

TRANSMITTAL OF CLAIMS - (CASE PAYMENT CLAIMS)

Trans No. 18-10-18ES(ONCO)

GRAND TOTAL

445,819.00

213,710.00

SUMMARY					
CATEGORY	NO. OF CLAIMS		HOSPITAL FEE	PROF. FEE	TOTAL
PRIVATE EMPLOYED	2		6,600.00	2,400.00	9,000.00
GOV'R EMPLOYED	0		0.00	0.00	0.00
SELF-EMPLOYED	13		109,300.00	64,160.00	173,460.00
LIFETIME MEMBER	7		149,470.00	59,900.00	209,370.00
OFW-MEMBER	0		0.00	0.00	0.00
SPONSORED MEMBER	3		79,675.00	35,375.00	115,050.00
SENIOR CITIZEN	6		100,774.00	51,875.00	152,649.00
GRAND TOTAL	31		445,819.00	213,710.00	659,529.00