Mental Hygiene Administration
Public Mental Health System

Report Description/Data Source

Maryland PMHS report that displays paid claim information for consumers/members by provider for a specified date

EOP Detail Report - STATEWIDE

Table(s): MD_REPORTING.RPT_CLAIM_MD_FINAL

EOP Date: 1/31/2014

Consumer Name	Consumer ID	Race Code	Sex Code	Service Catego	ServiceVendor	Claim TCN	Line	Eligibility	Age	Age Group	CPT/Rev Code	Svc Code Modifier	Service Date	Unit	Net Pay
Provider: XXXXXXX Vendor #: #######															
XXXXXXXXXXX	######	X	X	05	XXXXXX	XXXXXXXXXXXXX	1	Medicaid	X	ADULT	90834		X	1	$63.77
Provider														**10**	**$637.70**
Provider: YYYYYYYYYY INC Vendor #: #######															
XXXXXXXXXXX	######	X	X	07	XXXXXX	XXXXXXXXXXXXX	5	Medicaid	X	ADULT	H2018	U3	X	1	$243.76