[redacted]						ID/CARD# [redacted]			NAME: [redacted]				CLAIM# OD93556490000				
1154347540	070910	99214				1	120.00	120.00	88.00	78.00	10.00	.00	.00	.00	760		
1154347540	070910	95921				1	150.00	150.00	63.00	63.00	.00	.00	.00	.00	367		
1154347540	070910	93040				1	.00	.00	.00	.00	.00	.00	.00	.00	025		
1154347540	070910	95922	52			1	150.00	150.00	74.00	74.00	.00	.00	.00	.00	367		
		CLAIM	TOTAL				420.00	420.00	225.00	215.00	10.00	.00	.00	.00			
[redacted]						ID/CARD# [redacted]			NAME: [redacted]				CLAIM# OD933715U0000 SUBM ID# 247763694				
1528088721	060510	99213				1	70.00	70.00	64.38	.00	.00	.00	.00	12.88		MED PGB	
1528088721	060510	73030				1	63.00	63.00	27.88	.00	.00	.00	.00	5.58		MED PGB	
1528088721	060510	J1040				1	30.00	30.00	6.64	.00	.00	.00	.00	1.33		MED PGB	
		CLAIM	TOTAL				163.00	163.00	98.90	.00	.00	.00	.00	19.79			

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