



PAID CLAIMS/EXPENSES SUMMARY
Product/Sub Group-8 Digit

INVOICE NUMBER: 230718587835
 BILL ACCOUNT NUMBER: CN02401002
 BILL ACCOUNT NAME: Admiral Peary
 CLIENT NUMBER: 0240
 CLIENT NAME: Admiral Peary

PAGE: 1 of 3
 PAID CLAIMS MONTH: July 2023
 CLAIMS PAID THRU: 07/14/2023
 BILL CYCLE: 2 of 4
 PREPARED DATE: 07/18/2023

Group	Paid Claims	Healthcare Adjustments	Capitation	Value Based Reimbursement	Paid Claims /Expenses
Drug					
014267-01	\$877.34	\$0.00	\$0.00	\$0.00	\$877.34
014267-03	\$5,234.78	\$0.00	\$0.00	\$0.00	\$5,234.78
014267-05	\$4,584.58	\$0.00	\$0.00	\$0.00	\$4,584.58
014267-06	\$1,626.55	\$0.00	\$0.00	\$0.00	\$1,626.55
014267-07	\$1,577.30	\$0.00	\$0.00	\$0.00	\$1,577.30
014267-08	\$887.57	\$0.00	\$0.00	\$0.00	\$887.57
014267-12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
014267-13	\$9.76	\$0.00	\$0.00	\$0.00	\$9.76
014267-15	\$2,848.83	\$0.00	\$0.00	\$0.00	\$2,848.83
014267-22	\$5.40	\$0.00	\$0.00	\$0.00	\$5.40
014267-26	\$315.48	\$0.00	\$0.00	\$0.00	\$315.48
014267-36	\$74.45	\$0.00	\$0.00	\$0.00	\$74.45
014267-37	\$129.49	\$0.00	\$0.00	\$0.00	\$129.49
014267- Total	\$18,171.53	\$0.00	\$0.00	\$0.00	\$18,171.53
Drug Total	\$18,171.53	\$0.00	\$0.00	\$0.00	\$18,171.53
HDHP PPO					
014267-54	\$56,438.68	\$0.00	\$0.00	\$0.00	\$56,438.68
014267- Total	\$56,438.68	\$0.00	\$0.00	\$0.00	\$56,438.68
017697-00	\$3,901.74	\$0.00	\$0.00	\$0.00	\$3,901.74
017697-01	\$903.30	\$0.00	\$0.00	\$0.00	\$903.30
017697-10	\$250.52	\$0.00	\$0.00	\$0.00	\$250.52
017697-70	\$1,081.57	\$0.00	\$0.00	\$0.00	\$1,081.57
017697- Total	\$6,137.13	\$0.00	\$0.00	\$0.00	\$6,137.13
017728-00	\$329.52	\$0.00	\$0.00	\$0.00	\$329.52
017728- Total	\$329.52	\$0.00	\$0.00	\$0.00	\$329.52

~Products marked with an (*) are not products of our company. Billing for these products is included for your convenience.

Group	Paid Claims	Healthcare Adjustments	Capitation	Value Based Reimbursement	Paid Claims /Expenses
104272-02	\$22,480.19	\$0.00	\$0.00	\$0.00	\$22,480.19
104272-09	\$5,356.37	\$0.00	\$0.00	\$0.00	\$5,356.37
104272-12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
104272- Total	\$27,836.56	\$0.00	\$0.00	\$0.00	\$27,836.56
HDHP PPO Total	\$90,741.89	\$0.00	\$0.00	\$0.00	\$90,741.89
Major Medical					
053264-01	\$21.99	\$0.00	\$0.00	\$0.00	\$21.99
053264- Total	\$21.99	\$0.00	\$0.00	\$0.00	\$21.99
Major Medical Total	\$21.99	\$0.00	\$0.00	\$0.00	\$21.99
PPO					
014267-01	\$7,256.03	\$0.00	\$0.00	\$0.00	\$7,256.03
014267-03	\$34,536.40	\$0.00	\$0.00	\$0.00	\$34,536.40
014267-05	\$12,740.22	\$0.00	\$0.00	\$0.00	\$12,740.22
014267-06	\$1,570.16	\$0.00	\$0.00	\$0.00	\$1,570.16
014267-07	\$8,502.21	\$0.00	\$0.00	\$0.00	\$8,502.21
014267-08	\$1,481.44	\$0.00	\$0.00	\$0.00	\$1,481.44
014267-12	\$525.47	\$0.00	\$0.00	\$0.00	\$525.47
014267-13	\$69.55	\$0.00	\$0.00	\$0.00	\$69.55
014267-15	\$1,032.83	\$0.00	\$0.00	\$0.00	\$1,032.83
014267-22	\$103.00	\$0.00	\$0.00	\$0.00	\$103.00
014267-26	\$615.60	\$0.00	\$0.00	\$0.00	\$615.60
014267-36	\$14,805.14	\$0.00	\$0.00	\$0.00	\$14,805.14
014267-37	\$2,564.26	\$0.00	\$0.00	\$0.00	\$2,564.26
014267- Total	\$85,802.31	\$0.00	\$0.00	\$0.00	\$85,802.31
PPO Total	\$85,802.31	\$0.00	\$0.00	\$0.00	\$85,802.31
Professional					
053264-01	\$654.90	\$0.00	\$0.00	\$0.00	\$654.90
053264- Total	\$654.90	\$0.00	\$0.00	\$0.00	\$654.90
Professional Total	\$654.90	\$0.00	\$0.00	\$0.00	\$654.90

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Group	Paid Claims	Healthcare Adjustments	Capitation	Value Based Reimbursement	Paid Claims /Expenses
<hr/> Paid Claims/Expenses Summary Total					\$195,392.62

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