INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202012110706180965

SUBMITTER ID = SUNNYSI SUNNYSIDE

PROVIDER ID = 113502051 SUNNYSIDE NPI = 1154407492

| REG LOC 001 | CLIENT 2006118 | SERVICE 2006118 | NAME ALI | AMRUNIS | BIRTH 10/05 | DATE /1934 | RECIPIENT ID 93703296700 | PRIOR | AUTHORIZATION # |
|---|---------------------------------|--|---------------------|---|--------------------------------------|--|--------------------------|--|-------------------------------------|
| INV # 215579 215579 215579 215579 | LINE # 1 2 3 4 | PROCEDURE S5125 S5125 S5125 S5125 | CODE | 10/31 11/01 | //12 1 ./12 1 ./12 1 | HRU DT 0/27/12 0/31/12 1/01/12 1/02/12 CLA | 16.00 16.00 | AMOUNT 60.48 60.48 60.48 60.48 241.92 | CLAIM ACCOUNT REF. 2155790012006118 |
| REG LOC 001 | CLIENT 2010843 | SERVICE 2010843 | NAME ALSTON | ZULINE | BIRTH 05/07 | | RECIPIENT ID GNT06188400 | PRIOR | AUTHORIZATION # |
| INV # 215580 215580 215580 215580 | LINE # 1 2 3 4 | PROCEDURE T1019 T1019 T1019 T1019 | CODE | 10/27 10/28 | 5/12 1 7/12 1 8/12 1 | HRU DT 0/16/12 0/27/12 0/28/12 0/29/12 CLA | 32.00 32.00 | AMOUNT 120.96 120.96 120.96 120.96 483.84 | CLAIM ACCOUNT REF. 2155800012010843 |
| REG LOC 001 | CLIENT 2010843 | SERVICE 2010843 | NAME ALSTON | ZULINE | BIRTH 05/07 | | RECIPIENT ID GNT06188400 | PRIOR | AUTHORIZATION # |
| INV # 215581 215581 | LINE # 1 2 | PROCEDURE T1019 T1019 | CODE | FROM 11/01 11/02 | ./12 1 | HRU DT 1/01/12 1/02/12 CLA | | AMOUNT 120.96 120.96 241.92 | CLAIM ACCOUNT REF. 2155810012010843 |
| REG LOC 001 | CLIENT 2011581 | SERVICE 2011581 | NAME ASH | MARIE | BIRTH 08/11 | | RECIPIENT ID GNT06270600 | PRIOR | AUTHORIZATION # |
| INV # 215582 215582 215582 | LINE # 1 2 3 | PROCEDURE T1001 T1019 T1019 | CODE | FROM 10/17 10/31 11/02 | //12 1 ./12 1 | HRU DT 0/17/12 0/31/12 1/02/12 CLA | 16.00 | AMOUNT 100.00 60.48 60.48 220.96 | CLAIM ACCOUNT REF. 2155820012011581 |
| REG LOC 001 | CLIENT 2007817 | SERVICE 2007817 | NAME BEGUM | JAMILA | BIRTH 02/19 | | RECIPIENT ID GNT00018500 | PRIOR | AUTHORIZATION # |
| INV # 215583 215583 215583 215583 215583 | LINE # 1 2 3 4 5 | PROCEDURE S5125 S5125 S5125 S5125 S5125 | CODE | FROM 10/27 10/28 10/31 11/01 11/02 | 2/12 1 3/12 1 ./12 1 ./12 1 | HRU DT 0/27/12 0/28/12 0/31/12 1/01/12 1/02/12 CLA | 32.00 40.00 44.00 | AMOUNT 136.08 120.96 151.20 166.32 166.32 740.88 | CLAIM ACCOUNT REF. 2155830012007817 |
| REG LOC 001 | CLIENT 2011503 | SERVICE 2011503 | NAME BERJASHEVIC | LIME | BIRTH 10/30 | | RECIPIENT ID GNT06467800 | PRIOR | AUTHORIZATION # |
| INV # | LINE # | PROCEDURE | CODE | FROM | DT T | HRU DT | UNITS | AMOUNT | |

| REPORT DA | | 12 SUNN 44/COMPSUP/HIPAAIN/E320 | YSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 2 2012110706180965 |
|---|--------------------------------------|--|---|
| | 2 ID = SUN 2 ID = 113 | NYSI SUNNYSID 502051 SUNNYSIDE | E NPI = 1154407492 |
| 215584 | 1 | Т1019 | 11/02/12 11/02/12 32.00 120.96 CLAIM TOTAL 120.96 CLAIM ACCOUNT REF. 2155840012011503 |
| REG LOC 001 | CLIENT 2006632 | SERVICE NAME 2006632 BUCARO | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # CONCETT 02/27/1916 GNT04556300 |
| INV # 215585 215585 215585 215585 | LINE # 1 2 3 4 | PROCEDURE CODE S5125 S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/26/12 10/26/12 35.00 132.30 10/31/12 10/31/12 36.00 136.08 11/01/12 11/01/12 36.00 136.08 11/02/12 11/02/12 36.00 136.08 CLAIM TOTAL 540.54 CLAIM ACCOUNT REF. 2155850012006632 |
| REG LOC 001 | CLIENT 2010374 | SERVICE NAME 2010374 CARSWELL | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # LUELLA 10/04/1935 GNT05955100 |
| INV # 215586 215586 215586 215586 215586 215586 | LINE # 1 2 3 4 5 6 | PROCEDURE CODE S5125 S5125 S5125 S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 40.00 151.20 10/28/12 10/28/12 40.00 151.20 10/30/12 10/30/12 22.00 83.16 10/31/12 10/31/12 16.00 60.48 11/01/12 11/01/12 40.00 151.20 11/02/12 11/02/12 40.00 151.20 CLAIM TOTAL 748.44 CLAIM ACCOUNT REF. 2155860012010374 |
| REG LOC 001 | CLIENT 2002769 | SERVICE NAME 2002769 CEPEDA | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # TOMASA 09/07/1932 93700964900 |
| INV # 215587 215587 215587 215587 215587 | LINE # 1 2 3 4 5 | PROCEDURE CODE T1019 T1019 T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/29/12 10/29/12 24.00 90.72 10/30/12 10/30/12 24.00 90.72 10/31/12 10/31/12 24.00 90.72 11/01/12 11/01/12 24.00 90.72 11/02/12 11/02/12 24.00 90.72 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2155870012002769 |
| REG LOC 001 | CLIENT 2008320 | SERVICE NAME 2008320 COLAVITTI | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # UNDERSTORM UNDERSTORM UNDER STREET OF THE PRIOR AUTHORIZATION # |
| INV # 215588 215588 215588 215588 | LINE # 1 2 3 4 | PROCEDURE CODE S5125 S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 32.00 120.96 10/28/12 10/28/12 32.00 120.96 10/30/12 10/30/12 28.00 105.84 10/31/12 10/31/12 32.00 120.96 CLAIM TOTAL 468.72 CLAIM ACCOUNT REF. 2155880012008320 |
| REG LOC 001 | CLIENT 2008320 | SERVICE NAME 2008320 COLAVITTI | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # USE 15/23/1911 GNT04482200 |
| INV # 215589 | LINE # | PROCEDURE CODE S5125 | FROM DT THRU DT UNITS AMOUNT 11/01/12 11/01/12 31.00 117.18 |

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| SUBMITTER I PROVIDER I | | | SUNNYSIDE L SUNNYSIDE | | | | NPI = 1154407492 |
|---------------------------|---|-------|--------------------------|----------|----------|-------|------------------|
| 215589 | 2 | S5125 | | 11/02/12 | 11/02/12 | 24.00 | 90.72 |

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

| PROVIDER ID = 113502051 SUNNYSIDE | NPI = 1154407492 |
|--|--|
| 215589 2 S5125 | 11/02/12 11/02/12 24.00 90.72 CLAIM TOTAL 207.90 CLAIM ACCOUNT REF. 2155890012008320 |
| REG LOC CLIENT SERVICE NAME 001 2009790 2009790 COLEMAN | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # REGINA 11/26/1958 GNT060020000 |
| | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 16.00 60.48 10/31/12 10/31/12 8.00 30.24 11/01/12 11/01/12 8.00 30.24 11/02/12 11/02/12 20.00 75.60 CLAIM TOTAL 196.56 CLAIM ACCOUNT REF. 2155900012009790 |
| REG LOC CLIENT SERVICE NAME 001 2011599 2011599 DELEON | JUANA 04/18/1918 GNT04795000 |
| INV # LINE # PROCEDURE CODE 215591 | FROM DT THRU DT UNITS AMOUNT 10/23/12 10/23/12 24.00 90.72 10/24/12 10/24/12 24.00 90.72 10/25/12 10/25/12 24.00 90.72 10/30/12 10/30/12 24.00 90.72 10/31/12 10/31/12 24.00 90.72 11/01/12 11/01/12 24.00 90.72 11/02/12 11/02/12 24.00 90.72 11/02/12 11/02/12 11.00 90.72 10/22/12 10/22/12 1.00 100.00 CLAIM TOTAL 735.04 CLAIM ACCOUNT REF. 2155910012011599 |
| REG LOC CLIENT SERVICE NAME 001 2006667 2006667 DIAZ | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ALICIA 09/21/1918 GNT05048800 |
| INV # LINE # PROCEDURE CODE 215592 1 T1019 215592 2 T1019 215592 3 T1019 215592 4 T1019 215592 5 T1019 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 20.00 75.60 10/28/12 10/28/12 13.00 49.14 10/31/12 10/31/12 28.00 105.84 11/01/12 11/01/12 28.00 105.84 11/02/12 11/02/12 28.00 105.84 CLAIM TOTAL 442.26 CLAIM ACCOUNT REF. 2155920012006667 |
| REG LOC CLIENT SERVICE NAME 001 2004554 2004554 DONOSO | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MARGARE 09/17/1938 GNT01219900 |
| INV # LINE # PROCEDURE CODE 215593 1 S5125 215593 2 S5125 215593 3 S5125 | FROM DT THRU DT UNITS AMOUNT 10/31/12 10/31/12 19.00 71.82 11/01/12 11/01/12 19.00 71.82 11/02/12 11/02/12 24.00 90.72 CLAIM TOTAL 234.36 CLAIM ACCOUNT REF. 2155930012004554 |
| REG LOC CLIENT SERVICE NAME 001 2011256 2011256 DURAN | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # CARMEN 07/16/1925 GNT06350900 |

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|---|---|---|-------------------------|--|--|--|--|------------------------|---------------------|
| | | NYSI 502051 SUN | SUNNYSIDE NNYSIDE | | | NP | I = 1154 | 407492 | |
| 215594 | 1 | S5125 | | 11/02/12 | 11/02/12 CLA | 26.00 IM TOTAL | 98.28 98.28 | | F. 2155940012011256 |
| | CLIENT 2006124 | SERVICE 2006124 | | ALBERTH 06/ | /25/1947 | GNT04981500 | | AUTHORIZATION # | |
| INV # 215595 215595 | LINE # 1 2 | PROCEDURE S5125 S5125 | CODE | FROM DT 10/27/12 10/31/12 | THRU DT 10/27/12 10/31/12 CLA | UNITS 24.00 28.00 IM TOTAL | AMOUNT 90.72 105.84 196.56 | CLAIM ACCOUNT RE | F. 2155950012006124 |
| | CLIENT 2006124 | SERVICE 2006124 | NAME EARLINGTON | BIF ALBERTH 06/ | RTH DATE /25/1947 | RECIPIENT ID GNT04981500 | PRIOR | AUTHORIZATION # | |
| INV # 215596 215596 | LINE # 1 2 | PROCEDURE S5125 S5125 | CODE | FROM DT 11/01/12 11/02/12 | THRU DT 11/01/12 11/02/12 CLA | UNITS 28.00 28.00 IM TOTAL | AMOUNT 105.84 105.84 211.68 | | F. 2155960012006124 |
| REG LOC 001 | CLIENT 2009394 | SERVICE 2009394 | NAME ECKMAN | LOIS 81F | 02/1919 | GNT05317600 | | AUTHORIZATION # | |
| INV # 215597 215597 215597 215597 215597 215597 215597 | LINE # 1 2 3 4 5 6 7 | PROCEDURE T1020 T1020 T1020 T1020 T1020 T1020 T1020 T1020 | CODE | FROM DT 10/27/12 10/28/12 10/29/12 10/30/12 10/31/12 11/01/12 11/02/12 | THRU DT 10/27/12 10/28/12 10/29/12 10/30/12 10/31/12 11/01/12 11/02/12 CLA | UNITS 1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.0 | AMOUNT 196.56 196.56 196.56 196.56 196.56 196.56 | CLAIM ACCOUNT REI | F. 2155970012009394 |
| REG LOC 001 | CLIENT 2003052 | SERVICE 2003052 | NAME ESCOBAR | BIF DOMINGA 08/ | RTH DATE /04/1937 | RECIPIENT ID GNT04459300 | PRIOR | AUTHORIZATION # | |
| INV # 215598 215598 215598 215598 215598 | LINE # 1 2 3 4 5 | PROCEDURE S5125 S5125 S5125 S5125 S5125 | CODE | FROM DT 10/22/12 10/23/12 10/24/12 10/25/12 10/26/12 | THRU DT 10/22/12 10/23/12 10/24/12 10/25/12 10/26/12 | UNITS 24.00 24.00 24.00 24.00 24.00 | AMOUNT 90.72 90.72 90.72 90.72 90.72 453.60 | GLADY AGGODATE DE | 2 2155000012002052 |
| REG LOC | CLIENT 2007377 | SERVICE 2007377 | NAME | BIF MARIA 02/ | CLA (TH DATE | RECIPIENT ID | | AUTHORIZATION # | F. 2155980012003052 |
| INV # 215599 215599 | LINE # 1 2 | PROCEDURE S5125 S5125 | CODE | FROM DT 10/27/12 10/31/12 | THRU DT 10/27/12 10/31/12 CLA | UNITS 30.00 30.00 IM TOTAL | AMOUNT 113.40 113.40 226.80 | CLAIM ACCOUNT REA | F. 2155990012007377 |
| REG LOC 001 | CLIENT 2007377 | SERVICE 2007377 | NAME ESPINOZA | MARIA 02/ | TH DATE /23/1918 | RECIPIENT ID GNT03780300 | PRIOR | AUTHORIZATION # | |

FROM DT THRU DT

UNITS

AMOUNT

INV # LINE # PROCEDURE CODE

| REPORT DATE 11/07/12 SUNNYSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 5 INPUT FILE = /VOL444/COMPSUP/HIPAAIN/E3202012110706180965 | | | | | | | | |
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| 215600 1 S5125 215600 2 S5125 | 11/01/12 11/01/12 30.00 11/02/12 11/02/12 30.00 CLAIM TOTAL | 113.40 113.40 226.80 CLAIM ACCOUNT REF. 2156000012007377 | | | | | | |
| REG LOC CLIENT SERVICE NAME 001 2011220 EXPOSITO | BIRTH DATE RECIPIENT ID 07/28/1924 2011220 | PRIOR AUTHORIZATION # | | | | | | |
| INV # LINE # PROCEDURE CODE 215601 1 T1019 215601 2 T1019 215601 3 T1019 | FROM DT THRU DT UNITS 10/27/12 10/27/12 32.00 10/28/12 10/28/12 32.00 10/31/12 10/31/12 31.00 CLAIM TOTAL | AMOUNT 120.96 120.96 117.18 359.10 CLAIM ACCOUNT REF. 2156010012011220 | | | | | | |
| REG LOC CLIENT SERVICE NAME 001 2011220 2011220 EXPOSITO | BIRTH DATE RECIPIENT ID 07/28/1924 2011220 | PRIOR AUTHORIZATION # | | | | | | |
| INV # LINE # PROCEDURE CODE 215602 1 T1019 | FROM DT THRU DT UNITS 11/02/12 11/02/12 32.00 CLAIM TOTAL | AMOUNT 120.96 120.96 CLAIM ACCOUNT REF. 2156020012011220 | | | | | | |
| REG LOC CLIENT SERVICE NAME 001 2000600 2000600 FELICIANO | JOAN BIRTH DATE RECIPIENT ID GNT04140800 | PRIOR AUTHORIZATION # | | | | | | |
| INV # LINE # PROCEDURE CODE 215603 | FROM DT THRU DT UNITS 10/27/12 10/27/12 16.00 10/28/12 10/28/12 16.00 10/31/12 10/31/12 24.00 11/01/12 11/01/12 24.00 11/02/12 11/02/12 24.00 CLAIM TOTAL | AMOUNT 60.48 60.48 90.72 90.72 90.72 393.12 CLAIM ACCOUNT REF. 2156030012000600 | | | | | | |
| REG LOC CLIENT SERVICE NAME 001 2008314 2008314 FERNANDEZ | BIRTH DATE RECIPIENT ID ANA 08/14/1947 GNT05242300 | PRIOR AUTHORIZATION # | | | | | | |
| INV # LINE # PROCEDURE CODE 215604 1 S5125 215604 2 S5125 215604 3 S5125 215604 4 S5125 215604 5 S5125 215604 6 S5125 215604 7 S5125 | FROM DT THRU DT UNITS 10/12/12 10/12/12 16.00 10/26/12 10/26/12 16.00 10/27/12 10/27/12 16.00 10/28/12 10/28/12 16.00 10/31/12 10/31/12 16.00 11/01/12 11/01/12 16.00 11/02/12 11/02/12 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. 2156040012008314 | | | | | | |
| REG LOC CLIENT SERVICE NAME 001 2009960 FERRARA | BIRTH DATE RECIPIENT ID O7/27/1925 GNT05748600 | PRIOR AUTHORIZATION # | | | | | | |
| INV # LINE # PROCEDURE CODE 215605 1 S5125 215605 2 S5125 215605 3 S5125 | FROM DT THRU DT UNITS 10/27/12 10/27/12 24.00 10/31/12 10/31/12 32.00 11/01/12 11/01/12 32.00 | AMOUNT 90.72 120.96 120.96 | | | | | | |

| REPORT DATE 11 INPUT FILE = / | | SUNNYSIDE /HIPAAIN/E32020121 | | | HIPAA | DATA FIL | LE REPORT (PHLT837/EDIS |) PAGE 6 |
|--|---|---------------------------------|---|--|--|---|------------------------------------|------------------|
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| 215605 | 4 S5125 | | 11/02/12 | | 32.00 IM TOTAL | 120.96 453.60 | CLAIM ACCOUNT REF. | 2156050012009960 |
| REG LOC CLI 001 2009 | | NAME FERRO JOS | | TH DATE 09/1915 | RECIPIENT ID GNT05940400 | PRIOR | AUTHORIZATION # | |
| 215606 215606 215606 215606 215606 | 1 T1019 2 T1019 3 T1019 4 T1019 5 T1019 6 T1019 7 T1019 | NAME GONZALEZ MO RAM | | 10/28/12 10/29/12 10/30/12 10/31/12 11/01/12 11/02/12 | 16.00 48.00 48.00 48.00 48.00 48.00 | AMOUNT 90.72 60.48 181.44 181.44 181.44 181.44 1,058.40 PRIOR | CLAIM ACCOUNT REF. AUTHORIZATION # | 2156060012009589 |
| INV # LINE 215607 | # PROCEDURE 1 | | FROM DT 10/27/12 10/28/12 BIR | THRU DT 10/27/12 10/28/12 | UNITS 16.00 | AMOUNT 60.48 60.48 120.96 PRIOR | CLAIM ACCOUNT REF. AUTHORIZATION # | 2156070012011662 |
| 215608 215608 | # PROCEDURE 1 S5125 2 S5125 3 S5125 4 S5125 | : CODE | FROM DT 10/27/12 10/28/12 10/29/12 10/31/12 | 10/28/12 10/29/12 10/31/12 | 20.00 4.00 | AMOUNT 75.60 75.60 15.12 75.60 241.92 | CLAIM ACCOUNT REF. | 2156080012010494 |
| REG LOC CLI 001 2010 | | NAME GREENSPAN ALI | | TH DATE 15/1942 | RECIPIENT ID GNT04498400 | PRIOR | AUTHORIZATION # | |

| REG LOC 001 | CLIENT 2010494 | SERVICE 2010494 | NAME GREENSPAN | ALICE | | RTH DATE /15/1942 | RECIPIENT ID GNT04498400 | PRIOR | AUTHORIZATION # |
|---------------------------|-------------------|-----------------------------|-------------------|---------|--------------------|----------------------|--------------------------|-------------------------------------|-----------------|
| INV # 215609 215609 | LINE # 1 2 | PROCEDURE S5125 S5125 | CODE | , - | DT 1/12 2/12 | | | AMOUNT 75.60 75.60 151.20 | |
| REG LOC 001 | CLIENT 2011600 | SERVICE 2011600 | NAME GUZMAN | EDELMIR | | RTH DATE /19/1944 | RECIPIENT ID GNT03023100 | PRIOR | AUTHORIZATION # |
| INV # 215610 215610 | LINE # 1 2 | PROCEDURE S5125 T1001 | CODE | - , - | DT 1/12 2/12 | - , , | | AMOUNT 60.48 100.00 160.48 | |
| REG LOC 001 | CLIENT 2011472 | SERVICE 2011472 | NAME HENLEY | LUVENIA | | RTH DATE /23/1927 | RECIPIENT ID GNT06160900 | PRIOR | AUTHORIZATION # |
| INV # | LINE # | PROCEDURE | CODE | FROM | DT | THRU DT | UNITS | AMOUNT | |

| REPORT DATE 11/0 | 7/12 SUNN | YSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 7 |
|--|--|---|
| INPUT FILE = /VC | L444/COMPSUP/HIPAAIN/E320 | YSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 7 2012110706180965 |
| SUBMITTER ID = S | | |
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| REG LOC CLIEN 001 201125 | | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # TERESA 10/15/1938 GNT06350600 |
| INV # LINE # 215612 1 | PROCEDURE CODE S5125 | FROM DT THRU DT UNITS AMOUNT 11/02/12 11/02/12 26.00 98.28 CLAIM TOTAL 98.28 CLAIM ACCOUNT REF. 2156120012011252 |
| REG LOC CLIEN 001 201098 | | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # SIMONA 09/19/1938 GNT0360570 |
| INV # LINE # 215613 1 215613 2 215613 3 215613 4 | PROCEDURE CODE T1019 T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 32.00 120.96 10/28/12 10/28/12 32.00 120.96 11/01/12 11/01/12 32.00 120.96 11/02/12 11/02/12 32.00 120.96 CLAIM TOTAL 483.84 CLAIM ACCOUNT REF. 2156130012010983 |
| REG LOC CLIEN 001 201160 | | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PATRICI 08/10/1960 GNT04501100 |
| INV # LINE # 215614 1 215614 2 215614 3 | PROCEDURE CODE T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/31/12 10/31/12 20.00 75.60 11/01/12 11/01/12 20.00 75.60 11/02/12 11/02/12 20.00 75.60 CLAIM TOTAL 226.80 CLAIM ACCOUNT REF. 2156140012011601 |
| REG LOC CLIEN 001 200325 | | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # EUGENIA 03/15/1931 GNT04164400 |
| INV # LINE # 215615 1 215615 2 215615 3 215615 4 | PROCEDURE CODE T1019 T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/28/12 10/28/12 46.00 173.88 10/29/12 10/29/12 46.00 173.88 10/30/12 10/30/12 46.00 173.88 10/31/12 10/31/12 46.00 173.88 CLAIM TOTAL 695.52 CLAIM ACCOUNT REF. 2156150012003254 |
| REG LOC CLIEN 001 200608 | | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # DOROTHY 03/14/1932 GNT04334500 |
| INV # LINE # | PROCEDURE CODE | FROM DT THRU DT UNITS AMOUNT |

| REPORT DATE 11/07/1 INPUT FILE = /VOL44 | L2 SUNNY 14/COMPSUP/HIPAAIN/E3202 | SIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 8 012110706180965 |
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| REG LOC CLIENT 001 2006080 | SERVICE NAME 2006080 JOHNSON | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # DOROTHY 03/14/1932 GNT04334500 |
| INV # LINE # 215617 1 215617 2 | PROCEDURE CODE S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 11/01/12 11/01/12 32.00 120.96 11/02/12 11/02/12 32.00 120.96 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2156170012006080 |
| REG LOC CLIENT 001 2011694 | SERVICE NAME 2011694 LORA | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # FERNAND 08/20/1935 GNT03342600 |
| INV # LINE # 215618 1 215618 2 215618 3 215618 4 | PROCEDURE CODE S5125 S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/30/12 10/30/12 32.00 120.96 10/31/12 10/31/12 32.00 120.96 11/01/12 11/01/12 32.00 120.96 11/02/12 11/02/12 24.00 90.72 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2156180012011694 |
| REG LOC CLIENT 001 2002713 | SERVICE NAME 2002713 MANGRAY | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # KARMADA 02/10/1937 GNT04443200 |
| INV # LINE # 215619 1 | PROCEDURE CODE T1019 | FROM DT THRU DT UNITS AMOUNT 10/31/12 10/31/12 32.00 120.96 CLAIM TOTAL 120.96 CLAIM ACCOUNT REF. 2156190012002713 |
| REG LOC CLIENT 001 2002713 | SERVICE NAME 2002713 MANGRAY | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 02/10/1937 GNT04443200 |
| 215620 1 | PROCEDURE CODE T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 11/01/12 11/01/12 32.00 120.96 11/02/12 11/02/12 32.00 120.96 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2156200012002713 |
| REG LOC CLIENT 001 2011663 | SERVICE NAME 2011663 MARTIN | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # RUTH 08/25/1927 GNT06371400 |
| INV # LINE # 215621 1 | PROCEDURE CODE S5125 | FROM DT THRU DT UNITS AMOUNT 10/26/12 10/26/12 4.00 15.12 |

| INPUT FIL | LE = /VOL4 | 12 SUNI 144/COMPSUP/HIPAAIN/E320 | 2012110706180965 |
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| | | NYSI SUNNYSII 502051 SUNNYSIDE | E NPI = 1154407492 |
| 215621 | 2 | S5126 | 11/02/12 11/02/12 1.00 196.56 CLAIM TOTAL 211.68 CLAIM ACCOUNT REF. 2156210012011663 |
| REG LOC 001 | 2006830 | | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 05/09/1920 GNT05091300 |
| INV # 215622 215622 215622 215622 215622 | LINE # 1 2 3 4 5 | PROCEDURE CODE T1019 T1019 T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 24.00 90.72 10/30/12 10/30/12 24.00 90.72 10/31/12 10/31/12 24.00 90.72 11/01/12 11/01/12 24.00 90.72 11/02/12 11/02/12 24.00 90.72 CLAIM TOTAL 453.60 CLAIM ACCOUNT REF. 2156220012006830 |
| | CLIENT | SERVICE NAME 2009202 MARTINEZ | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # GLORIA 04/10/1937 GNT00444700 |
| INV # 215623 215623 215623 | LINE # 1 2 3 | PROCEDURE CODE S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/31/12 10/31/12 20.00 75.60 11/01/12 11/01/12 19.00 71.82 11/02/12 11/02/12 20.00 75.60 CLAIM TOTAL 223.02 CLAIM ACCOUNT REF. 2156230012009202 |
| REG LOC 001 | CLIENT 2011036 | SERVICE NAME 2011036 MASSOL | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PEDRO A 09/08/1934 GNT04564600 |
| INV # 215624 | LINE # 1 | PROCEDURE CODE S5125 | FROM DT THRU DT UNITS AMOUNT 10/31/12 10/31/12 20.00 75.60 CLAIM TOTAL 75.60 CLAIM ACCOUNT REF. 2156240012011036 |
| REG LOC 001 | CLIENT 2011036 | SERVICE NAME 2011036 MASSOL | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # PEDRO A 09/08/1934 GNT04564600 |
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| | 2011658 | SERVICE NAME 2011658 MAXIMINA | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # LUIS 10/22/1941 GNT02759600 |
| INV # 215626 | LINE # 1 | PROCEDURE CODE T1019 | FROM DT THRU DT UNITS AMOUNT 11/02/12 11/02/12 24.00 90.72 CLAIM TOTAL 90.72 CLAIM ACCOUNT REF. 2156260012011658 |
| REG LOC 001 | CLIENT 2011350 | SERVICE NAME 2011350 MCQUAIL | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MAUREEN 10/23/1934 GNT06367800 |
| INV # 215627 215627 215627 | LINE # 1 2 3 | PROCEDURE CODE S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 40.00 151.20 10/28/12 10/28/12 40.00 151.20 10/29/12 10/29/12 40.00 151.20 |

| REPORT DA | TE 11/07/ LE = /VOL4 | 12 44/COMPSUP/HI | SUNNYS PAAIN/E32020 | SIDE CITYWIDE 1211070618096 | 5 | HIPAA | DATA FII | LE REPORT (PHLT837/EDIS) PAGE 10 |
|---|---|---|------------------------|--|--|--|--|-------------------------------------|
| SUBMITTER | SUBMITTER ID = SUNNYSI SUNNYSIDE PROVIDER ID = 113502051 SUNNYSIDE NPI = 1154407492 | | | | | | | |
| 215627 215627 215627 | 4 5 6 | S5125 S5125 S5125 | | 10/31/12 | 10/30/12 10/31/12 11/02/12 CLF | 2 40.00 | 151.20 151.20 151.20 907.20 | CLAIM ACCOUNT REF. 2156270012011350 |
| REG LOC 001 | CLIENT 2005943 | | AME IICHEL | | RTH DATE /05/1930 | RECIPIENT ID GNT03107500 | PRIOR | AUTHORIZATION # |
| INV # 215628 215628 215628 215628 215628 215628 | LINE # 1 2 3 4 5 6 | PROCEDURE CO S5125 S5125 S5125 S5125 S5125 S5125 S5125 | DE | 10/28/12 10/30/12 10/31/12 11/01/12 | THRU DT 10/27/12 10/28/12 10/30/12 10/31/12 11/01/12 11/02/12 CLP | 2 32.00 2 32.00 2 32.00 2 32.00 | AMOUNT 120.96 120.96 120.96 120.96 120.96 120.96 725.76 | CLAIM ACCOUNT REF. 2156280012005943 |
| REG LOC 001 | CLIENT 2010425 | | AME ONCRIEF | | RTH DATE /29/1926 | RECIPIENT ID GNT06140100 | PRIOR | AUTHORIZATION # |
| INV # 215629 215629 215629 215629 215629 | LINE # 1 2 3 4 5 | PROCEDURE CO S5125 S5125 S5125 S5125 S5125 S5125 | DE | 10/28/12 10/31/12 11/01/12 | THRU DT 10/27/12 10/28/12 10/31/12 11/01/12 11/02/12 CLA | 2 32.00 2 32.00 2 32.00 | AMOUNT 120.96 120.96 120.96 120.96 120.96 604.80 | CLAIM ACCOUNT REF. 2156290012010425 |
| REG LOC 001 | CLIENT 2008149 | | AME OSCICKA | | RTH DATE /07/1916 | RECIPIENT ID GNT04975800 | PRIOR | AUTHORIZATION # |
| INV # 215630 215630 215630 215630 | LINE # 1 2 3 4 | PROCEDURE CO T1019 T1019 T1019 T1019 | DE | 10/28/12 10/29/12 | THRU DT 10/27/12 10/28/12 10/29/12 11/02/12 CLF | 2 48.00 2 48.00 | AMOUNT 181.44 181.44 181.44 120.96 665.28 | CLAIM ACCOUNT REF. 2156300012008149 |
| REG LOC 001 | CLIENT 2002162 | | AME USCAT | | RTH DATE /28/1927 | RECIPIENT ID GNT04082300 | PRIOR | AUTHORIZATION # |
| INV # 215631 215631 | LINE # 1 2 | PROCEDURE CO T1019 T1019 | DE | , . , | THRU DT 11/01/12 11/02/12 CLA | | AMOUNT 75.60 75.60 151.20 | CLAIM ACCOUNT REF. 2156310012002162 |
| REG LOC 001 | CLIENT 2002531 | | AME EWBOLD | | RTH DATE /24/1934 | RECIPIENT ID GNT04415000 | PRIOR | AUTHORIZATION # |
| INV # 215632 | LINE # | PROCEDURE CO S5125 | DE | FROM DT 10/29/12 | THRU DT 10/29/12 | UNITS 2 20.00 | AMOUNT 75.60 | |

| REPORT DA | TE 11/07/ | 12 | SUNNY | SIDE CITYWIDE 012110706180965 | | HIPAA | DATA FII | LE REPORT (PHLT837/EDIS) | PAGE 11 |
|------------------|-----------|----------------|----------------|----------------------------------|----------------------|--------------|-----------------|--------------------------|------------------|
| INPUT FIL | E = /VOL4 | 44/COMPSUP | /HIPAAIN/E3202 | 012110706180965 | | | | | |
| SUBMITTER | TD = SIIN | TRYK | SUNNYSIDE | | | | | | |
| | | 502051 SUI | | | | NP | I = 11544 | 107492 | |
| | | | | | | | | | |
| 215632 | 2 | S5125 | | 10/30/12 | | | 75.60 | | |
| 215632 | 3 | S5125 | | 10/31/12 | | | 75.60 | | |
| 215632 | 4 | S5125 | | 11/01/12 | | | 75.60 | | |
| 215632 | 5 | S5125 | | 11/02/12 | | | 75.60 | | 015600010000501 |
| | | | | | CLA | IM TOTAL | 378.00 | CLAIM ACCOUNT REF. | 2156320012002531 |
| REG LOC | CLIENT | SERVICE | NAME | ртр | TH DATE | RECIPIENT ID | DDTOD | AUTHORIZATION # | |
| 001 | 2010595 | 2010595 | NISHIMURA | | 01/1919 | GNT04994800 | INTOR | AUTHORIZATION # | |
| | | | | , | , | | | | |
| INV # | LINE # | PROCEDURE | CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |
| 215633 | 1 | S5125 | | 10/16/12 | | | 181.44 | | |
| 215633 | 2 | S5125 | | 10/17/12 | | | 90.72 | | |
| 215633 | 3 | S5125 | | 10/18/12 | | | 181.44 | | |
| 215633 | 4 | S5125 | | 10/20/12 | | | 181.44 | | |
| 215633 | 5 6 | S5125 | | 10/21/12 10/22/12 | 10/21/12 | | 181.44 | | |
| 215633 215633 | 7 | S5125 S5125 | | 10/22/12 | | | 90.72 181.44 | | |
| 215633 | 8 | S5125 | | 10/23/12 | | | 90.72 | | |
| 215633 | 9 | S5125 | | 10/25/12 | | | 181.44 | | |
| 215633 | 10 | S5125 | | 10/26/12 | | | 90.72 | | |
| 215633 | 11 | S5125 | | | 10/27/12 | | 181.44 | | |
| 215633 | 12 | S5125 | | 10/28/12 | | | 181.44 | | |
| 215633 | 13 | S5125 | | 10/31/12 | | | 90.72 | | |
| 215633 | 14 | S5125 | | 11/01/12 | | | 181.44 | | |
| 215633 | 15 | S5125 | | 11/02/12 | | | 90.72 | GT 3 TW 3 GGOTPUT DEE | 0156220010010505 |
| | | | | | CLA | IM TOTAL | 2,177.28 | CLAIM ACCOUNT REF. | 2156330012010595 |
| REG LOC | CLIENT | SERVICE | NAME | BTR | TH DATE | RECIPIENT ID | PRIOR | AUTHORIZATION # | |
| 001 | 2004768 | 2004768 | NUNEZ | | 01/1946 | GNT02920000 | TILLOIL | 1101110111211111011 | |
| | | | | | , | | | | |
| INV # | LINE # | PROCEDURE | CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |
| 215634 | 1 | T1019 | | 10/23/12 | | | 52.92 | | |
| 215634 | 2 | T1019 | | 10/30/12 | | | 60.48 | | |
| 215634 | 3 | T1019 | | 10/31/12 | | | 60.48 | | |
| 215634 215634 | 4 5 | T1019 T1019 | | 11/01/12 11/02/12 | | | 60.48 60.48 | | |
| 215034 | 5 | 11019 | | 11/02/12 | | IM TOTAL | 294.84 | CLAIM ACCOUNT REF. | 2156240012004769 |
| | | | | | CLIA | IIM TOTAL | 274.04 | CHAIM ACCOONT REF. | 2130340012004700 |
| REG LOC | CLIENT | SERVICE | NAME | BIR | TH DATE | RECIPIENT ID | PRIOR | AUTHORIZATION # | |
| 001 | 2009392 | 2009392 | NUNEZ | | 07/1963 | GNT05481000 | | | |
| | | | | | | | | | |
| INV # | LINE # | PROCEDURE | CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |
| 215635 | 1 | S5125 | | 10/19/12 | | | 60.48 | | |
| 215635 | 2 | S5125 | | 10/20/12 | | | 60.48 | | |
| 215635 | 3 | S5125 | | | 10/22/12 | | 60.48 | | |
| 215635 215635 | 4 5 | S5125 S5125 | | | 10/23/12 10/24/12 | | 60.48 60.48 | | |
| 215635 | 5 6 | S5125 S5125 | | 10/24/12 | | | 60.48 | | |
| 215635 | 7 | T1030 | | 10/23/12 | | | 85.00 | | |
| 223033 | , | 11000 | | 20/20/22 | | IM TOTAL | 447.88 | CLAIM ACCOUNT REF. | 2156350012009392 |
| | | | | | | | | · · | |
| REG LOC | CLIENT | SERVICE | NAME | | TH DATE | RECIPIENT ID | PRIOR | AUTHORIZATION # | |
| 001 | 2010198 | 2010198 | ORLANDO | ANNE 02/ | 09/1923 | GNT06098400 | | | |
| TATE !! | T TATE !! | DD00EDITE | CODE | EDOM DE | miiDii | IBITEO | 334011377 | | |
| INV # | LINE # | PROCEDURE | CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |

| REPORT DATE 11/07/12 | SUNNYSIDE CITYWIDE | HIPAA DATA FILE REPORT (PHLT837/EDIS) | PAGE 12 |
|----------------------|--------------------|---------------------------------------|---------|
|----------------------|--------------------|---------------------------------------|---------|

| REPORT DAT | | 12 SUNNY 44/COMPSUP/HIPAAIN/E3202 | SIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 12 012110706180965 |
|-----------------------------------|-------------------|---|---|
| SUBMITTER PROVIDER | | NYSI SUNNYSIDE 502051 SUNNYSIDE | NPI = 1154407492 |
| 215636 | 1 | T1019 | 10/31/12 10/31/12 20.00 75.60 CLAIM TOTAL 75.60 CLAIM ACCOUNT REF. 2156360012010198 |
| REG LOC 001 | CLIENT 2010198 | SERVICE NAME 2010198 ORLANDO | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # ANNE 02/09/1923 GNT06098400 |
| INV # 215637 215637 | LINE # 1 2 | PROCEDURE CODE T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 11/01/12 11/01/12 20.00 75.60 11/02/12 11/02/12 20.00 75.60 CLAIM TOTAL 151.20 CLAIM ACCOUNT REF. 2156370012010198 |
| REG LOC 001 | CLIENT 2005165 | SERVICE NAME 2005165 ORTIZ | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # LAURA 07/04/1919 GNT03867300 |
| INV # 215638 215638 215638 215638 | LINE # 1 2 3 4 5 | PROCEDURE CODE S5125 S5125 S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 36.00 136.08 10/28/12 10/28/12 36.00 136.08 10/29/12 10/29/12 36.00 136.08 10/30/12 10/30/12 36.00 136.08 10/31/12 10/31/12 36.00 136.08 10/31/12 10/31/12 36.00 136.08 CLAIM TOTAL 680.40 CLAIM ACCOUNT REF. 2156380012005165 |
| REG LOC 001 | CLIENT 2011657 | SERVICE NAME 2011657 ORTIZ | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # MERCEDE 11/03/1932 GNT05073800 |
| INV # 215639 215639 | LINE # 1 2 | PROCEDURE CODE S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 11/01/12 11/01/12 28.00 105.84 11/02/12 11/02/12 28.00 105.84 CLAIM TOTAL 211.68 CLAIM ACCOUNT REF. 2156390012011657 |
| REG LOC 001 | CLIENT 2003087 | SERVICE NAME 2003087 PAPHITIS | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # RICHARD 05/14/1923 GNT03006300 |
| INV # 215640 | LINE # 1 | PROCEDURE CODE T1019 | FROM DT THRU DT UNITS AMOUNT 10/31/12 10/31/12 32.00 120.96 CLAIM TOTAL 120.96 CLAIM ACCOUNT REF. 2156400012003087 |
| REG LOC 001 | CLIENT 2003087 | SERVICE NAME 2003087 PAPHITIS | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # RICHARD 05/14/1923 GNT03006300 |
| INV # 215641 215641 | LINE # 1 2 | PROCEDURE CODE T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 11/01/12 11/01/12 32.00 120.96 11/02/12 11/02/12 32.00 120.96 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2156410012003087 |
| REG LOC 001 | CLIENT 2009576 | SERVICE NAME 2009576 PAZIOULIS | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # KLEONIK 10/16/1934 GNT04602500 |
| INV # 215642 215642 | LINE # 1 2 | PROCEDURE CODE S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/27/12 10/27/12 44.00 166.32 10/28/12 10/28/12 44.00 166.32 |

| | 11 (5 = 1 | 1.0 | | | | | | |
|-----------|-------------------|-----------------|---|------------|--------------------------|------------|--------------------------|--------------------------|
| REPORT DA | TE 11/07/ | 12 | SUNNYSIDE CITYWIDE AIN/E320201211070618096 | E | HIPAA | DATA FILE | REPORT (PHLT837/EDIS) | PAGE 13 |
| INPUL FIL | E = /VOL4 | 44/COMPSUP/HIPA | AIN/E3202012110/0618096 | 5 | | | | |
| SUBMITTER | ID = SUN | NYSI | SUNNYSIDE | | | | | |
| | | 502051 SUNNYSI | | | NPI | = 115440 | 7492 | |
| | | | | | | | | |
| 215642 | 3 | S5125 | | 10/29/12 | | 166.32 | | |
| 215642 | 4 | S5125 | | 10/30/12 | 44.00 | 166.32 | | |
| 215642 | 5 | S5125 | 10/31/12 | 10/31/12 | 44.00 | 166.32 | GT 3 TW 3 GGOTTE DEE 015 | F.C. 4.0.0.1.0.0.0.F.T.C |
| | | | | CLAI | M TOTAL | 831.60 | CLAIM ACCOUNT REF. 215 | 36420012009576 |
| REG LOC | CLIENT | SERVICE NAM | IE BT | RTH DATE | RECIPIENT ID | PRIOR A | UTHORIZATION # | |
| 001 | 2000140 | 2000140 PEN | | | GNT02097600 | I ICIOIC I | iornoitizminon ii | |
| | | | | , , | | | | |
| INV # | LINE # | PROCEDURE CODE | | THRU DT | UNITS | AMOUNT | | |
| 215643 | 1 | T1019 | | 10/27/12 | 32.00 | 120.96 | | |
| 215643 | 2 | T1019 | | 10/28/12 | 32.00 | 120.96 | | |
| 215643 | 3 | T1019 | | 10/30/12 | 28.00 | 105.84 | | |
| 215643 | 4 | T1019 | | 10/31/12 | 32.00 | 120.96 | | |
| 215643 | 5 | T1019 | | 11/01/12 | 32.00 | 120.96 | | |
| 215643 | 6 | T1019 | 11/02/12 | 11/02/12 | 32.00 | 120.96 | | |
| | | | | CLAI | M TOTAL | 710.64 | CLAIM ACCOUNT REF. 215 | 56430012000140 |
| REG LOC | CLIENT | SERVICE NAM | IE BTI | RTH DATE | RECIPIENT ID | PRIOR A | UTHORIZATION # | |
| 001 | 2009232 | 2009232 PER | | | 93703475500 | 1111011 | ormonization " | |
| | | | | , - , | | | | |
| INV # | LINE # | PROCEDURE CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |
| 215644 | 1 | T1019 | | 10/12/12 | 24.00 | 90.72 | | |
| 215644 | 2 | T1019 | 10/31/12 | 10/31/12 | 24.00 | 90.72 | | |
| | | | | CLAI | M TOTAL | 181.44 | CLAIM ACCOUNT REF. 215 | 56440012009232 |
| REG LOC | CLIENT | SERVICE NAM | TE DT: | RTH DATE | RECIPIENT ID | DDTOD 7 | UTHORIZATION # | |
| 001 | 2009232 | 2009232 PER | | | 93703475500 | PRIOR P | TOTHORIZATION # | |
| | 2007232 | 2007252 121 | | , 01, 1331 | 23703170300 | | | |
| INV # | LINE # | PROCEDURE CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |
| 215645 | 1 | T1019 | 11/01/12 | 11/01/12 | 24.00 | 90.72 | | |
| 215645 | 2 | T1019 | 11/02/12 | 11/02/12 | 24.00 | 90.72 | | |
| | | | | CLAI | M TOTAL | 181.44 | CLAIM ACCOUNT REF. 215 | 56450012009232 |
| DEG TOG | OT TENTE | CEDITOR NAM | | | DEGIDIENT ID | DDTOD A | HEHOD FRAMETON III | |
| REG LOC | CLIENT 2011411 | SERVICE NAM | | | RECIPIENT ID GNT02908700 | PRIOR A | UTHORIZATION # | |
| 001 | 2011411 | 2011411 PIC | CO ALXAM ODDAAL. | /14/1923 | GN102900700 | | | |
| INV # | LINE # | PROCEDURE CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |
| 215646 | 1 | T1019 | | 10/27/12 | 36.00 | 136.08 | | |
| 215646 | 2 | T1019 | 10/28/12 | 10/28/12 | 36.00 | 136.08 | | |
| 215646 | 3 | T1019 | 10/29/12 | 10/29/12 | 36.00 | 136.08 | | |
| 215646 | 4 | T1019 | 10/30/12 | 10/30/12 | 36.00 | 136.08 | | |
| 215646 | 5 | T1019 | 10/31/12 | 10/31/12 | 36.00 | 136.08 | | |
| 215646 | 6 | T1019 | | 11/01/12 | 36.00 | 136.08 | | |
| 215646 | 7 | T1019 | 11/02/12 | 11/02/12 | 36.00 | 136.08 | | |
| | | | | CLAI | M TOTAL | 952.56 | CLAIM ACCOUNT REF. 215 | 56460012011411 |
| REG LOC | CLIENT | SERVICE NAM | ידר יידר | RTH DATE | ספרחופאיי די | י מ∩דמת | UTHORIZATION # | |
| 001 | 2010606 | | | | GNT05972000 | PRIOR A | MINOKIZATION # | |
| | 2010000 | 2010000 PIN | VICTOR US | , 23, 1733 | 011103772000 | | | |
| INV # | LINE # | PROCEDURE CODE | FROM DT | THRU DT | UNITS | AMOUNT | | |
| 215647 | 1 | S5125 | 10/27/12 | 10/27/12 | 20.00 | 75.60 | | |
| 1 | | | | | | | | |

| REPORT DATE 11/07 INPUT FILE = /VOI | /12 SUNNYS 444/COMPSUP/HIPAAIN/E32020 | IDE CITYWIDE 12110706180965 | HIPAA DATA FIL | E REPORT (PHLT837/EDIS) PAGE 14 |
|---|---|---|---|-------------------------------------|
| SUBMITTER ID = SU PROVIDER ID = 11 | NNYSI SUNNYSIDE 3502051 SUNNYSIDE | | NPI = 11544 | 07492 |
| 215647 2 215647 3 | S5125 S5125 | 10/28/12 10/28/12 11/02/12 11/02/12 CLAIM | 20.00 75.60 20.00 75.60 TOTAL 226.80 | CLAIM ACCOUNT REF. 2156470012010606 |
| REG LOC CLIENT 001 2002109 | | BIRTH DATE REALICIA 09/18/1924 93 | ECIPIENT ID PRIOR 3700845900 | AUTHORIZATION # |
| INV # LINE # 215648 1 215648 2 215648 3 215648 4 215648 5 | PROCEDURE CODE \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT | FROM DT THRU DT 10/27/12 10/27/12 10/28/12 10/28/12 10/31/12 10/31/12 11/01/12 11/01/12 11/02/12 11/02/12 CLAIM | UNITS AMOUNT 12.00 48.36 12.00 48.36 12.00 48.36 12.00 48.36 12.00 48.36 TOTAL 241.80 | CLAIM ACCOUNT REF. 2156480012002109 |
| REG LOC CLIENT 001 2007728 | | | ECIPIENT ID PRIOR NT04361600 | AUTHORIZATION # |
| INV # LINE # 215649 1 215649 2 215649 3 215649 4 215649 5 | PROCEDURE CODE \$5125 TT \$5125 TT \$5125 TT \$5125 TT \$5125 TT | 10/27/12 10/27/12 10/28/12 10/28/12 | UNITS AMOUNT 16.00 64.48 16.00 64.48 20.00 80.60 20.00 80.60 20.00 80.60 TOTAL 370.76 | CLAIM ACCOUNT REF. 2156490012007728 |
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| INV # LINE # 215650 1 | PROCEDURE CODE T1019 | 10/27/12 10/27/12 | UNITS AMOUNT 15.00 56.70 TOTAL 56.70 | CLAIM ACCOUNT REF. 2156500012010917 |
| REG LOC CLIENT 001 2008453 | | | ECIPIENT ID PRIOR NT05473100 | AUTHORIZATION # |
| INV # LINE # 215651 1 215651 2 215651 3 | PROCEDURE CODE S5125 S5125 S5125 | FROM DT THRU DT 10/31/12 10/31/12 11/01/12 11/01/12 11/02/12 11/02/12 CLAIM | UNITS AMOUNT 16.00 60.48 16.00 60.48 16.00 60.48 TOTAL 181.44 | CLAIM ACCOUNT REF. 2156510012008453 |
| REG LOC CLIENT 001 1997785 | | | ECIPIENT ID PRIOR NT00533400 | AUTHORIZATION # |
| INV # LINE # 215652 1 215652 2 | PROCEDURE CODE S5125 S5125 | FROM DT THRU DT 11/01/12 11/01/12 11/02/12 11/02/12 CLAIM | UNITS AMOUNT 24.00 90.72 24.00 90.72 TOTAL 181.44 | CLAIM ACCOUNT REF. 2156520011997785 |
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| INV # LINE # | PROCEDURE CODE | FROM DT THRU DT | UNITS AMOUNT | |

| REPORT DATE 11/07/ INPUT FILE = /VOL4 | /12 SUNN 144/COMPSUP/HIPAAIN/E320 | YSIDE CITYWIDE HIPAA DATA FILE REPORT (PHLT837/EDIS) PAGE 15 |
|--|--|--|
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| PROVIDER ID = II. | SUZUJI SUNNISIDE | NF1 - 113440/492 |
| 215653 1 215653 2 215653 3 215653 4 215653 5 | S5125 S5125 S5125 S5125 S5125 | 10/27/12 10/27/12 28.00 105.84 10/28/12 10/28/12 28.00 105.84 10/31/12 10/31/12 28.00 105.84 11/01/12 11/01/12 28.00 105.84 11/02/12 11/02/12 28.00 105.84 CLAIM TOTAL 529.20 CLAIM ACCOUNT REF. 2156530012011659 |
| | | CLAIM IUIAL 529.20 CLAIM ACCOUNT REF. 2150530012011059 |
| REG LOC CLIENT 001 2011491 | SERVICE NAME 2011491 RIVERA | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 08/23/1943 GNT06231700 |
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| INV # LINE # 215655 1 215655 2 215655 3 215655 4 215655 5 215655 7 | PROCEDURE CODE T1019 T1019 T1019 T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/20/12 10/20/12 4.00 15.12 10/21/12 10/21/12 4.00 15.12 10/27/12 10/27/12 16.00 60.48 10/30/12 10/30/12 16.00 60.48 10/31/12 10/31/12 16.00 60.48 11/01/12 11/01/12 16.00 60.48 11/02/12 11/02/12 16.00 60.48 11/02/12 11/02/12 16.00 60.48 CLAIM TOTAL 332.64 CLAIM ACCOUNT REF. 2156550012010412 |
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| INV # LINE # 215657 1 215657 2 | PROCEDURE CODE T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 11/01/12 11/01/12 36.00 136.08 11/02/12 11/02/12 36.00 136.08 CLAIM TOTAL 272.16 CLAIM ACCOUNT REF. 2156570012007969 |
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| INV # LINE # PROCEDURE 0 215662 1 T1019 215662 2 T1019 215662 3 T1019 215662 4 T1019 215662 5 T1019 215662 6 T1019 215662 7 T1019 | 10 10 10 10 10 | OM DT THRU DT /21/12 10/21/12 /27/12 10/27/12 /29/12 10/29/12 /30/12 10/30/12 /31/12 10/31/12 /01/12 11/01/12 /02/12 11/02/12 CLP | 2 16.00 2 28.00 2 28.00 2 28.00 2 28.00 | AMOUNT 60.48 60.48 105.84 105.84 105.84 105.84 105.84 650.16 CLAIM ACC | COUNT REF. 2156620011997789 |
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| 215664 215664 215664 215664 215664 | 2 S! 3 S! 4 S! | 5125 5125 5125 5125 1001 | | 10/28/1 10/29/1 10/30/1 | 2 10/27/12 2 10/28/12 2 10/29/12 2 10/30/12 2 10/24/12 CLA | 2 48.00 2 48.00 2 48.00 | 181.44 181.44 181.44 181.44 100.00 825.76 | CLAIM ACCOUNT REF. 2156640012011597 |
| | | SERVICE 2008885 | NAME SOMRAJ | | BIRTH DATE 19/24/1973 | RECIPIENT ID GNT03813900 | PRIOR | AUTHORIZATION # |
| INV # LIN 215665 215665 215665 215665 215665 | 1 SS 2 SS 3 SS 4 SS | ROCEDURE 5125 5125 5125 5125 5125 | CODE | 10/23/1 10/25/1 10/28/1 | 2 10/21/12 2 10/23/12 2 10/25/12 2 10/28/12 2 10/31/12 | 2 16.00 2 16.00 2 16.00 | AMOUNT 60.48 60.48 60.48 60.48 302.40 | |
| | | SERVICE 2011050 | NAME TROISI | | BIRTH DATE 2/30/1925 | RECIPIENT ID GNT06177500 | PRIOR | AUTHORIZATION # |
| INV # LIN 215666 215666 215666 215666 | 1 T1 2 T1 3 T1 3 T1 | ROCEDURE 1019 1019 1019 1019 | CODE | 10/29/1 10/30/1 | 2 10/27/12 2 10/29/12 2 10/30/12 2 10/31/12 | 32.00 32.00 | AMOUNT 120.96 120.96 120.96 120.96 483.84 | CLAIM ACCOUNT REF. 2156660012011050 |
| | | SERVICE 2011050 | NAME TROISI | | BIRTH DATE .2/30/1925 | RECIPIENT ID GNT06177500 | PRIOR | AUTHORIZATION # |
| INV # LIN 215667 215667 | 1 T | ROCEDURE 1019 1019 | CODE | | .2 11/01/12 .2 11/02/12 | | AMOUNT 120.96 120.96 241.92 | CLAIM ACCOUNT REF. 2156670012011050 |
| | | SERVICE 2011483 | NAME VARGAS | | BIRTH DATE .0/23/1965 | RECIPIENT ID GNT02027100 | PRIOR | AUTHORIZATION # |
| INV # LIN 215668 215668 | 1 T | ROCEDURE 1001 1019 | CODE | | .2 10/04/12 .2 11/01/12 | | AMOUNT 100.00 90.72 190.72 | CLAIM ACCOUNT REF. 2156680012011483 |
| | | SERVICE 2008200 | NAME VLAHOS | | BIRTH DATE 19/04/1932 | RECIPIENT ID GNT04780800 | PRIOR | AUTHORIZATION # |
| INV # LIN 215669 215669 215669 | 1 SS | ROCEDURE 5125 5125 5125 | CODE | 10/28/1 | THRU DT 10/27/12 10/28/12 10/31/12 | 36.00 | AMOUNT 181.44 136.08 120.96 | |

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| REG LOC CLIENT 001 2008892 | SERVICE NAME 2008892 WEISZ | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # KLARA 06/27/1920 GNT04606900 |
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| REG LOC CLIENT 001 2009618 | SERVICE NAME 2009618 WEST | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # BALDWIN 09/14/1933 GNT05953700 |
| INV # LINE # 215672 1 215672 2 215672 3 215672 4 | PROCEDURE CODE T1019 T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/22/12 10/22/12 16.00 60.48 10/23/12 10/23/12 16.00 60.48 10/24/12 10/24/12 16.00 60.48 10/25/12 10/25/12 16.00 60.48 CLAIM TOTAL 241.92 CLAIM ACCOUNT REF. 2156720012009618 |
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| REG LOC CLIENT 001 2003177 | SERVICE NAME 2003177 WHITLEY | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # 07/04/1950 GNT04373700 |
| INV # LINE # 215674 1 215674 2 215674 3 | PROCEDURE CODE T1019 T1019 T1019 | FROM DT THRU DT UNITS AMOUNT 10/31/12 10/31/12 16.00 60.48 11/01/12 11/01/12 16.00 60.48 11/02/12 11/02/12 16.00 60.48 CLAIM TOTAL 181.44 CLAIM ACCOUNT REF. 2156740012003177 |
| REG LOC CLIENT 001 2006152 | SERVICE NAME 2006152 YI | BIRTH DATE RECIPIENT ID PRIOR AUTHORIZATION # CARLOS 04/16/1959 GNT04057700 |
| INV # LINE # 215675 1 215675 2 215675 3 215675 4 | PROCEDURE CODE S5125 S5125 S5125 S5125 | FROM DT THRU DT UNITS AMOUNT 10/20/12 10/20/12 16.00 60.48 10/21/12 10/21/12 16.00 60.48 10/23/12 10/23/12 16.00 60.48 10/24/12 10/24/12 12.00 45.36 |

| REPORT DA | , - , | 12 SUN 44/COMPSUP/HIPAAIN/E32 | NYSIDE CITYWIDE 02012110706180965 | HIPAA | DATA FILE REPORT (PHLT837/EDIS) PAGE | 19 |
|------------------|-------------------|------------------------------------|--------------------------------------|--------------------------|--|-----|
| SUBMITTER | | | | | | |
| | | 502051 SUNNYSIDE | | NP | I = 1154407492 | |
| 215675 215675 | 5 6 | S5125 S5125 | 10/25/12 10/25/ 10/26/12 10/26/ | | 60.48 60.48 | |
| 215675 | 7 | S5125 S5125 | 10/26/12 10/26/ | | 30.24 | |
| 215675 | 8 | S5125 | 10/28/12 10/28/ | 12 16.00 | 60.48 | |
| 215675 215675 | 9 10 | S5125 S5125 | 11/01/12 11/01/ 11/02/12 11/02/ | | 60.48 60.48 | |
| 2150/5 | 10 | 22172 | | LAIM TOTAL | 559.44 CLAIM ACCOUNT REF. 21567500120061 | 52 |
| REG LOC | CLIENT | SERVICE NAME | BIRTH DATE | RECIPIENT ID | PRIOR AUTHORIZATION # | |
| 001 | 2005645 | 2005645 YIANTSELIS | VIRGINI 02/05/1930 | GNT04795200 | | |
| INV # | LINE # | PROCEDURE CODE | FROM DT THRU D | | AMOUNT | |
| 215676 215676 | 1 2 | T1020 T1020 | 10/27/12 10/27/ 10/28/12 10/28/ | | 196.56 196.56 | |
| 215676 | 3 | T1020 | 10/28/12 10/28/ | | 196.56 | |
| 215676 | 4 | T1020 | 10/30/12 10/30/ | 12 1.00 | 196.56 | |
| 215676 | 5 | T1020 | 10/31/12 10/31/ | | 196.56 | 4 = |
| | | | C. | LAIM TOTAL | 982.80 CLAIM ACCOUNT REF. 21567600120056 | 45 |
| REG LOC 001 | CLIENT 2005645 | SERVICE NAME 2005645 YIANTSELIS | BIRTH DATE 02/05/1930 | RECIPIENT ID GNT04795200 | PRIOR AUTHORIZATION # | |
| INV # | LINE # | PROCEDURE CODE | FROM DT THRU D | T UNITS | AMOUNT | |
| 215677 | 1 | T1020 | 11/01/12 11/01/ | | 196.56 | |
| 215677 | 2 | T1020 | 11/02/12 11/02/ | 12 1.00 LAIM TOTAL | 196.56 393.12 CLAIM ACCOUNT REF. 21567700120056 | 45 |
| | | | | | | 15 |
| REG LOC 001 | CLIENT 2005645 | SERVICE NAME 2005645 YIANTSELIS | VIRGINI 02/05/1930 | RECIPIENT ID GNT04795200 | PRIOR AUTHORIZATION # | |
| INV # | LINE # | PROCEDURE CODE | FROM DT THRU D' | | AMOUNT | |
| 215678 | 1 | T1030 | 10/13/12 10/13/ | | 85.00 | 4 - |
| | | | C. | LAIM TOTAL | 85.00 CLAIM ACCOUNT REF. 21567800120056 | 45 |
| REG LOC 001 | CLIENT 1999328 | SERVICE NAME 1999328 ZUMAETA | FANNY BIRTH DATE 04/09/1936 | RECIPIENT ID GNT03663500 | PRIOR AUTHORIZATION # | |
| INV # | LINE # | PROCEDURE CODE | FROM DT THRU D' | T UNITS | AMOUNT | |
| 215679 | 1 | T1019 | 10/25/12 10/25/ | | 151.20 | |
| | | | C | LAIM TOTAL | 151.20 CLAIM ACCOUNT REF. 21567900119993 | 28 |
| REG LOC 001 | CLIENT 1999328 | SERVICE NAME 1999328 ZUMAETA | BIRTH DATE 04/09/1936 | RECIPIENT ID GNT03663500 | PRIOR AUTHORIZATION # | |
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| 215680 | 1 | T1019 | 11/02/12 11/02/ | | 151.20 | 0.0 |
| | | | C | LAIM TOTAL | 151.20 CLAIM ACCOUNT REF. 21568000119993 | 28 |
| PROVIDER | TOTALS, | ID = 113502051 | TOTAL # OF CLAIMS = | 373 | TOTAL CLAIM AMOUNT = 40,139.28 | |

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