

ITEMIZATION OF CHARGES

Date of Service	Services Included	Submitted Charges	Network Savings	Copay/ Deductible	Non-Covered	Notes	Paid Provider
08/16/21	Facility Ancillaries	266.80			266.80	XB6	
08/16/21	Facility Ancillaries	1,120.94			1,120.94	XB6	
08/16/21	Facility Ancillaries	2,241.88			2,241.88	XB6	
08/16/21	Facility Ancillaries	730.54			730.54	XB6	
08/16/21	Facility Ancillaries	261.10			261.10	XB6	
08/16/21	Facility Ancillaries	171.81			171.81	XB6	
08/16/21	Facility Ancillaries	171.81			171.81	XB6	
08/16/21	Facility Ancillaries	293.57			293.57	XB6	

* XB6 - Please submit a copy of the Explanation of Benefits from this member's other
* - insurance carrier.

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Date of Service	Services Included	Submitted Charges	Network Savings	Copay/ Deductible	Non-Covered	Notes Paid Provider
		254.33			254.33	XB6
08/16/21	Facility Ancillaries	924.01			924.01	XB6
08/16/21	Facility Ancillaries	1,804.71			1,804.71	XB6
08/16/21	Facility Ancillaries					
	TOTAL	8,241.50			8,241.50	