

Date: 02-05-02

WESTSIDE MEDICAL CLINIC

Page: 1

Time: 00:13:14 Transfer Charges to Next Responsibility

Carriers: (AETN1)-(AETN1)

PREVIEW RUN ONLY

Carrier Code Carrier Name Carrier Days to Pay

Patient Name Resp. Party Name

Pat. Unique ID Resp. Unique ID

Seq # CPT Code Charge Amt. Bal. Transf. Bill Date Days Past Moved Billing To

Seq #	CPT Code	Charge Amt.	Bal. Transf.	Bill Date	Days Past Billing	Moved To
AETN1		AETNA LIFE INSURANCE		30		
1012	99213	152.00	152.00	12-15-02	21	Next Ins.
COOPER, MARIA 30AAAAAA		COOPER, ADAM 23AAAAAA				
1121	99213	134.00	134.00	12-15-02	21	Next Ins.
COOPER, MARIA 30AAAAAA		COOPER, ADAM 23AAAAAA				
1526	99213	52.00	52.00	12-31-02	6	Patient
JONES, RONALD 10AAAAAA		JONES, RONALD 9AAAAAA				
1734	9907007	45.00	32.00	12-31-02	6	Patient
JONES, RONALD 10AAAAAA		JONES, RONALD 9AAAAAA				

AETN1 TOTALS:

AMT TRANSFERRED TO PATIENTS: 84.00

AMT TRANSFERRED TO NEXT INSURANCE: 286.00

Figure 12-5 Transfer Charges To Next Responsibility report