

PATIENT NAME	PATIENT CNTRL NUMBER	FRM DT	COST	REPTD CHGS	DRG NBR	OUTLIER AMT	REIMB RATE	ALLOW/REIM	INTEREST
ICN NUMBER	HIC NUMBER	THR DT	COVDV	NCVD/DENIED	DRG AMOUNT	DEDUCTIBLES	MSP PRI PAY	PROC CD AMT	PAT REFUND
CLAIM # CLM STATUS	MEDICAL REC NUMBER	PAT ST	NCVDV	CLAIM ADJS	DRG O-C	COINS AMT	PROF COMP	LINE ADJ AMT	PERDIEM AMT
NAME CHG=xx	HIC CHG=x TOB=xxx	CV LN	NCV L	COVD CHGS		MSP LIAB MET	ESRD AMT	CONT ADJ AMT	NET. REIMB
21201100358804VTA	CX657192X	110829	94	219945.96	885	1371.77	0.000	219945.95	0.00
1  1		111201	0	0.00	71535.79	0.00	0.00	0.00	0.00
NAME CHG=QC	HIC CHG=HN TOB=111		0	148410.17	0.00	21508.00	0.00	0.00	0.00
			0	219945.96		0.00	0.00	0.00	50027.79

Payment/Adjustment Report  
 BRATTLEBORO HERRIAT  
 1 ANNA MARSH LANE  
 BRATTLEBORO, VT 05302-0101  
 From : 06/07/2012 Thru : 06/07/2012

Name	MR#	Trns Date	Post Date	Pct/Adj	Revenue Group	Amount	Fin. Cls.	Posted By
		06/07/2012	06/07/2012	Payment from Insur	ADULT-100-IMPATIENT	137.44	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		327.56	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		50,027.81	Medicare A	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		91,970.20	Medicare A	ROSE DEITZ
		06/07/2012	06/07/2012	Deductible/Copay a		70,829.81	Medicare A	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		7,200.04	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		6,247.18	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		187.85	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		457.15	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		250.00	HMO	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		2,581.14	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		2,044.27	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		168.22	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		426.78	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		1,156.00	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		3,074.72	Medicare A	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		6,467.57	Medicare A	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		29,791.34	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		62,669.13	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		349.75	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		795.25	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Reversal Discount		-338.10	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		106.90	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		288.10	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		325.21	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		289.13	Blue Cross	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		395.87	Blue Cross	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		10,095.60	Blue Cross	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		1,781.57	Blue Cross	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		18,696.16	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		16,760.11	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		1,584.29	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		1,011.72	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Reversal Discount		-67,004.00	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		100.29	Blue Cross	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		74.35	Blue Cross	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		54.48	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		208.90	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		40.04	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		48.71	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		34,521.60	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Discount from Insur		31,910.54	Medicaid	ROSE DEITZ
		06/07/2012	06/07/2012	Payment from Insur		815.76	Medicaid	ROSE DEITZ
						389,345.68		

← TN BPR

Revenue Group TOTAL :

1 BRATTLEBORO RETREAT		2 BRATTLEBORO RETREAT		3a PAT. CNTRL #	CX657192X	4 TYPE OF BILL	0111
1 ANNA MARSH LANE		PO BOX 101		b. MED. REC. #			
BRATTLEBORO VT 053020101		BRATTLEBORO VT 053020101		5 FED. TAX. ID	03-0107360	6 STATEMENT COVERS PERIOD FROM	082911
8022584392						THROUGH	122311

8 PATIENT NAME	# 0	9 PATIENT ADDRESS	a	BAD ADDRESS
		b	BRATTLEBORO	c
		d	VT	e
			05301	

10 BIRTHDATE	11 SEX	12 DATE	ADMISSION 13 HR	14 TYPE	15 SRC	16 DHR	17 STAT	18	19	20	21	22	23	24	25	26	27	28	29 ACCT STATE	30
	F	082911	16	1	1	10	01													

31 OCCURRENCE CODE	32 OCCURRENCE DATE	33 OCCURRENCE CODE	34 OCCURRENCE DATE	35 OCCURRENCE CODE	36 OCCURRENCE DATE	37 OCCURRENCE CODE	38 OCCURRENCE DATE
11	082911						

39 CODE	VALUE	40 CODE	41 CODE
a 80	94	81	22
b 83	23	08	13018 00
c 80	94 00	81	22 00
d			

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
1 0124	PSYCH/2BED	2140.00		116	248240 00	47080 00	1
2 0250	PHARMACY			349	18165 96		2
3 0919	PSYCH/OTHER			2	620 00		3
4							4
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21							21
22							22
23 0001	PAGE 001 OF 001	CREATION DATE	122511	TOTALS	267025 96	47080 00	23

50 PAYER NAME	51 HEALTH PLAN ID	52 REL INFO	53 ASG BEN.	54 PRIOR PAYMENTS	55 EST. AMOUNT DUE	56 NPI	1730185232
MEDICARE A		Y	Y		267025 96	57	474001
						OTHER	
						PRV ID	

58 INSURED'S NAME	59 REL	60 INSURED'S UNIQUE ID	61 GROUP NAME	62 INSURANCE GROUP NO
	18		MEDICARE	

63 TREATMENT AUTHORIZATION CODES	64 DOCUMENT CONTROL NUMBER	65 EMPLOYER NAME

66	67	68
9		

69 ADMIT DX	29570	70 PATIENT REASON DX		71 PPS CODE		72 ECI		73	
74 PRINCIPAL PROCEDURE CODE		OTHER PROCEDURE CODE		75		76 ATTENDING	NPI 1710975537	QUAL	1GE05359
						LAST	FISHELMAN	FIRST	LESLEY
						77 OPERATING	NPI	QUAL	
						LAST		FIRST	
						78 OTHER	NPI	QUAL	
						LAST		FIRST	
						79 OTHER	NPI	QUAL	
						LAST		FIRST	