



**Sample, Inc. MERP Claim Report For Period:  
For All Un-reported Claims Currently in the System By 9/17/2014**

<b>Participant/ MERP Claim No.</b>	<b>INS. CO. NO.</b>	<b>Incurred Date</b>	<b>Amount</b>		<b>Individual To Date</b>	<b>Family To Date</b>	<b>Individual Current</b>	<b>Family Current</b>	<b>Status/ Claim Benefit</b>
<b>Henderson, Bobby</b>				<b>Employee Name: Henderson, Joe</b>					<b>Son</b>
<b>MERP EOB Number: 91720148886</b>				<b>Processed On: 9/17/2014</b>					
<b>29727</b>	15	8/12/2014	\$95.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$57.00</b>
				<b>Benefit:</b>	\$6,000.00	\$5,778.00	\$5,943.00	\$5,721.00	
				<b>Medical Expenses</b>					
<b>MERP EOB Number: 91720148886</b>				<b>Processed On: 9/17/2014</b>					
<b>29728</b>	16	8/22/2014	\$25.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$15.00</b>
				<b>Benefit:</b>	\$5,943.00	\$5,721.00	\$5,928.00	\$5,706.00	
				<b>Medical Expenses</b>					
<b>MERP EOB Number: 91720148886</b>				<b>Processed On: 9/17/2014</b>					
<b>29729</b>	17	8/27/2014	\$225.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$135.00</b>
				<b>Benefit:</b>	\$5,928.00	\$5,706.00	\$5,793.00	\$5,571.00	
				<b>Medical Expenses</b>					
<b>Claim Cnt: 3</b>				<b>TTL Claim Amt: \$345.00</b>		<b>TTL Benefit Less Prescriptions - Pay This Amount: \$192.00</b>			<b>TTL Benefit: \$207.00</b>

Participant/ MERP Claim No.	INS. CO. NO.	Incurred Date	Amount		Individual To Date	Family To Date	Individual Current	Family Current	Status/ Claim Benefit
<b>Henderson, Joe</b>					<b>Employee Name: Henderson, Joe</b>				<b>Employee</b>
MERP EOB Number: 91720148884								Processed On: 9/17/2014	
<b>29723</b>	10	7/18/2013	\$125.00	<b>Deductible:</b>			\$0.00	\$0.00	<b>\$0.00</b>
				<b>Benefit:</b>			\$0.00	\$0.00	
				Medical Expenses					
MERP EOB Number: 91720148884								Processed On: 9/17/2014	
<b>29724</b>	11	7/24/2014	\$75.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$45.00</b>
				<b>Benefit:</b>	\$6,000.00	\$6,000.00	\$5,955.00	\$5,955.00	
				Medical Expenses					
MERP EOB Number: 91720148884								Processed On: 9/17/2014	
<b>29725</b>	12	7/17/2014	\$210.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$126.00</b>
				<b>Benefit:</b>	\$5,955.00	\$5,955.00	\$5,829.00	\$5,829.00	
				Medical Expenses					
<b>Claim Cnt: 3</b>								<b>TTL Claim Amt: \$410.00</b>	
								<b>TTL Benefit: \$171.00</b>	
								<b>TTL Benefit Less Prescriptions - Pay This Amount: \$126.00</b>	

Participant/ MERP Claim No.	INS. CO. NO.	Incurred Date	Amount		Individual To Date	Family To Date	Individual Current	Family Current	Status/ Claim Benefit
<b>Henderson, Mary</b>					<b>Employee Name: Henderson, Joe</b>				<b>Spouse</b>
<b>MERP EOB Number: 91720148885</b>								<b>Processed On: 9/17/2014</b>	
<b>29726</b>	14	7/24/2014	\$85.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	
				<b>Benefit:</b>	\$6,000.00	\$5,829.00	\$5,949.00	\$5,778.00	<b>\$51.00</b>
				Medical Expenses					
<b>Claim Cnt: 1</b>		<b>TTL Claim Amt: \$85.00</b>			<b>TTL Benefit Less Prescriptions - Pay This Amount: \$0.00</b>				<b>TTL Benefit: \$51.00</b>

Participant/ MERP Claim No.	INS. CO. NO.	Incurred Date	Amount		Individual To Date	Family To Date	Individual Current	Family Current	Status/ Claim Benefit	
<b>Mayfield, George</b>					<b>Employee Name: Mayfield, George</b>				<b>Employee</b>	
MERP EOB Number: 91720148887								Processed On: 9/17/2014		
<b>29730</b>	75	8/15/2014	\$1,500.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$900.00</b>	
				<b>Benefit:</b> Medical Expenses	\$3,000.00	\$3,000.00	\$2,100.00	\$2,100.00		
MERP EOB Number: 91720148887								Processed On: 9/17/2014		
<b>29731</b>	76	8/15/2014	\$250.00	<b>Deductible:</b>	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$150.00</b>	
				<b>Benefit:</b> Medical Expenses	\$2,100.00	\$2,100.00	\$1,950.00	\$1,950.00		
<b>Claim Cnt: 2</b>								<b>TTL Claim Amt: \$1,750.00</b>		<b>TTL Benefit: \$1,050.00</b>
								<b>TTL Benefit Less Prescriptions - Pay This Amount: \$1,050.00</b>		
<b>Totals For: For All Un-reported Claims Currently in the System</b>									<b>TTL Benefit: \$1,479.00</b>	
<b>Claim Cnt: 9</b>								<b>TTL Claim Amt: \$2,590.00</b>		<b>TTL Benefit Less Prescriptions - Total Payout: \$1,368.00</b>