



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

INVOICE NUMBER: 250708581712  
 BILL ACCOUNT NUMBER: CN02401002  
 BILL ACCOUNT NAME: Admiral Peary  
 CLIENT NUMBER: 0240  
 CLIENT NAME: Admiral Peary

PAGE: 1 of 2  
 PAID CLAIMS MONTH: July 2025  
 CLAIMS PAID THRU: 07/04/2025  
 BILL CYCLE: 1 of 4  
 PREPARED DATE: 07/08/2025

Group	Paid Claims	Healthcare Adjustments	Capitation	Value Based Reimbursement	Paid Claims /Expenses
<b>Drug</b>					
014267-01	\$0.56	\$0.00	\$0.00	\$0.00	\$0.56
014267-03	\$14,021.60	\$0.00	\$0.00	\$0.00	\$14,021.60
014267-05	\$5,778.42	\$0.00	\$0.00	\$0.00	\$5,778.42
014267-06	\$34,354.06	\$0.00	\$0.00	\$0.00	\$34,354.06
014267-07	\$3,144.36	\$0.00	\$0.00	\$0.00	\$3,144.36
014267-08	\$1,103.03	\$0.00	\$0.00	\$0.00	\$1,103.03
014267-12	\$938.43	\$0.00	\$0.00	\$0.00	\$938.43
014267-13	\$19.94	\$0.00	\$0.00	\$0.00	\$19.94
014267-15	\$0.53	\$0.00	\$0.00	\$0.00	\$0.53
014267-26	\$1.82	\$0.00	\$0.00	\$0.00	\$1.82
014267-34	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
014267-36	\$3,167.91	\$0.00	\$0.00	\$0.00	\$3,167.91
014267-37	\$3,398.13	\$0.00	\$0.00	\$0.00	\$3,398.13
<b>014267- Total</b>	<b>\$65,928.79</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$65,928.79</b>
<b>Drug Total</b>	<b>\$65,928.79</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$65,928.79</b>
<b>HDHP PPO</b>					
014267-54	\$22,885.36	\$0.00	\$0.00	\$0.00	\$22,885.36
<b>014267- Total</b>	<b>\$22,885.36</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$22,885.36</b>
017697-00	\$17,048.88	\$0.00	\$0.00	\$0.00	\$17,048.88
017697-01	\$4,498.27	\$0.00	\$0.00	\$0.00	\$4,498.27
<b>017697- Total</b>	<b>\$21,547.15</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$21,547.15</b>
017728-00	\$3,721.49	\$0.00	\$0.00	\$0.00	\$3,721.49
<b>017728- Total</b>	<b>\$3,721.49</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$3,721.49</b>
104272-02	\$24,797.75	\$0.00	\$0.00	\$0.00	\$24,797.75
104272-09	\$467.63	\$0.00	\$0.00	\$0.00	\$467.63

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Group	Paid Claims	Healthcare Adjustments	Capitation	Value Based Reimbursement	Paid Claims /Expenses
104272-12	\$1,635.25	\$0.00	\$0.00	\$0.00	\$1,635.25
104272-19	\$546.43	\$0.00	\$0.00	\$0.00	\$546.43
<b>104272- Total</b>	<b>\$27,447.06</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$27,447.06</b>
<b>HDHP PPO Total</b>	<b>\$75,601.06</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$75,601.06</b>
<b>Major Medical</b>					
053264-01	\$141.60	\$0.00	\$0.00	\$0.00	\$141.60
<b>053264- Total</b>	<b>\$141.60</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$141.60</b>
<b>Major Medical Total</b>	<b>\$141.60</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$141.60</b>
<b>PPO</b>					
014267-01	\$36,767.59	\$0.00	\$0.00	\$0.00	\$36,767.59
014267-03	\$30,147.19	\$0.00	\$0.00	\$0.00	\$30,147.19
014267-05	\$25,936.51	\$0.00	\$0.00	\$0.00	\$25,936.51
014267-06	\$25,734.90	\$0.00	\$0.00	\$0.00	\$25,734.90
014267-07	\$6,122.59	\$0.00	\$0.00	\$0.00	\$6,122.59
014267-08	\$3,702.92	\$0.00	\$0.00	\$0.00	\$3,702.92
014267-13	\$1,734.56	\$0.00	\$0.00	\$0.00	\$1,734.56
014267-15	\$730.93	\$0.00	\$0.00	\$0.00	\$730.93
014267-26	\$7,976.17	\$0.00	\$0.00	\$0.00	\$7,976.17
014267-36	\$2,550.66	\$0.00	\$0.00	\$0.00	\$2,550.66
014267-37	\$153.42	\$0.00	\$0.00	\$0.00	\$153.42
<b>014267- Total</b>	<b>\$141,557.44</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$141,557.44</b>
<b>PPO Total</b>	<b>\$141,557.44</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$141,557.44</b>
<b>Paid Claims/Expenses Summary Total</b>					<b>\$283,228.89</b>

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