

### A/R Aging

A/R Date 11/02/2020: By Organization, By Plan

Organization	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
<b>Plan</b>										
SCPHS/{ ALL }/{ ALL }/{ ALL }										
MCRA - MEDICARE A * OFFICE PHONE:										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$154.59	4,319	\$154.59
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$183.29)	2,800	(\$183.29)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$28.70)		(\$28.70)
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$154.59	4,319	\$154.59
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$183.29)	2,800	(\$183.29)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$28.70)		(\$28.70)
TITLE IX - MEDICAID										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1.95)	3,353	(\$1.95)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1.95)		(\$1.95)
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1.95)	3,353	(\$1.95)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1.95)		(\$1.95)
Organization Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$154.59	4,319	\$154.59
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$185.24)	3,077	(\$185.24)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$30.65)		(\$30.65)

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Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
AETNA - AETNA US HEALTHCARE										
	\$0.00	\$2,300.00	\$4,642.00	\$829.00	\$0.00	\$0.00	\$120.00	\$2,175.00	151	\$10,066.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$2,300.00	\$4,642.00	\$829.00	\$0.00	\$0.00	\$120.00	\$2,175.00		\$10,066.00
Plan Totals:	\$0.00	\$2,300.00	\$4,642.00	\$829.00	\$0.00	\$0.00	\$120.00	\$2,175.00	151	\$10,066.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$2,300.00	\$4,642.00	\$829.00	\$0.00	\$0.00	\$120.00	\$2,175.00		\$10,066.00
AETNA MCR ADV - AETNA MEDICARE ADVANTAGE										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,413.09	663	\$4,413.09
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$851.92)	544	(\$851.92)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,561.17		\$3,561.17
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,413.09	663	\$4,413.09
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$851.92)	544	(\$851.92)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3,561.17		\$3,561.17
BCBS - BLUE CROSS BLUE SHEILD										
	\$0.00	\$2,690.00	\$1,264.00	\$2,183.00	\$1,097.70	\$600.00	\$17.25	\$8,116.95	453	\$15,968.90
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$441.78)	3,647	(\$441.78)
	\$0.00	\$2,690.00	\$1,264.00	\$2,183.00	\$1,097.70	\$600.00	\$17.25	\$7,675.17		\$15,527.12
Plan Totals:	\$0.00	\$2,690.00	\$1,264.00	\$2,183.00	\$1,097.70	\$600.00	\$17.25	\$8,116.95	453	\$15,968.90
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$441.78)	3,647	(\$441.78)
	\$0.00	\$2,690.00	\$1,264.00	\$2,183.00	\$1,097.70	\$600.00	\$17.25	\$7,675.17		\$15,527.12
BCBS MCR ADV - BCBS MEDIBLUE MEDICARE ADVANTAGE										
	\$0.00	\$0.00	\$0.00	\$0.00	\$2,294.96	\$0.00	\$0.00	\$0.00	139	\$2,294.96
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$2,294.96	\$0.00	\$0.00	\$0.00		\$2,294.96
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$2,294.96	\$0.00	\$0.00	\$0.00	139	\$2,294.96
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$2,294.96	\$0.00	\$0.00	\$0.00		\$2,294.96

### A/R Aging

A/R Date 11/02/2020: By Organization, By Plan

Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
CIG - CIGNA										
	\$0.00	\$525.00	\$0.00	\$210.00	\$770.00	\$0.00	\$0.00	\$2,050.83	191	\$3,555.83
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$525.00	\$0.00	\$210.00	\$770.00	\$0.00	\$0.00	\$2,050.83		\$3,555.83
Plan Totals:	\$0.00	\$525.00	\$0.00	\$210.00	\$770.00	\$0.00	\$0.00	\$2,050.83	191	\$3,555.83
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$525.00	\$0.00	\$210.00	\$770.00	\$0.00	\$0.00	\$2,050.83		\$3,555.83
CRHP - CRYSTAL RUN HEALTH PLAN										
	\$0.00	\$0.00	\$0.00	\$40.00	\$0.00	\$0.00	\$0.00	\$4,349.48	671	\$4,389.48
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$40.00	\$0.00	\$0.00	\$0.00	\$4,349.48		\$4,389.48
Plan Totals:	\$0.00	\$0.00	\$0.00	\$40.00	\$0.00	\$0.00	\$0.00	\$4,349.48	671	\$4,389.48
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$40.00	\$0.00	\$0.00	\$0.00	\$4,349.48		\$4,389.48
DEPT OF LABOR - DEPT OF LABOR WOR COMP										
	\$0.00	\$0.00	\$0.00	\$0.00	\$1,225.00	\$2,269.00	\$1,584.00	\$0.00	168	\$5,078.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$1,225.00	\$2,269.00	\$1,584.00	\$0.00		\$5,078.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$1,225.00	\$2,269.00	\$1,584.00	\$0.00	168	\$5,078.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$1,225.00	\$2,269.00	\$1,584.00	\$0.00		\$5,078.00
EMB - EMBLEM HEALTH PLAN										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00	886	\$2,725.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00		\$2,725.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00	886	\$2,725.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00		\$2,725.00

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Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
EMP - EMPIRE PLAN										
	\$0.00	\$600.00	\$525.00	\$0.00	\$125.00	\$475.00	\$2,025.00	\$4,750.00	495	\$8,500.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$600.00	\$525.00	\$0.00	\$125.00	\$475.00	\$2,025.00	\$4,750.00		\$8,500.00
Plan Totals:	\$0.00	\$600.00	\$525.00	\$0.00	\$125.00	\$475.00	\$2,025.00	\$4,750.00	495	\$8,500.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$600.00	\$525.00	\$0.00	\$125.00	\$475.00	\$2,025.00	\$4,750.00		\$8,500.00
FIDEL ADVANT - FIDELIS ADVANTAGE- DUAL- PLUS										
	\$0.00	\$376.94	\$188.47	\$188.47	\$0.00	\$0.00	\$0.00	\$896.94	209	\$1,650.82
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$376.94	\$188.47	\$188.47	\$0.00	\$0.00	\$0.00	\$896.94		\$1,650.82
Plan Totals:	\$0.00	\$376.94	\$188.47	\$188.47	\$0.00	\$0.00	\$0.00	\$896.94	209	\$1,650.82
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$376.94	\$188.47	\$188.47	\$0.00	\$0.00	\$0.00	\$896.94		\$1,650.82
FIDELIS - FIDELIS CARE										
	\$0.00	\$5,744.93	\$8,068.57	\$1,121.93	\$3,917.66	\$2,032.18	\$199.53	\$23,515.15	353	\$44,599.95
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1,040.25)	605	(\$1,040.25)
	\$0.00	\$5,744.93	\$8,068.57	\$1,121.93	\$3,917.66	\$2,032.18	\$199.53	\$22,474.90		\$43,559.70
Plan Totals:	\$0.00	\$5,744.93	\$8,068.57	\$1,121.93	\$3,917.66	\$2,032.18	\$199.53	\$23,515.15	353	\$44,599.95
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$1,040.25)	605	(\$1,040.25)
	\$0.00	\$5,744.93	\$8,068.57	\$1,121.93	\$3,917.66	\$2,032.18	\$199.53	\$22,474.90		\$43,559.70
FIDELIS MCR ADV - FIDELIS MEDICARE ADVANTAGE										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,945.85	\$3,293.65	613	\$6,239.50
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,945.85	\$3,293.65		\$6,239.50
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,945.85	\$3,293.65	613	\$6,239.50
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,945.85	\$3,293.65		\$6,239.50

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Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
GHI - GHI										
	\$0.00	\$0.00	\$125.00	\$185.00	\$395.00	\$0.00	\$0.00	\$1,597.00	266	\$2,302.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$125.00	\$185.00	\$395.00	\$0.00	\$0.00	\$1,597.00		\$2,302.00
Plan Totals:	\$0.00	\$0.00	\$125.00	\$185.00	\$395.00	\$0.00	\$0.00	\$1,597.00	266	\$2,302.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$125.00	\$185.00	\$395.00	\$0.00	\$0.00	\$1,597.00		\$2,302.00
HAMAS - HAMASPIK										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$376.94	575	\$376.94
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$376.94		\$376.94
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$376.94	575	\$376.94
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$376.94		\$376.94
HAMASPIK - HAMASPIK MLTC										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$350.00	493	\$350.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$350.00		\$350.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$350.00	493	\$350.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$350.00		\$350.00
HHP - MEDICAID HUDSON HEALTH PLUS										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$175.00)	1,920	(\$175.00)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$175.00)		(\$175.00)
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$175.00)	1,920	(\$175.00)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$175.00)		(\$175.00)

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SCPHS/CHHA/{ ALL }/{ ALL }										
HIP - HIP OF NY										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$950.00	672	\$950.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$950.00		\$950.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$950.00	672	\$950.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$950.00		\$950.00
LOCAL 1199 - LOCAL 1199										
	\$0.00	\$0.00	\$175.00	\$0.00	\$175.00	\$0.00	\$0.00	\$2,175.00	581	\$2,525.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$175.00	\$0.00	\$175.00	\$0.00	\$0.00	\$2,175.00		\$2,525.00
Plan Totals:	\$0.00	\$0.00	\$175.00	\$0.00	\$175.00	\$0.00	\$0.00	\$2,175.00	581	\$2,525.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$175.00	\$0.00	\$175.00	\$0.00	\$0.00	\$2,175.00		\$2,525.00
MCR MSP - Medicare Secondary Payor * OFFICE PHONE:										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,062.73	807	\$2,062.73
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,062.73		\$2,062.73
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,062.73	807	\$2,062.73
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,062.73		\$2,062.73
MCRA - MEDICARE A * OFFICE PHONE:										
	\$0.00	\$141,912.29	\$136,559.80	\$135,267.40	\$31,369.27	\$9,865.57	\$16,443.50	\$282,113.22	1,235	\$753,531.05
	(\$263.39)	(\$1,490.60)	(\$2,115.06)	(\$2,639.71)	(\$305.74)	(\$5,261.80)	(\$1,823.14)	(\$1,940,197.64)	2,679	(\$1,954,097.08)
	(\$263.39)	\$140,421.69	\$134,444.74	\$132,627.69	\$31,063.53	\$4,603.77	\$14,620.36	(\$1,658,084.42)		(\$1,200,566.03)
Plan Totals:	\$0.00	\$141,912.29	\$136,559.80	\$135,267.40	\$31,369.27	\$9,865.57	\$16,443.50	\$282,113.22	1,235	\$753,531.05
	(\$263.39)	(\$1,490.60)	(\$2,115.06)	(\$2,639.71)	(\$305.74)	(\$5,261.80)	(\$1,823.14)	(\$1,940,197.64)	2,679	(\$1,954,097.08)
	(\$263.39)	\$140,421.69	\$134,444.74	\$132,627.69	\$31,063.53	\$4,603.77	\$14,620.36	(\$1,658,084.42)		(\$1,200,566.03)

### A/R Aging

A/R Date 11/02/2020: By Organization, By Plan

Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
MERIT - MERITAIN HEALTH										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00	1,005	\$2,725.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00		\$2,725.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00	1,005	\$2,725.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,725.00		\$2,725.00
MHM - MEDICARE HMO * OFFICE PHONE:										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$505.43)	4,121	(\$505.43)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$505.43)		(\$505.43)
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$505.43)	4,121	(\$505.43)
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$505.43)		(\$505.43)
MHMO PPS 2008 - MEDICARE HMO PPS2008										
	\$0.00	\$8,689.15	\$17,071.87	\$24,386.94	\$7,634.57	\$4,689.42	\$15,996.41	\$116,018.11	351	\$194,486.47
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$4,130.04)	602	(\$4,130.04)
	\$0.00	\$8,689.15	\$17,071.87	\$24,386.94	\$7,634.57	\$4,689.42	\$15,996.41	\$111,888.07		\$190,356.43
Plan Totals:	\$0.00	\$8,689.15	\$17,071.87	\$24,386.94	\$7,634.57	\$4,689.42	\$15,996.41	\$116,018.11	351	\$194,486.47
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$4,130.04)	602	(\$4,130.04)
	\$0.00	\$8,689.15	\$17,071.87	\$24,386.94	\$7,634.57	\$4,689.42	\$15,996.41	\$111,888.07		\$190,356.43
MVP - MVP										
	\$0.00	\$1,451.50	\$3,335.11	\$3,445.44	\$670.41	\$125.00	\$585.00	\$3,902.97	179	\$13,515.43
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$1,451.50	\$3,335.11	\$3,445.44	\$670.41	\$125.00	\$585.00	\$3,902.97		\$13,515.43
Plan Totals:	\$0.00	\$1,451.50	\$3,335.11	\$3,445.44	\$670.41	\$125.00	\$585.00	\$3,902.97	179	\$13,515.43
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$1,451.50	\$3,335.11	\$3,445.44	\$670.41	\$125.00	\$585.00	\$3,902.97		\$13,515.43

### A/R Aging

A/R Date 11/02/2020: By Organization, By Plan

Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
NOF - NO FAULT										
	\$0.00	\$3,329.50	\$2,137.14	\$3,400.00	\$5,175.00	\$1,775.00	\$125.00	\$8,325.00	232	\$24,266.64
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
Plan Totals:	\$0.00	\$3,329.50	\$2,137.14	\$3,400.00	\$5,175.00	\$1,775.00	\$125.00	\$8,325.00		\$24,266.64
	\$0.00	\$3,329.50	\$2,137.14	\$3,400.00	\$5,175.00	\$1,775.00	\$125.00	\$8,325.00	232	\$24,266.64
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$3,329.50	\$2,137.14	\$3,400.00	\$5,175.00	\$1,775.00	\$125.00	\$8,325.00		\$24,266.64
NY EPS - NEW YORK EPISODIC										
	\$0.00	\$168.74	\$1,924.84	(\$1,108.42)	\$0.00	\$0.00	\$0.00	(\$823.91)	717	\$161.25
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$24,074.43)	2,696	(\$24,074.43)
Plan Totals:	\$0.00	\$168.74	\$1,924.84	(\$1,108.42)	\$0.00	\$0.00	\$0.00	(\$24,898.34)		(\$23,913.18)
	\$0.00	\$168.74	\$1,924.84	(\$1,108.42)	\$0.00	\$0.00	\$0.00	(\$823.91)	717	\$161.25
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$24,074.43)	2,696	(\$24,074.43)
	\$0.00	\$168.74	\$1,924.84	(\$1,108.42)	\$0.00	\$0.00	\$0.00	(\$24,898.34)		(\$23,913.18)
OTH - OTHER INSURANCE										
	\$0.00	\$2,950.00	\$6,200.00	\$725.00	\$0.00	\$175.00	\$1,225.00	\$4,905.00	165	\$16,180.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
Plan Totals:	\$0.00	\$2,950.00	\$6,200.00	\$725.00	\$0.00	\$175.00	\$1,225.00	\$4,905.00		\$16,180.00
	\$0.00	\$2,950.00	\$6,200.00	\$725.00	\$0.00	\$175.00	\$1,225.00	\$4,905.00	165	\$16,180.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$2,950.00	\$6,200.00	\$725.00	\$0.00	\$175.00	\$1,225.00	\$4,905.00		\$16,180.00
OXF - OXFORD										
	\$0.00	\$175.00	\$505.00	\$1,075.00	\$0.00	\$0.00	\$240.00	\$1,800.00	412	\$3,795.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
Plan Totals:	\$0.00	\$175.00	\$505.00	\$1,075.00	\$0.00	\$0.00	\$240.00	\$1,800.00		\$3,795.00
	\$0.00	\$175.00	\$505.00	\$1,075.00	\$0.00	\$0.00	\$240.00	\$1,800.00	412	\$3,795.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$175.00	\$505.00	\$1,075.00	\$0.00	\$0.00	\$240.00	\$1,800.00		\$3,795.00



### A/R Aging

A/R Date 11/02/2020: By Organization, By Plan

Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
PAT - PATIENT PAY										
	\$0.00	\$0.00	\$0.00	\$525.00	\$175.00	\$175.00	\$0.00	\$2,200.00	370	\$3,075.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$525.00	\$175.00	\$175.00	\$0.00	\$2,200.00		\$3,075.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$525.00	\$175.00	\$175.00	\$0.00	\$2,200.00	370	\$3,075.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$525.00	\$175.00	\$175.00	\$0.00	\$2,200.00		\$3,075.00
SULCODFS - Sullivan County DFS										
	\$0.00	\$525.00	\$700.00	\$1,050.00	\$350.00	\$700.00	\$175.00	\$19,775.00	533	\$23,275.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$3,427.42)	3,707	(\$3,427.42)
	\$0.00	\$525.00	\$700.00	\$1,050.00	\$350.00	\$700.00	\$175.00	\$16,347.58		\$19,847.58
Plan Totals:	\$0.00	\$525.00	\$700.00	\$1,050.00	\$350.00	\$700.00	\$175.00	\$19,775.00	533	\$23,275.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$3,427.42)	3,707	(\$3,427.42)
	\$0.00	\$525.00	\$700.00	\$1,050.00	\$350.00	\$700.00	\$175.00	\$16,347.58		\$19,847.58
TITLE IX - MEDICAID										
	\$0.00	\$0.00	\$175.00	\$175.00	\$0.00	\$0.00	\$0.00	\$520.73	1,522	\$870.73
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$23,048.42)	3,496	(\$23,048.42)
	\$0.00	\$0.00	\$175.00	\$175.00	\$0.00	\$0.00	\$0.00	(\$22,527.69)		(\$22,177.69)
Plan Totals:	\$0.00	\$0.00	\$175.00	\$175.00	\$0.00	\$0.00	\$0.00	\$520.73	1,522	\$870.73
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$23,048.42)	3,496	(\$23,048.42)
	\$0.00	\$0.00	\$175.00	\$175.00	\$0.00	\$0.00	\$0.00	(\$22,527.69)		(\$22,177.69)
TOD OPT - TODAYS OPTIONS										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$175.00	711	\$175.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$175.00		\$175.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$175.00	711	\$175.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$175.00		\$175.00

### A/R Aging

A/R Date 11/02/2020: By Organization, By Plan

Organization	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
<b>Plan</b>										
SCPHS/CHHA/{ ALL }/{ ALL }										
TODAYS OPT - TODAY OPTIONS										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18,375.72	637	\$18,375.72
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18,375.72		\$18,375.72
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18,375.72	637	\$18,375.72
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18,375.72		\$18,375.72
UHC MCR ADV - UNITED HEALTHCARE MCR ADVANTAGE										
	\$0.00	\$29,398.64	\$29,828.37	\$25,855.28	\$22,881.86	\$11,006.46	\$13,344.53	\$141,049.66	285	\$273,364.80
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$25,305.50)	559	(\$25,305.50)
	\$0.00	\$29,398.64	\$29,828.37	\$25,855.28	\$22,881.86	\$11,006.46	\$13,344.53	\$115,744.16		\$248,059.30
Plan Totals:	\$0.00	\$29,398.64	\$29,828.37	\$25,855.28	\$22,881.86	\$11,006.46	\$13,344.53	\$141,049.66	285	\$273,364.80
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	(\$25,305.50)	559	(\$25,305.50)
	\$0.00	\$29,398.64	\$29,828.37	\$25,855.28	\$22,881.86	\$11,006.46	\$13,344.53	\$115,744.16		\$248,059.30
VNS MLTC - VNSNY CHOICE										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,175.00	809	\$2,175.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,175.00		\$2,175.00
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,175.00	809	\$2,175.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,175.00		\$2,175.00
WEL - WELLCARE										
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,482.50	849	\$2,482.50
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,482.50		\$2,482.50
Plan Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,482.50	849	\$2,482.50
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,482.50		\$2,482.50

### A/R Aging

A/R Date 11/02/2020: By Organization, By Plan

Organization Plan	0 to 30	31 to 60	61 to 90	91 to 120	121 to 150	151 to 180	181 to 210	Over 210	Ave Age	Total
SCPHS/CHHA/{ ALL }/{ ALL }										
WOR - WORKMENS COMPENSATION										
	\$0.00	\$2,750.00	\$263.32	\$336.00	\$0.00	\$0.00	\$0.00	\$3,600.00	371	\$6,949.32
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
<b>Plan Totals:</b>	\$0.00	\$2,750.00	\$263.32	\$336.00	\$0.00	\$0.00	\$0.00	\$3,600.00		\$6,949.32
	\$0.00	\$2,750.00	\$263.32	\$336.00	\$0.00	\$0.00	\$0.00	\$3,600.00	371	\$6,949.32
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0	\$0.00
<b>Organization Totals:</b>	\$0.00	\$203,586.69	\$213,688.49	\$199,890.04	\$78,256.43	\$33,887.63	\$55,026.07	\$673,116.76	653	\$1,457,452.11
	(\$263.39)	(\$1,490.60)	(\$2,115.06)	(\$2,639.71)	(\$305.74)	(\$5,261.80)	(\$1,823.14)	(\$2,023,197.83)	2,931	(\$2,037,097.27)
	(\$263.39)	\$202,096.09	\$211,573.43	\$197,250.33	\$77,950.69	\$28,625.83	\$53,202.93	(\$1,350,081.07)		(\$579,645.16)