.	I = 11544	107492	
TROVIDER	12 113	502051 501	WIGIDE			141		10, 152	
228991	1	S5126			02/05/13		196.56		
228991 228991	2	S5126 S5126			02/07/13 02/08/13		196.56 196.56		
220))1	3	55120		02/00/13		AIM TOTAL	589.68	CLAIM ACCOUNT REF.	2289910012011990
REG LOC	CLIENT 2002109	SERVICE 2002109	NAME PROANO		TH DATE 18/1924	RECIPIENT ID 93700845900	PRIOR	AUTHORIZATION #	
001	2002109	2002109	PROANO	ALICIA 09/	18/1924	93700845900			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228992	1	S5125 TT			02/02/13		48.36		
228992	2	S5125 TT S5125 TT			02/03/13		48.36 48.36		
228992 228992	4	S5125 II S5125 TT		02/05/13	02/04/13 02/05/13		48.36		
228992	5	S5125 TT			02/05/13		48.36		
228992	6	S5125 TT			02/00/13		48.36		
228992	7	S5125 TT			02/08/13		48.36		
220332	•	55125 11		02, 00, 23		AIM TOTAL	338.52	CLAIM ACCOUNT REF.	2289920012002109
REG LOC	CLIENT	CEDIALCE	NAME	DII	mii Dame	DEGIDIENE ID	DDTOD	ALIMITOD I CAMITON 4	
001	2007728	SERVICE 2007728	PROANO		TH DATE 06/1918	RECIPIENT ID GNT04361600	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228993	1	S5125 TT			02/02/13		64.48		
228993 228993	2	S5125 TT S5125 TT			02/03/13 02/04/13		64.48 80.60		
228993	4	S5125 II S5125 TT			02/04/13		80.60		
228993	5	S5125 TT			02/05/13		80.60		
228993	6	S5125 TT		02/07/13	02/07/13		80.60		
228993	7	S5125 TT		02/08/13	02/08/13		80.60		
				,,		AIM TOTAL	531.96	CLAIM ACCOUNT REF.	2289930012007728
REG LOC	CLIENT	SERVICE	NAME	DII	TH DATE	RECIPIENT ID	DDTOD	AUTHORIZATION #	
001	2011774	2011774	OUINONES		29/1936	GNT03606700	PRIOR	AUTHORIZATION #	
			~		,				
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228994	1	T1019			01/28/13		60.48		
228994	2	T1019			01/29/13		60.48		
228994	3	T1019		01/30/13	01/30/13		60.48		
228994 228994	4 5	T1019 T1019		01/31/13 02/01/13	01/31/13 02/01/13		60.48 60.48		
220994	5	11019		02/01/13		AIM TOTAL	302.40	CLAIM ACCOUNT REF.	2289940012011774
					CLIF	III IOIAL	302.10	CLAIM ACCOUNT REF.	2200010012011771
REG LOC	CLIENT	SERVICE	NAME		TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001	2011847	2011847	RAMOS	CECILIA 08	06/1922	GNT00206000			
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT		
228995	1	S5125		02/02/13	02/02/13	32.00	120.96		
228995	2	S5125			02/03/13		120.96		
228995	3	S5125		02/04/13	02/04/13		151.20		
228995	4	S5125		02/05/13	02/05/13		151.20		
228995	5	S5125		02/06/13	02/06/13	40.00	151.20		

DEDODE D1	00 /12 /	110	G-PP		T. T. T. D. D. D. C.
INPUT FIL	TE 02/13/ E = /VOL4	13 44/COMPSUP	SUNNY HIPAAIN/E3202	DE CITYWIDE HIPAA DA:	TA FILE REPORT (PHLT837/EDIS) PAGE 30
		502051 SUN			1154407492
228995 228995	6 7	S5125 S5125		02/08/13 02/08/13 35.00 13	51.20 32.30 79.02 CLAIM ACCOUNT REF. 2289950012011847
REG LOC 001	CLIENT 2010409	SERVICE 2010409	NAME RAMOS		PRIOR AUTHORIZATION #
INV # 228996 228996 228996	LINE # 1 2 3	PROCEDURE T1019 T1019 T1019			MOUNT 45.36 60.48 45.36 51.20 CLAIM ACCOUNT REF. 2289960012010409
REG LOC 001	CLIENT 2008453	SERVICE 2008453	NAME RESTULA	BIRTH DATE RECIPIENT ID INCENT 01/15/1929 GNT05473100	PRIOR AUTHORIZATION #
INV # 228997 228997 228997	LINE # 1 2 3	PROCEDURE S5125 S5125 S5125			MOUNT 60.48 60.48 60.48 81.44 CLAIM ACCOUNT REF. 2289970012008453
REG LOC 001	CLIENT 2012113	SERVICE 2012113	NAME REYES	ORILA 05/02/1929 GNT02461500	PRIOR AUTHORIZATION #
INV # 228998 228998 228998 228998 228998 228998 228998 228998	LINE # 1 2 3 4 5 6 7 8	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125 S5125 T1030		02/02/13 02/02/13 32.00 12 02/03/13 02/03/13 32.00 12 02/04/13 02/04/13 32.00 12 02/05/13 02/05/13 32.00 12 02/06/13 02/06/13 32.00 12 02/07/13 02/07/13 32.00 12 02/08/13 02/08/13 32.00 12 02/08/13 02/08/13 32.00 12 01/10/13 01/10/13 1.00 80 CLAIM TOTAL 93	MOUNT 20.96 20.96 20.96 20.96 20.96 20.96 20.96 20.96 85.00 31.72 CLAIM ACCOUNT REF. 2289980012012113
REG LOC 001	CLIENT 2012001	SERVICE 2012001	NAME REYES	BIRTH DATE RECIPIENT ID IILAGRO 05/05/1957 GNT00210100	PRIOR AUTHORIZATION #
INV # 228999 228999 228999 228999 228999 228999 228999	LINE # 1 2 3 4 5 6 7	PROCEDURE T1019 TT T1019 TT T1019 TT T1019 TT T1019 TT T1019 TT T1019 TT	CODE	FROM DT THRU DT UNITS AND 02/02/13 02/02/13 24.00 02/03/13 02/03/13 24.00 02/03/13 02/03/13 24.00 02/04/13 02/04/13 20.00 02/05/13 02/05/13 24.00 02/05/13 02/05/13 24.00 02/05/13 02/05/13 24.00 02/05/13 02/07/13 24.00 02/05/13 02/07/13 24.00 02/05/13 02/05/13 02/05/13 24.00 02/05/13 02/0	MOUNT 96.72 96.72 80.60 96.72 96.72 96.72 96.72 96.72 96.72 60.92 CLAIM ACCOUNT REF. 2289990012012001
REG LOC 001	CLIENT 1997785	SERVICE 1997785	NAME RIVAS	BIRTH DATE RECIPIENT ID I ERTRUD 10/14/1931 GNT00533400	PRIOR AUTHORIZATION #

INV # LINE # PROCEDURE CODE FROM DT THRU DT UNITS AMOUNT

DEDODE DA	mm 02/12/	1 2	CITATATS	CIDE CITYWIDE		11117 7	האתא הדו	E DEDODE / DIII		S) PAGE 31
TNPIIT FIL	.1E UZ/13/ .E = /VOI.4	44/COMPSUP	SUNDS HTPAATN/E3202/	SIDE CITYWIDE 2013021304004881		ніраа	DAIA FII	LE REPORT (PHL.	1831/FDIS	5) PAGE 31
111101111	, , ,	117 COIN DOI 7	11111111111, 113202	1013021301001001	-					
SUBMITTER			SUNNYSIDE	3						
PROVIDER	ID = 113	502051 SU	NNYSIDE			NP	'I = 11544	107492		
229000	1	S5125		02/04/13	02/04/13	24.00	90.72			
229000	2	S5125			02/04/13		90.72			
229000	3	S5125			02/05/13		90.72			
229000	4	S5125			02/07/13		90.72			
229000	5	S5125			02/08/13		90.72			
					CLA	.IM TOTAL	453.60	CLAIM ACC	OUNT REF.	. 2290000011997785
REG LOC	CLIENT	SERVICE	NAME	DIE	TH DATE	DECIDIENT ID	DDTOD	AUTHORIZATION	ш	
001	2011659	2011659	RIVERA MARTI		22/1938	GNT02887600	PRIOR	AUIHORIZAIION	#	
001	2011035	2011035	TELVETET THEFT	oloniii ol	22/1000	GNIOZOO7OOO				
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT			
229001	1	S5125			02/02/13		105.84			
229001	2	S5125			02/03/13		105.84			
229001	3	S5125			02/04/13		105.84			
229001	4	S5125			02/05/13		105.84			
229001	5	S5125			02/06/13		105.84			
229001 229001	6 7	S5125 S5125		02/07/13	02/07/13 02/08/13		105.84 105.84			
229001	/	55125		02/08/13		Z8.00 IM TOTAL	740.88	CTATM ACC	אוואיי ספפ	. 2290010012011659
					CLIA	IM TOTAL	740.00	CDAIN ACC	JONI KEF.	. 2270010012011037
REG LOC	CLIENT	SERVICE	NAME	BIR	RTH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION	#	
001	2011988	2011988	RIVERA	LIDIA 12/	01/1942	GNT02751500				
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT			
229002	1 1	S5125	CODE		02/06/13		105.84			
229002	2	S5125 S5125			02/00/13		105.84			
229002	3	S5125			02/07/13		105.84			
22,002	3	23123		02, 00, 15	. , , .	IM TOTAL	317.52	CLAIM ACC	OUNT REF	. 2290020012011988
		~								
REG LOC 001	CLIENT 2011491	SERVICE 2011491	NAME RIVERA		TH DATE 23/1943	GNT06231700	PRIOR	AUTHORIZATION	#	
001	2011491	2011491	KIVEKA	RAMONII 00/	23/1943	GN106231700				
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT			
229003	1	S5125		02/04/13	02/04/13	16.00	60.48			
229003	2	S5125			02/05/13		60.48			
229003	3	S5125			02/06/13		60.48			
229003	4	S5125			02/07/13		60.48			
229003	5	S5125		02/08/13	02/08/13		60.48	GT 3 T14 3 GG		00000000010011401
					CLA	IM TOTAL	302.40	CLAIM ACC	JUNT REF.	. 2290030012011491
REG LOC	CLIENT	SERVICE	NAME	BIF	RTH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION	#	
001	2010412	2010412	RODRIGUEZ		23/1931	GNT06115800				
	"									
INV #	LINE #	PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT			
229004	1	T1019			02/02/13		60.48			
229004	2	T1019			02/04/13		60.48			
229004 229004	3 4	T1019 T1019			02/05/13 02/06/13		60.48 60.48			
229004	4 5	T1019 T1019		02/06/13	02/06/13		60.48			
229004	6	T1019		02/07/13	02/07/13		60.48			
22,004	O	11017		02/00/13	. , , .	IO.OU IM TOTAL	362.88	CLATM ACC	איזא דעוונ	. 2290040012010412
					CHA		222.00	J 11000		

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SUBMITTER ID = SUNNYSI SUNNYSIDE

REG LOC 001	CLIENT 2007969		NAME RODRIGUEZ	HOLGER	BIRTH DAT 10/27/19		RECIPIENT ID GNT05256300	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE CO	ODE	FROM			UNITS	AMOUNT		
229005	1	T1019			2/13 02/0:		36.00	136.08		
229005	2	T1019			3/13 02/03		36.00	136.08		
229005 229005	3 4	T1019 T1019			4/13 02/04 5/13 02/05		36.00 36.00	136.08 136.08		
229005	5	T1019			6/13 02/0		36.00	136.08		
229005	6	T1019			7/13 02/0		36.00	136.08		
229005	7	T1019		02/0	8/13 02/0		36.00	136.08		
						CLAI	IM TOTAL	952.56	CLAIM ACCOUNT REF.	2290050012007969
REG LOC 001	CLIENT 2012056		NAME RODRIGUEZ	JUAN	BIRTH DAT 11/04/19:		RECIPIENT ID 93702665700	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE CO	ODE	FROM	DT THRU	DT	UNITS	AMOUNT		
229006	1	S5125			2/13 02/0		24.00	90.72		
229006	2	S5125			3/13 02/0		24.00	90.72		
229006	3	S5125			4/13 02/04		28.00	105.84		
229006 229006	4 5	S5125 S5125			5/13 02/09 6/13 02/09		28.00 28.00	105.84 105.84		
229006	6	S5125			7/13 02/0		28.00	105.84		
229006	7	S5125			8/13 02/0		28.00	105.84		
						CLAI	IM TOTAL	710.64	CLAIM ACCOUNT REF.	2290060012012056
REG LOC 001	CLIENT 2012182		NAME RODRIGUEZ	LIDIA	BIRTH DAT 10/13/19:		RECIPIENT ID GNT03481200	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE CO	ODE	FROM	DT THRU	חת	UNITS	AMOUNT		
229007	1	T1019	ODE		4/13 02/0		16.00	60.48		
229007	2	T1019			5/13 02/0		16.00	60.48		
229007	3	T1019			6/13 02/0		16.00	60.48		
229007	4	T1019		02/0	8/13 02/0		16.00	60.48	G. 1	00000000010010100
						CLAI	IM TOTAL	241.92	CLAIM ACCOUNT REF.	22900/0012012182
REG LOC 001	CLIENT 2012226		NAME RODRIGUEZ	MARY	BIRTH DAT 07/05/19:		RECIPIENT ID GNT05127100	PRIOR	AUTHORIZATION #	
INV #	LINE #	PROCEDURE CO	ODE	FROM	DT THRU	DT	UNITS	AMOUNT		
229008	1	S5125			2/13 02/03		16.00	60.48		
229008	2	S5125			3/13 02/03		16.00	60.48		
229008 229008	3 4	S5125 S5125		- , -	4/13 02/04 6/13 02/04		24.00 24.00	90.72 90.72		
229008	5	S5125			8/13 02/0		24.00	90.72		
	-	-		, -			IM TOTAL	393.12	CLAIM ACCOUNT REF.	2290080012012226
REG LOC	CLIENT	SERVICE 1	NAME		BIRTH DA	ΓE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001	2012097		RODRIGUEZ	SILVIO	11/03/19		GNT06106100			
INV #	LINE #	PROCEDURE CO	ODE	FROM	DT THRU	DT	UNITS	AMOUNT		

REPORT DATE 02/13/11 INPUT FILE = /VOL44	3 SUNNY 4/COMPSUP/HIPAAIN/E3202	SIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 33 013021304004881
SUBMITTER ID = SUNN' PROVIDER ID = 11350		NPI = 1154407492
229009 2 S 229009 3 S 229009 4 S	S5125 S5125 S5125 S5125 S5125	02/04/13 02/04/13 32.00 120.96 02/05/13 02/05/13 32.00 120.96 02/06/13 02/06/13 32.00 120.96 02/07/13 02/07/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 CLAIM TOTAL 604.80 CLAIM ACCOUNT REF. 2290090012012097
REG LOC CLIENT 001 2012496	SERVICE NAME 2012496 ROJAS	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # HAYDEE 02/15/1935 GNT04856800
	PROCEDURE CODE S5125	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 16.00 60.48 CLAIM TOTAL 60.48 CLAIM ACCOUNT REF. 2290100012012496
REG LOC CLIENT 001 2012496	SERVICE NAME 2012496 ROJAS	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # HAYDEE 02/15/1935 GNT04856800
229011 1 2 229011 2 3 229011 3	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2290110012012496
REG LOC CLIENT 001 2011777	SERVICE NAME 2011777 ROMAN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # GLADYS 09/15/1934 GNT029333300
229012 1 2 229012 2 3 229012 3 2 229012 4 2 229012 5 229012 6 3	PROCEDURE CODE \$5125 \$5125 \$5125 \$5125 \$5125 \$5125 \$5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 32.00 120.96 02/03/13 02/03/13 32.00 120.96 02/04/13 02/04/13 32.00 120.96 02/05/13 02/05/13 32.00 120.96 02/06/13 02/06/13 32.00 120.96 02/07/13 02/07/13 32.00 120.96 02/07/13 02/07/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 CLAIM TOTAL 846.72 CLAIM ACCOUNT REF. 2290120012011777
REG LOC CLIENT 001 2012085	SERVICE NAME 2012085 ROSARIO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ANA 06/23/1949 GNT03285400
229013 1 8 229013 2 8 229013 3 8	PROCEDURE CODE S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/06/13 02/06/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 CLAIM TOTAL 423.36 CLAIM ACCOUNT REF. 2290130012012085
REG LOC CLIENT 001 2006828	SERVICE NAME 2006828 RUBIANO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MARIA 11/12/1925 GNT03390400
INV # LINE # 1	PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

DEDODE DATE	7 00 /10 /	1.2	TRANSCIPE CIEVALIDE		111033	D3.003 DT1		PAGE 34
TNPUT FILE	$= /VOI_{4}$	13 44/COMPSUP/HTPAATN/F	3202013021304004881		HIPAA	DATA FIL	LE REPORT (PHLT837/EDIS)	PAGE 34
	,	,, -						
SUBMITTER I			SIDE		3770	T 1154	407400	
PROVIDER I	LD = 113:	502051 SUNNYSIDE				PI = 11544	40 / 492	
229014	1	S5125	02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	02/04/13	22.00	83.16		
229014	2	S5125	02/05/13	02/05/13	22.00	83.16		
229014	3	S5125	02/06/13	02/06/13	22.00	83.16		
229014 229014	4 5	S5125 S5125	02/07/13	02/07/13	22.00 20.00	83.16 75.60		
229014	5	33123	02/08/13	02/06/13 CLA	IM TOTAL	408.24	CLAIM ACCOUNT REF. 2	2290140012006828
	CLIENT	SERVICE NAME		H DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001 2	2011986	2011986 RUIZ	JAMES 05/0	14/1929	GNT00225800			
INV # I	LINE #	PROCEDURE CODE	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13	THRU DT	UNITS	AMOUNT		
229015	1	T1019 TT	02/02/13	02/02/13	12.00	48.36		
229015	2	T1019 TT	02/03/13	02/03/13	12.00	48.36		
229015	3	T1019 TT	02/04/13	02/04/13	12.00	48.36		
229015 229015	4 5	T1019 TT	02/05/13	02/05/13	12.00 12.00	48.36 48.36		
229015	6	T1019 II T1019 TT	02/00/13	02/00/13	12.00	48.36		
225015	Ü	11019 11	02/ 0// 13	CLA	IM TOTAL	290.16	CLAIM ACCOUNT REF. 2	2290150012011986
	~							
	CLIENT 2011987	SERVICE NAME 2011987 RUIZ		TH DATE 0/1934	RECIPIENT ID GNT00225900	PRIOR	AUTHORIZATION #	
001 2	2011907	2011907 R012	ROSA 11/3	00/1934	GN100225900			
INV # I	LINE #	PROCEDURE CODE	FROM DT	THRU DT	UNITS	AMOUNT		
229016	1	T1019 TT	02/02/13	02/02/13	12.00	48.36		
229016	2	T1019 TT	02/03/13	02/03/13	12.00	48.36 48.36		
229016 229016	3 4	T1019 TT	02/04/13	02/04/13	12.00 12.00	48.36		
229016	5	T1019 TT	02/05/13	02/06/13	12.00	48.36		
229016	6	T1019 TT	02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13	02/07/13	12.00	48.36		
				CLA	IM TOTAL	290.16	CLAIM ACCOUNT REF. 2	2290160012011987
REG LOC	CLIENT	SERVICE NAME	RIPT	'H DATE	RECIPIENT ID	DRIOR	AUTHORIZATION #	
	2003430	2003430 SALJANIN		5/1922	GNT03006000	, 11(10)(AUTHORIZATION #	
	LINE #	PROCEDURE CODE	FROM DT	THRU DT	UNITS	AMOUNT		
229017 229017	1 2	T1019 T1019	02/02/13 02/03/13	02/02/13		120.96 120.96		
229017	3	T1019	02/04/13	02/03/13		136.08		
229017	4	T1019	02/05/13	02/05/13		136.08		
229017	5	T1019	02/06/13	02/06/13	36.00	136.08		
229017	6	T1019	02/07/13	02/07/13		136.08		
229017	7	T1019	FROM DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	02/08/13	36.00 IM TOTAL	136.08 922.32	CLAIM ACCOUNT REF. 2	2200170012002420
				CLA.	IM IOIAL	922.32	CLAIM ACCOUNT REF. 2	2290170012003430
REG LOC	CLIENT	SERVICE NAME	BIRT	'H DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #	
001 2	2012084	2012084 SANCHEZ	ANA M 04/0	1/1925	GNT02386400			
INV # I	LINE #	PROCEDURE CODE		THRU DT	UNITS	AMOUNT		
229018	1 1	S5125 TT	02/02/13			32.24		
229018	2	S5125 TT	02/03/13			32.24		
229018	3	S5125 TT	02/04/13	02/04/13	8.00	32.24		
1								

REPORT DATE (INPUT FILE =	02/13/13 /VOL444/COMPSUP	SUNNYSIDE /HIPAAIN/E32020130	CITYWIDE 21304004881	-	HIPAA	DATA FIL	LE REPORT (PHLT837/EDIS) PAGE 35
SUBMITTER ID PROVIDER ID	= SUNNYSI = 113502051 SU	SUNNYSIDE NNYSIDE			NPI	I = 11544	107492
229018 229018 229018 229018	4 S5125 TT 5 S5125 TT 6 S5125 TT 7 S5125 TT		02/06/13 02/07/13	02/05/13 02/06/13 02/07/13 02/08/13 CLA	8.00 8.00	32.24 32.24 32.24 32.24 225.68	CLAIM ACCOUNT REF. 2290180012012084
	LIENT SERVICE 97789 1997789	NAME SANCHEZ ELI		RTH DATE '03/1956	RECIPIENT ID GNT00370600	PRIOR	AUTHORIZATION #
INV # LIN 229019	NE # PROCEDURE 1 T1019	CODE	FROM DT 01/22/13	THRU DT 01/22/13 CLA	UNITS 28.00 IM TOTAL	AMOUNT 105.84 105.84	CLAIM ACCOUNT REF. 2290190011997789
	LIENT SERVICE 97789 1997789	NAME SANCHEZ ELI		TH DATE 03/1956	RECIPIENT ID GNT00370600	PRIOR	AUTHORIZATION #
INV # LIN 229020 229020 229020 229020 229020 229020 229020 229020	NE # PROCEDURE 1 T1019 2 T1019 3 T1019 4 T1019 5 T1019 6 T1019 7 T1019	CODE	02/03/13 02/04/13 02/05/13 02/06/13 02/07/13	THRU DT 02/02/13 02/03/13 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13	16.00 28.00 28.00 28.00 28.00	AMOUNT 60.48 60.48 105.84 105.84 105.84 105.84	
	LIENT SERVICE 12082 2012082	NAME SANCHEZ EST:		CLA RTH DATE 17/1936	IM TOTAL RECIPIENT ID GNT05030100	650.16 PRIOR	CLAIM ACCOUNT REF. 2290200011997789 AUTHORIZATION #
INV # LIN 229021 229021 229021 229021 229021	NE # PROCEDURE 1 S5125 2 S5125 3 S5125 4 S5125 5 S5125	CODE	02/05/13 02/06/13 02/07/13	THRU DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	16.00 16.00 16.00	AMOUNT 60.48 60.48 60.48 60.48 60.48 302.40	CLAIM ACCOUNT REF. 2290210012012082
	LIENT SERVICE 11841 2011841	NAME SANTANA OCTA		TH DATE 00/0000	RECIPIENT ID GNT00231600	PRIOR	AUTHORIZATION #
INV # LIN 229022 229022 229022 229022 229022	NE # PROCEDURE 1 T1019 2 T1019 3 T1019 4 T1019 5 T1019	CODE	02/05/13 02/06/13 02/07/13	THRU DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	20.00 20.00 20.00	AMOUNT 75.60 75.60 75.60 75.60 75.60 378.00	CLAIM ACCOUNT REF. 2290220012011841
	LIENT SERVICE 11787 2011787	NAME SANTIAGO ARM		TH DATE 19/1932	RECIPIENT ID GNT02860500	PRIOR	AUTHORIZATION #
INV # LIN	NE # PROCEDURE	CODE	FROM DT	THRU DT	UNITS	AMOUNT	

REPORT DATE 02/13, INPUT FILE = /VOL4	/13 8UNN 144/COMPSUP/HIPAAIN/E320	ZSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 36 2013021304004881
SUBMITTER ID = SUI PROVIDER ID = 113	NYSI SUNNYSIDI 3502051 SUNNYSIDE	NPI = 1154407492
229023 1 229023 2 229023 3 229023 4 229023 5	T1019 T1019 T1019 T1019 T1019	02/04/13 02/04/13 16.00 60.48 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2290230012011787
REG LOC CLIENT 001 2011851	SERVICE NAME 2011851 SANTIAGO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 11/16/1924 GNT02886300
INV # LINE # 229024 1 229024 2 229024 3 229024 5 229024 6 229024 7	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 32.00 120.96 02/03/13 02/03/13 32.00 120.96 02/04/13 02/04/13 32.00 120.96 02/05/13 02/05/13 32.00 120.96 02/05/13 02/05/13 32.00 120.96 02/06/13 02/06/13 32.00 120.96 02/07/13 02/07/13 32.00 120.96 02/07/13 02/07/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 CLAIM TOTAL 846.72 CLAIM ACCOUNT REF. 2290240012011851
REG LOC CLIENT 001 2011859	SERVICE NAME 2011859 SANTIAGO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 1VETH 00/00/0000 93703401100
INV # LINE # 229025 1 229025 2 229025 3 229025 4 229025 5 229025 6	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 16.00 60.48 02/03/13 02/03/13 16.00 60.48 02/04/13 02/04/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/08/13 02/08/13 20.00 75.60 CLAIM TOTAL 514.08 CLAIM ACCOUNT REF. 2290250012011859
REG LOC CLIENT 001 2011788	SERVICE NAME 2011788 SANTIAGO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # VICTORI 11/18/1941 93701469700
INV # LINE # 229026 1 229026 2 229026 3 229026 4 229026 5	PROCEDURE CODE T1019 T1019 T1019 T1019 T1019	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 16.00 60.48 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 02/08/13 02/08/13 16.00 60.48 CLAIM TOTAL 302.40 CLAIM ACCOUNT REF. 2290260012011788
REG LOC CLIENT 001 2002124	SERVICE NAME 2002124 SHELTON	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # AGUEDA 02/05/1919 GNT03123900
INV # LINE # 229027 1	PROCEDURE CODE T1019	FROM DT THRU DT UNITS AMOUNT 01/21/13 01/21/13 28.00 105.84 CLAIM TOTAL 105.84 CLAIM ACCOUNT REF. 2290270012002124
REG LOC CLIENT 001 2002124	SERVICE NAME 2002124 SHELTON	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # AGUEDA 02/05/1919 GNT03123900
INV # LINE #	PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

REPORT DATE 02/13 INPUT FILE = /VOL	/13 SUNN 1444/COMPSUP/HIPAAIN/E320	YSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 3 2013021304004881
SUBMITTER ID = SU PROVIDER ID = 11	NNYSI SUNNYSID 3502051 SUNNYSIDE	NPI = 1154407492
229028 1 229028 2 229028 3 229028 4 229028 5 229028 6	T1019 T1019 T1019 T1019 T1019 T1019	02/03/13 02/03/13 28.00 105.84 02/04/13 02/04/13 28.00 105.84 02/05/13 02/05/13 28.00 105.84 02/06/13 02/06/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/07/13 02/07/13 28.00 105.84 02/08/13 02/08/13 26.00 98.28 CLAIM TOTAL 627.48 CLAIM ACCOUNT REF. 229028001200212
REG LOC CLIENT 001 2011597	SERVICE NAME 2011597 SOLIS	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 12/26/1931 GNT03904400
INV # LINE # 229029 1 229029 2 229029 3 229029 4	PROCEDURE CODE S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 48.00 181.44 02/03/13 02/03/13 48.00 181.44 02/04/13 02/04/13 48.00 181.44 02/05/13 02/05/13 48.00 181.44 02/05/13 02/05/13 48.00 181.44 CLAIM TOTAL 725.76 CLAIM ACCOUNT REF. 229029001201159
REG LOC CLIENT 001 2008885	SERVICE NAME 2008885 SOMRAJ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # UMILLA 09/24/1973 GNT03813900
INV # LINE # 229030 1 229030 2 229030 3	PROCEDURE CODE S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/03/13 02/03/13 16.00 60.48 02/05/13 02/05/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 229030001200888
REG LOC CLIENT 001 2011781	SERVICE NAME 2011781 THEN	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MARIA 02/12/1942 GNT04429300
INV # LINE # 229031 1 229031 2 229031 3 229031 4 229031 5	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 36.00 136.08 02/05/13 02/05/13 12.00 45.36 02/06/13 02/06/13 36.00 136.08 02/07/13 02/07/13 12.00 45.36 02/08/13 02/08/13 36.00 136.08 CLAIM TOTAL 498.96 CLAIM ACCOUNT REF. 229031001201178
REG LOC CLIENT 001 2011782	SERVICE NAME 2011782 THERMOSY	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MARIE P 06/10/1917 GNT02791600
INV # LINE # 229032 1 229032 2 229032 3 229032 4 229032 5 229032 6	PROCEDURE CODE S5125 S5125 S5125 S5125 S5125 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 20.00 75.60 02/04/13 02/04/13 32.00 120.96 02/05/13 02/05/13 32.00 120.96 02/06/13 02/06/13 32.00 120.96 02/07/13 02/07/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 02/08/13 02/08/13 32.00 120.96 CLAIM TOTAL 680.40 CLAIM ACCOUNT REF. 229032001201178
REG LOC CLIENT 001 2012197	SERVICE NAME 2012197 TORO	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ROSARIO 02/15/1929 GNT00261000
INV # LINE #	PROCEDURE CODE	FROM DT THRU DT UNITS AMOUNT

REPORT DA	TE 02/13/	13	SUNNYS	SIDE CITYWIDE		HIPAA	DATA FIL	E REPORT (PHLT837/EDIS) PAGE 38
INPUT FIL	E = /VOL4	44/COMPSUP/H	IPAAIN/E32020	SIDE CITYWIDE 013021304004881				
SUBMITTER	ID = SUN	NYST	SUNNYSIDE					
		502051 SUNN				NPI	I = 11544	07492
229033	1	T1019		02/02/13	02/02/13	24.00	90.72	
229033	2	T1019		02/03/13			90.72	
229033	3	T1019		02/04/13			120.96	
229033	4	T1019		02/05/13	. , , .		113.40	
229033	5	T1019		02/06/13			120.96	
229033	6	T1019		02/08/13	. , , .		120.96	GT 3 TW 3 GGOTTHE DEE 000033001001010E
					CLA	IM TOTAL	657.72	CLAIM ACCOUNT REF. 2290330012012197
REG LOC	CLIENT		NAME		TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2011861	2011861	TORRES	JUANITA 06/	21/1931	GNT03848300		
INV #	LINE #	PROCEDURE CO	ODE	FROM DT	THRU DT	UNITS	AMOUNT	
229034	1	T1019		02/03/13			90.72	
229034	2	T1019		02/04/13			120.96	
229034 229034	3 4	T1019 T1019		02/05/13 02/06/13			120.96 120.96	
229034	5	T1019		02/06/13			120.96	
229034	6	T1019		02/07/13			120.96	
	ŭ	11010		02, 00, 13		IM TOTAL	695.52	CLAIM ACCOUNT REF. 2290340012011861
REG LOC	CLIENT	SERVICE 1	NAME	מדמ	TH DATE	DECIDIENT ID	DDTOD	AUTHORIZATION #
001			TOUSSAINT		28/1936	93702919600	FRIOR	AUTHORIZATION #
INV #	LINE #	PROCEDURE CO	ODE	FROM DT	THRU DT	UNITS	AMOUNT	
229035	1	S5125			02/02/13		56.70	
229035	2	S5125		02/03/13			60.48	
229035	3	S5125		02/04/13			75.60	
229035	4	S5125		02/05/13			75.60	
229035	5	S5125		02/06/13			75.60	
229035 229035	6 7	S5125 S5125		02/07/13 02/08/13			75.60 75.60	
229035	/	55125		02/06/13	. , , .	ZU.UU IM TOTAL	495.18	CLAIM ACCOUNT REF. 2290350012011983
REG LOC	CLIENT		NAME		TH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	2011783	2011783	VARGAS	ALCIBIA 07/	06/1918	GNT00492400		
INV #	LINE #	PROCEDURE CO	ODE	FROM DT	THRU DT	UNITS	AMOUNT	
229036	1	T1019		02/02/13	02/02/13	20.00	75.60	
229036	2	T1019		02/03/13			75.60	
229036	3	T1019		02/04/13			75.60	
229036	4	T1019		02/05/13			75.60	
229036 229036	5 6	T1019 T1019		02/06/13 02/07/13			75.60 75.60	
229036	7	T1019 T1019		02/07/13			75.60	
22,030	,	11017		02/00/13		IM TOTAL	529.20	CLAIM ACCOUNT REF. 2290360012011783
REG LOC	CLIENT	SERVICE 1	NAME	ата	TH DATE	RECIPIENT ID	PRTOP	AUTHORIZATION #
001	2012160		VARGAS		16/1936	GNT0026740	11(101(
INV #	LINE #	PROCEDURE CO	ODE	FROM DT	THRU DT	UNITS	AMOUNT	
229037	1	T1019 TT			02/02/13		80.60	
1								

REPORT DATE 02/13/13 INPUT FILE = /VOL444/COMPSUP/HIPAAI	SUNNYSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 39 N/E3202013021304004881					
SUBMITTER ID = SUNNYSI SUNNYSIDE PROVIDER ID = 113502051 SUNNYSIDE NPI = 1154407492						
229037 2 T1019 TT 229037 3 T1019 TT 229037 4 T1019 TT 229037 5 T1019 TT 229037 6 T1019 TT 229037 7 T1019 TT	02/03/13 02/03/13 20.00 80.60 02/04/13 02/04/13 20.00 80.60 02/05/13 02/05/13 24.00 96.72 02/06/13 02/06/13 20.00 80.60 02/07/13 02/07/13 20.00 80.60 02/08/13 02/08/13 20.00 80.60 CLAIM TOTAL 580.32 CLAIM ACCOUNT REF. 2290370012012160					
REG LOC CLIENT SERVICE NAME 001 2011483 2011483 VARGA:	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # S RAMON 10/23/1965 GNT02027100					
INV # LINE # PROCEDURE CODE 229038	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 24.00 90.72 02/05/13 02/05/13 24.00 90.72 02/06/13 02/06/13 24.00 90.72 02/06/13 02/06/13 24.00 90.72 02/07/13 02/07/13 24.00 90.72 02/08/13 02/08/13 24.00 90.72 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2290380012011483					
REG LOC CLIENT SERVICE NAME 001 2012168 2012168 VAZQU	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # EZ ROSA 12/05/1940 GNT00268900					
INV # LINE # PROCEDURE CODE 229039	FROM DT THRU DT UNITS AMOUNT 02/04/13 02/04/13 16.00 60.48 02/05/13 02/05/13 16.00 60.48 02/06/13 02/06/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/07/13 02/07/13 16.00 60.48 02/08/13 02/08/13 15.00 56.70 CLAIM TOTAL 298.62 CLAIM ACCOUNT REF. 2290390012012168					
REG LOC CLIENT SERVICE NAME 001 2011982 2011982 VEGA	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ADELAID 12/16/1934 93702952000					
INV # LINE # PROCEDURE CODE 229040 1 S5126 229040 2 S5126 229040 3 S5126 229040 4 S5126 229040 5 S5126 229040 6 S5126 229040 7 S5126	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 1.00 196.56 02/03/13 02/03/13 1.00 196.56 02/04/13 02/04/13 1.00 196.56 02/05/13 02/05/13 1.00 196.56 02/05/13 02/05/13 1.00 196.56 02/06/13 02/06/13 1.00 196.56 02/07/13 02/07/13 1.00 196.56 02/07/13 02/07/13 1.00 196.56 02/08/13 02/08/13 1.00 196.56 02/08/13 02/08/13 1.00 196.56					
REG LOC CLIENT SERVICE NAME 001 2012027 2012027 VELEZ	BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # CARMEN 06/21/1932 GNT00271900					
INV # LINE # PROCEDURE CODE 229041 1 S5125 229041 2 S5125 229041 3 S5125 229041 4 S5125	FROM DT THRU DT UNITS AMOUNT 02/02/13 02/02/13 16.00 60.48 02/03/13 02/03/13 16.00 60.48 02/04/13 02/04/13 24.00 90.72 02/06/13 02/06/13 24.00 90.72					

REPORT DATE 02/13/13 SUNN INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E320	YSIDE CITYWIDE HIPAA 2013021304004881	DATA FILE REPORT (PHLT837/EDIS) PAGE 40
SUBMITTER ID = SUNNYSI SUNNYSIDE PROVIDER ID = 113502051 SUNNYSIDE	E .	I = 1154407492
229041 5 S5125 229041 6 S5125	02/07/13 02/07/13 24.00 02/08/13 02/08/13 24.00 CLAIM TOTAL	90.72 90.72 483.84 CLAIM ACCOUNT REF. 2290410012012027
REG LOC CLIENT SERVICE NAME 001 2012002 2012002 VELEZ	BIRTH DATE RECIPIENT ID WILLIAM 12/11/1934 GNT04940600	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 229042 1 S5125 229042 2 S5125 229042 3 S5125 229042 4 S5125 229042 5 S5125 229042 5 S5125 229042 6 S5125 229042 7 S5125	FROM DT THRU DT UNITS 01/22/13 01/22/13 16.00 01/25/13 01/25/13 16.00 02/04/13 02/04/13 16.00 02/05/13 02/05/13 16.00 02/06/13 02/06/13 16.00 02/07/13 02/07/13 16.00 02/08/13 02/08/13 16.00 02/08/13 02/08/13 16.00 CLAIM TOTAL	AMOUNT 60.48 60.48 60.48 60.48 60.48 60.48 60.48 60.48 423.36 CLAIM ACCOUNT REF. 2290420012012002
REG LOC CLIENT SERVICE NAME 001 2012091 2012091 VICTORIO	BIRTH DATE RECIPIENT ID 08/16/1928 GNT02618000	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 229043	FROM DT THRU DT UNITS 02/02/13 02/02/13 20.00 02/03/13 02/03/13 20.00 02/04/13 02/04/13 44.00 02/05/13 02/05/13 44.00 02/06/13 02/06/13 44.00 02/07/13 02/07/13 44.00 CLAIM TOTAL	AMOUNT 75.60 75.60 166.32 166.32 166.32 166.32 816.48 CLAIM ACCOUNT REF. 2290430012012091
REG LOC CLIENT SERVICE NAME 001 2008200 2008200 VLAHOS	BIRTH DATE RECIPIENT ID 09/04/1932 GNT04780800	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 229044 1 S5125 229044 2 S5125 229044 3 S5125 229044 4 S5125 229044 5 S5125 229044 6 S5125	FROM DT THRU DT UNITS 02/02/13 02/02/13 48.00 02/03/13 02/03/13 48.00 02/04/13 02/04/13 32.00 02/05/13 02/05/13 32.00 02/06/13 02/06/13 32.00 02/07/13 02/07/13 32.00 CLAIM TOTAL	AMOUNT 181.44 181.44 120.96 120.96 120.96 120.96 846.72 CLAIM ACCOUNT REF. 2290440012008200
REG LOC CLIENT SERVICE NAME 001 2012077 2012077 WARD	BIRTH DATE RECIPIENT ID 08/13/1956 93703608100	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE 229045 1 S5125 229045 2 S5125 229045 3 S5125	FROM DT THRU DT UNITS 02/04/13 02/04/13 8.00 02/06/13 02/06/13 8.00 02/08/13 02/08/13 8.00 CLAIM TOTAL	AMOUNT 30.24 30.24 30.24 90.72 CLAIM ACCOUNT REF. 2290450012012077
REG LOC CLIENT SERVICE NAME 001 2012079 2012079 WARD	BIRTH DATE RECIPIENT ID 08/13/1956 93703608100	PRIOR AUTHORIZATION #
INV # LINE # PROCEDURE CODE	FROM DT THRU DT UNITS	AMOUNT

REPORT DATE 02/13/13 SUNNYSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 41 INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202013021304004881									
SUBMITTER ID = SUNNYSI SUNNYSIDE PROVIDER ID = 113502051 SUNNYSIDE NPI = 1154407492									
229046 229046	1 2	S5131 S5131		- , - , -	01/26/13 02/02/13 CLA		56.00 56.00 112.00	CLAIM ACCOUNT	REF. 2290460012012079
REG LOC 001	CLIENT 2008892	SERVICE 2008892	NAME WEISZ		RTH DATE /27/1920	RECIPIENT ID GNT04606900	PRIOR	AUTHORIZATION #	
INV # 229047 229047	LINE # 1 2	PROCEDURE S5125 TT S5125 TT	CODE		THRU DT 02/04/13 02/06/13 CLA		AMOUNT 64.48 64.48 128.96	CLAIM ACCOUNT	REF. 2290470012008892
REG LOC 001	CLIENT 2009618	SERVICE 2009618	NAME WEST		RTH DATE /14/1933	RECIPIENT ID GNT05953700	PRIOR	AUTHORIZATION #	
INV # 229048 229048 229048 229048 229048	LINE # 1 2 3 4 5	PROCEDURE T1019 T1019 T1019 T1019 T1019	CODE	02/05/13 02/06/13 02/07/13	THRU DT 02/04/13 02/05/13 02/06/13 02/07/13 02/08/13 CLA	3 16.00 3 16.00 16.00	AMOUNT 60.48 60.48 60.48 60.48 302.40	CLAIM ACCOUNT	REF. 2290480012009618
REG LOC 001	CLIENT 2003177	SERVICE 2003177	NAME WHITLEY		RTH DATE /04/1950	RECIPIENT ID GNT04373700	PRIOR	AUTHORIZATION #	
INV # 229049 229049 229049 229049 229049	LINE # 1 2 3 4 5	PROCEDURE T1019 T1019 T1019 T1019 T1019	CODE	02/04/13 02/05/13 02/07/13	THRU DT 01/30/13 02/04/13 02/05/13 02/07/13 02/08/13 CLA	3 16.00 3 16.00 3 16.00	AMOUNT 60.48 60.48 60.48 60.48 60.48 302.40	CLAIM ACCOUNT	REF. 2290490012003177
REG LOC 001	CLIENT 2006152	SERVICE 2006152	NAME YI		RTH DATE /16/1959	RECIPIENT ID GNT04057700	PRIOR	AUTHORIZATION #	
INV # 229050 229050 229050 229050 229050 229050	LINE # 1 2 3 4 5	PROCEDURE S5125 S5125 S5125 S5125 S5125 S5125	CODE	02/04/13 02/05/13 02/06/13 02/07/13	02/08/13	16.00 16.00 16.00 16.00	AMOUNT 60.48 60.48 60.48 60.48 60.48 362.88		REF. 2290500012006152
REG LOC 001	CLIENT 2011846	SERVICE 2011846	NAME ZARAGOZA		RTH DATE /14/1933	RECIPIENT ID GNT06005500	PRIOR	AUTHORIZATION #	
INV # 229051	LINE # 1	PROCEDURE S5125	CODE	FROM DT 01/28/13	THRU DT 01/28/13	UNITS 32.00	AMOUNT		

REPORT DA	TE 02/13/	13	SUNNYSIDE CITYWIDE	HIPAA	DATA FII	LE REPORT (PHLT837/EDIS) PAGE 42
INPUT FIL	E = /VOL4	44/COMPSUP/HIPAAI	N/E3202013021304004881			, , , , , , , , , , , , , , , , , , , ,
CIIDMITTTED	ID = SUN	NIVOT CIT	NNYSIDE			
		502051 SUNNYSIDE	NNISIDE	NPI	= 1154	407492
229051	2	S5125	01/29/13 01/29/1		120.96	
229051	3	S5125 S5125	01/30/13 01/30/1 01/31/13 01/31/1		120.96	
229051 229051	4 5	S5125 S5125	01/31/13 01/31/1 02/01/13 02/01/1		120.96 120.96	
229031	5	33123		AIM TOTAL	604.80	CLAIM ACCOUNT REF. 2290510012011846
			02	11111 101111	001.00	
REG LOC 001	CLIENT 2011750	SERVICE NAME 2011750 ZARE	BIRTH DATE GLORIA 05/07/1943	RECIPIENT ID GNT03716600	PRIOR	AUTHORIZATION #
T2777 II	T T1TD	DD045DIIDE 40D5				
INV # 229052	LINE # 1	PROCEDURE CODE S5125	FROM DT THRU DT 01/30/13 01/30/1		AMOUNT 181.44	
229052	2	S5125 S5125	01/30/13 01/30/1		181.44	
229052	3	S5125	02/02/13 02/02/1		181.44	
229052	4	S5125	02/03/13 02/03/1		181.44	
229052	5	S5125	02/04/13 02/04/1	3 48.00	181.44	
229052	6	S5125	02/05/13 02/05/1		181.44	
229052	7	S5125	02/06/13 02/06/1		181.44	
229052	8 9	S5125	02/07/13 02/07/1		177.66	
229052	9	S5125	02/08/13 02/08/1		151.20 1,598.94	CLAIM ACCOUNT REF. 2290520012011750
			CI	AIM IOIAL I	1,330.34	CLAIM ACCOUNT REF. 2290320012011730
REG LOC	CLIENT	SERVICE NAME	BIRTH DATE	RECIPIENT ID	PRIOR	AUTHORIZATION #
001	1999328	1999328 ZUMAE	TA FANNY 04/09/1936	GNT03663500		
INV #	LINE #	PROCEDURE CODE	FROM DT THRU DT	UNITS	AMOUNT	
229053	1	T1019	01/13/13 01/13/1		105.84	
			CL	AIM TOTAL	105.84	CLAIM ACCOUNT REF. 2290530011999328
DDG 100	GT T. T. T. T. T.	GDD117.GD 113.1/D	D.T.D.W. D.J.W.	DEGIDENT ID	DD T 0D	AVIIIVOD T (12 III T OV. III
REG LOC 001	CLIENT 1999328	SERVICE NAME 1999328 ZUMAE	BIRTH DATE FANNY 04/09/1936	RECIPIENT ID GNT03663500	PRIOR	AUTHORIZATION #
001	1999320	1999320 ZUMAE	IA FANNI 04/09/1930	GN103003300		
INV #	LINE #	PROCEDURE CODE	FROM DT THRU DT		AMOUNT	
229054	1	T1019	02/02/13 02/02/1		105.84	
229054	2	T1019	02/03/13 02/03/1		105.84	
229054	3 4	T1019 T1019	02/04/13 02/04/1		151.20 151.20	
229054 229054	4 5	T1019 T1019	02/05/13 02/05/1 02/06/13 02/06/1		151.20	
229054	6	T1019	02/00/13 02/00/1		151.20	
229054	7	T1019	02/08/13 02/08/1		151.20	
		-	- ,	AIM TOTAL	967.68	CLAIM ACCOUNT REF. 2290540011999328
DDUITUEB	TOTALS,	ID = 113502051	TOTAL # OF CLAIMS =	1004	т∩т:	AL CLAIM AMOUNT = 102,055.64
PKOATDEK	TOTALS,	10 - 113302031	TOTAL # OF CHATMP =	1004	1012	TUZ,000.04

INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202013021304004881

SUBMITTER ID = SUNNYSI SUNNYSIDE

PROVIDER ID = 113502051 SUNNYSIDE NPI = 1154407492

SUBMITTER TOTALS, ID = SUNNYSI TOTAL # OF CLAIMS = 1004 TOTAL CLAIM AMOUNT = 102,055.64