REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP

REMITTANCE ADVICE: October 2011

TOTAL PAYMENT (A+B)		3,233,066.89	2011-11-15
GROUP PAYMENTS			YEAR TO DATE
	ACCESS BONUS PAYMENT	300.56	463.24
	ACCESS BONUS RECONCILIATION	-55.00	-155.00
	LTC ACCESS BONUS	75.55	752.36
	LTC ACCESS BONUS RECONCILIATION	-40.20	-40.20
	GROUP MANAGEMENT LEADERSHIP PAYMENT	1,074.77	7,443.62
	TELEPHONE HEALTH ADVISORY SERVICE PYMT	2,000.00	14,000.00
	FFS CORE SERVICE PAYMENT CEILING ADJMT	-100.00	-200.00
EXCEPTION PAYMENTS		CURRENT MONTH	YEAR TO DATE
	OFFICE PRACTICE ADMINISTRATION PAYMENT	1,586.38	1,586.38
	ESTIMATED PAYMENT - UNPROCESSED CLAIMS	0.00	4,000.00
	HCC MANUAL PATIENT REGISTRATION PYMT	600.00	1,200.00
	PRIMARY CARE ACCOUNTING ADJUSTMENT	-2,400.00	-2,400.00
	RECOVERY - AUTOMATED ESTIMATED PAYMENT	-2,000.00	-4,000.00
ST JOSEPH'S HEALTH CENTRE 0B000	TOTAL GROUP + EXCEPTION PAYMENTS (A)	1,042.06	22,650.40

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REPORT: OHIP PAYMENT SUMMARY REPORT **FOR PERIOD (YYYY-MM-DD):** 2011-09-01 TO 2011-09-30

GROUP: AMBULATORY CARE

PAYMENT TO: GROUP

GROUP #: A250 **REMITTANCE ADVICE:** October 2011

GROUP PAYMENTS TO PROVIDER					
POLONYTSKY-SELIVERSTOV-NIMENKO, VASILI-VADIM-DMITRIY	010101		CURRENT MONTH	YEAR TO DATE	
		TOTAL CLAIMS PAYABLE	3,054.28	9,584.26	
		AGE PREMIUM PAYMENT	22.68	85.36	
		OMA DUES	-125.00	-125.00	
		PROCESSING CHARGE - MOH	-2.00	-6.00	
		PROCESSING CHARGE-HST (R#124668666)	-3.00	-9.00	
POLONYTSKY-SELIVERSTOV-NIMENKO, VASILI-VADIM-DMITRIY	010101	GROUP PAYMENTS TO PROVIDER TOTAL	2,946.96	9,529.62	

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REPORT: OHIP PAYMENT SUMMARY REPORT FOR PI

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

GROUP: AMBULATORY CARE

PAYMENT TO: GROUP

GROUP #: A250 **REMITTANCE ADVICE:** October 2011

GROUP PAYMENTS TO PROVIDER	L			
GNIDENKO, ARTEM	131313		CURRENT MONTH	YEAR TO DATE
		TOTAL CLAIMS PAYABLE	21,099.99	42,685.33
		AGE PREMIUM PAYMENT	14.88	96.25
		OMA DUES	0.00	-350.00
		PROCESSING CHARGE - MOH	0.00	-4.00
		PROCESSING CHARGE-HST (R#124668666)	0.00	-12.00
GNIDENKO, ARTEM	131313	GROUP PAYMENTS TO PROVIDER TOTAL	21,114.87	42,415.58

REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP

REMITTANCE ADVICE: October 2011

GROUP PAYMENTS TO PROVIDERS				
ST JOSEPH'S HEALTH CENTRE	0B000		CURRENT MONTH	YEAR TO DATE
		TOTAL CLAIMS PAYABLE	2,240,154.27	18,308,269.59
		AGE PREMIUM PAYMENT	992,000.56	7,134,181.61
		OMA DUES	-125.00	-475.00
		PROCESSING CHARGE - MOH	-2.00	-10.00
		PROCESSING CHARGE-HST (R#124668666)	-3.00	-21.00
ST JOSEPH'S HEALTH CENTRE	0B000	TOTAL GROUP PAYMENTS TO PROVIDERS (B)	3,232,024.83	25,441,945.20

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REPORT: OHIP PAYMENT SUMMARY REPORT **FOR PERIOD (YYYY-MM-DD):** 2011-09-01 TO 2011-09-30

GROUP: AMBULATORY CARE

PAYMENT TO: GROUP

GROUP #1 A3E0

GROUP #: A250 **REMITTANCE ADVICE:** October 2011

PROVIDER SUMMARY				
POLONYTSKY-SELIVERSTOV-NIMENKO, VASILI-VADIM-DMITRIY	010101		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
POLONYTSKY-SELIVERSTOV-NIMENKO, VASILI-VADIM-DMITRIY	010101	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
NAPNENKO, YEVGEN	020202		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
NAPNENKO, YEVGEN	020202	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
PETRUKHNO, DENIS	030303		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
PETRUKHNO, DENIS	030303	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
ALEKSYUK, VLADIMIR	040404		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
ALEKSYUK, VLADIMIR	040404	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
LIUTKEVICH, VITALY	050505		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
LIUTKEVICH, VITALY	050505	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
MIKHNOV, ANDRIY	060606		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
MIKHNOV, ANDRIY	060606	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
RAMAZANOV, SHAMIL	070707		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
RAMAZANOV, SHAMIL	070707	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
BONDARIEV, ARTEM	080808		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
BONDARIEV, ARTEM	080808	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

CHERNENKO, SERGEI

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

40,082.47

88,435.53

PAYMENT TO: GROUP
REMITTANCE ADVICE: October 2011

PROVIDER SUMMARY TOTAL

PROVIDER SUMMARY				
CHERNENKO, SERGEI	090909		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00

Report ID: Page: 13 of 18 Run Date: 2013-10-03 2:25 PM

090909

REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP
REMITTANCE ADVICE: October 2011

PROVIDER SUMMARY				
KARAULSHUK, ALEXANDER	101010		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
KARAULSHUK, ALEXANDER	101010	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
KVITCHENKO, MAXIM	111111		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
KVITCHENKO, MAXIM	111111	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDER SUMMARY				
BLAGY, ROMAN	121212		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	28,563.32	47,055.69
		BASE RATE PAYMENT RECONCILIATION ADJMT	0.00	-3,056.25
		COMP CARE CAPITATION	6,087.25	19,033.78
		COMP CARE RECONCILIATION	0.00	-256.85
		COMPLEX VULNERABLE CAPITATION PAYMENT	45.57	98.65
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-12.62
		BLENDED FEE-FOR-SERVICE PREMIUM	3,625.21	12,985.66
		BLENDED FEE-FOR-SERVICE PREMIUM	125.12	782.47
		PREVENTIVE CARE BONUS	1,000.00	8,500.00
		SPECIAL PREMIUM PAYMENT	200.00	1,200.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	250.00	750.00
		RURALITY GRADIENT PREMIUM	86.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-100.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	1,200.00
BLAGY, ROMAN	121212	PROVIDER SUMMARY TOTAL	40,082.47	88,435.53

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP

REMITTANCE ADVICE: October 2011

PROVIDER SUMMARY				
GNIDENKO, ARTEM	131313		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	32,656.36	69,258.45
		BASE RATE PAYMENT RECONCILIATION ADJMT	-12.04	-12.04
		COMP CARE CAPITATION	4,569.32	45,869.33
		COMP CARE RECONCILIATION	-18.56	-78.55
		COMPLEX VULNERABLE CAPITATION PAYMENT	4,785.26	52,362.14
		COMPLEX VULNERABLE CAPITATION ADJMT	0.00	-58.66
		BLENDED FEE-FOR-SERVICE PREMIUM	1,278.36	4,589.78
		BLENDED FEE-FOR-SERVICE PREMIUM	74.20	265.00
		PREVENTIVE CARE BONUS	100.00	1,100.00
		SPECIAL PREMIUM PAYMENT	800.00	1,600.00
		CONTINUING MEDCIAL EDUCATION PAYMENT	0.00	1,200.00
		RURALITY GRADIENT PREMIUM	255.00	255.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-55.00
		IN OFFICE SERVICE BONUS PAYMENT	100.00	900.00
GNIDENKO, ARTEM	131313	PROVIDER SUMMARY TOTAL	44,587.90	177,195.45

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REPORT: OHIP PAYMENT SUMMARY REPORT

GROUP: AMBULATORY CARE

GROUP #: A250

FOR PERIOD (YYYY-MM-DD): 2011-09-01 TO 2011-09-30

PAYMENT TO: GROUP October 2011

PROVIDERS SUMMARY				
ST JOSEPH'S HEALTH CENTRE	0B000		CURRENT MONTH	YEAR TO DATE
		NETWORK BASE RATE PAYMENT	61,219.68	116,314.14
		BASE RATE PAYMENT RECONCILIATION ADJMT	-12.04	-3,068.29
		COMP CARE CAPITATION	375,416.20	633,926.73
		COMP CARE RECONCILIATION	-12.04,-36	687.04
		COMPLEX VULNERABLE CAPITATION PAYMENT	77,616.32	274,274.69
		COMPLEX VULNERABLE CAPITATION ADJMT	-18.56	-3,160.75
		BLENDED FEE-FOR-SERVICE PREMIUM	5,332.10	53,545.94
		BLENDED FEE-FOR-SERVICE PREMIUM	0.00	-210.10
		PREVENTIVE CARE BONUS	44,780.88	160,417.70
		SPECIAL PREMIUM PAYMENT	1,575.64	9,654.64
		CONTINUING MEDCIAL EDUCATION PAYMENT	3,000.00	10,200.00
		RURALITY GRADIENT PREMIUM	1,287.00	3,315.00
		RURALITY GRADIENT ADJUSTMENT	0.00	-1,255.00
		IN OFFICE SERVICE BONUS PAYMENT	1,300.00	15,300.00
ST JOSEPH'S HEALTH CENTRE	0B000	TOTAL PROVIDERS SUMMARY	525,577.54	1,238,421.81

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