EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	OBJECTION	REPROCESS W/ EOB	REPROCESS Ag AMOUNT	ree HOGGE_COMMENT	APPROVED AMOU
BANK FINANCIAL SERVICES BETHESDA HOME	10/1/2003 8/6/2003	10/1/2003 8/6/2003	EDINA ORTHODONTIC HRUBY DENTAL	RANDY NELSON-ALEX NELSON SANDRA SCHLECHTER	4001 LINDEN HILLS BLVD 23756 ARENA DR	MINNEAPOLIS, MN 55410 RAPID CITY, SD 57702	1,200.00 40.00	700 00 32 00	700.00 32.00			FILED	no change	n n	not elgible prior claim ADA form shows submitted claim already paid at	\$6
BETHESDA HOME BETHESDA HOME	6/9/2003 5/13/2003	6/9/2003 10/15/2003	HRUBY DENTAL ROBERT ARNOLD, DDS	SANDRA SCHLECHTER-RODNEY SCHLECHTER SANDRA SCHLECHTER-RYAN SCHLECHTER	23756 ARENA DR 23756 ARENA DR	RAPID CITY, SD 57702 RAPID CITY, SD 57702	143.00 1,256.00	100.00 471.00	100.00 471.00			X X		n	\$32.00 submitted claim has already paid submitted claim has already paid	\$(
COLORADO RETIREES	5/13/2003	9/11/2003	TODD M PARCO, DDS	JOSEPH MARTINET	2631 HOLLYWOOD DRIVE	PUEBLO, CO 81006	1,173.00	602.00	74.00				change - Mr Martinet had 3 visits 5-13-03 \$304., 5-13-03 \$795.,9- 11-03 \$74. Mr Martinet	602.00 n	Hogge provided prior claims information shows a payable for \$540.40 Note No proof of paymen aubmitted but for \$74 charge.	\$74
CONROE ISD	6/25/2003	6/25/2003	THOMAS HARRISON, DDS	ROBERT VASKO	10307 GREEN VALLEY LN	HOUSTON, TX 77064	160.00	108.65	108.65				max on 9-11-03 change - with three EOB's Mr Vasko is either at the last of his 80% or at 50%. Figured \$10.00 at 80% and the rest at	113.00 n	Hogge supplied proof the submitted claim from participant had already been paid. Pay \$0.00	\$(
ILA .	0.0857.000800		BRUCE M SHAW, DDS	ARTHUR COFFEY	1800 N E 114TH ST., #211	MIAMI, FL 33181	75.00		3.396.63				50%	n	Hogge provided information show previously paid claims indicated participant exceeded plan year benefit maximum.	\$(
ILA .			STUART H SAVEDOFF, DDS	CIRILO GARCIA	9601 S W 102ND ST	MIAMI, FL 33176	60.00	60.00						n	Hogge provided information indicates participant has exceed plan year maximum benefit. Hogge states pay zero	\$(
ILA	10/16/2003	10/16/2003	RICARDO A GARCIA, DDS	ISAAC JAMISON	2255 N W 175TH STREET	MIAMI, FL 33056	87.75	87.75	87.75				No change-EOB from prior year and wrong person	n	Proposed payment exceeds plan maximum	Sc
KLASSIC CONSTRUCTORS OF DUL	10/6/2003	10/6/2003	JOHN RENDE, DDS	SAMUEL JOHNSON	10010 74TH ST., UNIT G	KENOSHA, WI 53142	135.00	100 00	100.00				polison	n	Hogge has provided not previously supplied information that the claim submitted was already paid by MSB \$100 by CkW 059643 on 10- 16-2003	\$ \$0
MINOT PUBLIC SCHOOLS	5/13/2003	5/29/2003	R L WOOD, DMD	JEROME HERMAN	1700 SUNSET BLVD	MINOT, ND 58703-1632	430.00	315.00	315.00					n	Hogge established with previously unsupplied information that the submitted claims have been paid. Pay \$0.00	Sc
MINOT PUBLIC SCHOOLS	6/16/2003	6/16/2003	DAVID HERFENDAL, DDS	KAREN SCHELLING	406 31ST AVE SE LOT 202	MINOT, ND 58701-7183	83.00	26.40	26,40				change - with EOB	34.40 n	Hogee has established submitted claim was paid (paid \$34.40 Should pay zero	so
MINOT PUBLIC SCHOOLS	6/12/2003	6/12/2003	JOHN FISHPAW, DDS	MARY LUCAS	2305 23RD ST., SW	MINOT, ND 58701	137.00	100.00	100.00				change - with EOB	71.20 n	Hogge supplied evidence not previously provided that establishe the submitted claim was paid by MSB Ck #055380 in the amount o \$71.20 on 10-23-2003. Pay zero	s
MINOT PUBLIC SCHOOLS			GREGORY EVANOFF, DDS	MICHELLE BLIVEN-TAYLOR BLIVEN	1701 MEADOWLARK DR.	MINOT, ND 58701	99.00	99.00	99.00					n	Hogge supplied evidence that shows this submitted claim was paid 6-30-2003 in amt_of \$99 MSI Ck 050294. Pay zero	\$(
MINOT PUBLIC SCHOOLS	2/20/2003	4/14/2003	RONALD SOLBERG, DDS	MICHELLE GRUBB-GARRETT GRUBB	105 6TH AVE., NE	MINOT, ND 58703-2558	1,729.00	964.50	964.50					n	Hogge supplied evidence that shows this submitted claims were paid by MSB Chk # 050123; 32179;32347;3347;35745 totalling \$904.50 for Garrett Grubb Pay zero.	\$(
REPTRON MANUFACTURING CITY OF MINOT	9/16/2003 9/10/2003	9/16/2003 9/10/2003	THOMAS ZBARACKI, DDS GREER DENTAL	BARBARA LEON JOSEPH GROSS	7304 PELTON RD. 921 MAIN ST., N	BRITT, MN 55710 MINOT, ND 58703	900.00 48.00	550.00 48.00	550.00 48.00					n n	Hogge provided one additional claim not previously provided gross \$109.00 (paid \$100 on 4-17-03)	\$( \$!
CITY OF MINOT	9/3/2003	9/3/2003	DAVID KEUP, DDS	WILLIAM BROWN	1533 SE HIAWATHA ST	MINOT, ND 58703	57.00	45.60	45 60				no change - no EOB	n	resulted in reprocessed amount of \$5.60 Hogge provide one claim not previously provided gross \$87.00 (paid \$87 on 8-5-03) resulting in	\$13
MINOT PUBLIC SCHOOLS	8/21/2003	8/21/2003	DOUGLAS BENGSON, DDS	JULIA KOBLE-MOHN KOBLE	2201 56TH ST., NW	MINOT, ND 58703-8716	56.00	56.00	56.00				change - with EOB	44.00 n	inprocessed claim of \$13.00 Hogge states prior claim information not previously provided indicates EOB DOS 10/05/02, gross claim = \$56, net claim = \$56 was paid in bulk check MSB Ck No. 26598 in the amount of \$156, AP 02048 was paid on 08/07/03 if the amount of \$44, Op \$0.00 gross claim = \$81, net claim = \$44 The effect of these prior claims would leave a balance \$23 at the 0% level Hogge processed submitted unpaid claim to \$28.40	

EXHIBIT

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EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	PROOF 0	BJECTION	REPROCESS W/ EOB	AMOUNT AMOUNT	HOGGE_COMMENT	APPROVED AMOUNT
CITY OF MINOT	8/5/2003	8/5/2003	DAVID OLSON, DDS	DAVID GOODMAN-MICHELLE GOODMAN	1925 CENTRAL AVE	MINOT, ND 58701	78.00	62.40	62.40			TICLO	no change - no EOB	n	Previously unprovided EOB shows prior claims \$111_00 gross (paid \$100) resulted in reprocessed	\$ \$31.2
MINOT PUBLIC SCHOOLS	8/21/2003	8/21/2003	GREGORY EVANOFF, DDS	KIM PHILLIPS	121 19TH ST., NW	MINOT, ND 58703-2935	66.00	52.80	52.80				no change - no EOB	n	amount of \$31.20 Hogge provided information not previously supplied that indicated previous claim (MSB Ck. No. 31243 was paid on 0.411.03 in the amount of \$66, DOS 02/17/03, gross claim = \$66, nel claim = \$66 This reduced the payment of the submitted claim to \$32.00	1
CITY OF MINOT	2/7/2003	2/7/2003	SOURIS VALLEY DENTAL	CHARLOTTE HAGEL	2116 11TH AVE, NW	MINOT, ND 58703	85.00	85.00	85.00					n	Hogge one check not previously provide that resulted in a reprocessed amount of \$33.00	\$33.0
COLORADO RETIREES	9/15/2003	9/15/2003	TODD M PARCO, DDS	JOSEPH MARTINET-MELBA MARTINET	2630 HOLLYWOOD DRIVE	PUEBLO, CO 81005	92.00	73.60	73.60				No change	n	Hogge has evidence that Martinet was in Plan B and as a result processed to \$33.60	\$33.6
NORTHWESTERN ELECTRIC NORTHWESTERN ELECTRIC	10/3/2003 10/3/2003	10/3/2003 10/3/2003	DANN ROWE, DDS DANN ROWE, DDS	JASON WENDELBOE-ASHLEY WENDELBOE JASON WENDELBOE-GARRETT WENDELBOE	1248 310TH AVE 1248 310TH AVE	FREDERIC, WI 54837 FREDERIC, WI 54837	63.00 63.00	63.00 63.00	63,00 63.00					n	Hogge believes the submitted clair has already been paid by the participant's employer but would pay \$37.00 based on the fact a prior benefit payment for DOS 3-7.03 was paid on 9-24-03 at \$63.	\$37.0 \$37.0
CITY OF MINOT	7/24/2003	7/24/2003	GREER DENTAL	JOHN REYNOLDS-NICHOLAS REYNOLDS	1901 1ST AVE, SW	MINOT, ND 58701	97.00	97.00	97.00				change - with EOB	78.20 n	Hogge provided additional claim of gross \$97 (paid \$97 on 3-15-03) resulted in reprocessed amount of	74154544
CITY OF MINOT	9/17/2003	9/17/2003	DAVID HERFENDAL, DDS	SHANNON LACKEY	204 9TH ST., NW	MINOT, ND 58703	83.00	83.00	83,00				no change	n	\$38.20 Hogge provided one additional claim not previously provided gross \$115 (paid \$100 on 4-4-2003) resulting in reprocessed amount o \$38.40	1
NORTHWESTERN ELECTRIC	10/3/2003	10/3/2003	DANN ROWE, DDS	JASON WENDELBOE	1248 310TH AVE	FREDERIC, WI 54837	59.00	59.00	59.00					n	Hogge believes the submitted clair has already been paid by the participant's employer but would pay \$41.00 based on the fact a prior benefit payment for DOS 3-7.03 was paid on 9-24-03 { J AP 05145 was paid on 09/24/03 in the amount of \$59, DOS 307/03, gross claim = \$59, net claim =	
NWSPC WILLISTON PUBLIC SCHOOL	7/29/2003	7/29/2003	RON SEELEY, DDS	LORNA SKAVLEM	915 4TH AVE., E	WILLISTON, ND 58801	83.00	83.00	83.00					n	Processing error, Returned check is in the amount of \$41,50.	\$41.5
CITY OF MINOT	10/7/2003	10/7/2003	DAKOTA DENTAL	MINDY NEUHALFEN-KATIE NEUHALFEN	1080 54TH ST., N	GRANVILLE, ND 58741	86.00	86.00	86.00					n	Hogge provided previously unprovided information indicating previously paid claims \$591.50 resulting in a reprocessed amount of \$43.00	\$43.0
MINOT PUBLIC SCHOOLS	5/28/2003	5/28/2003	THEODORE BROWN, DDS	BETTY KAUFMAN	415 10TH ST N	MOUNTAIN LAKE, MN 56159-1507	56.00	56.00	56.00					n	Hogge states previously provided claim information not properly included in processing; Claim check for \$216.00 issued 12-26-2002 applied to plan year results in unpaid claim processing to \$44.60	n
CITY OF MINOT	9/15/2003	9/15/2003	SOURIS VALLEY DENTAL	KATHRYN HAUGEN	5210 38TH ST. SE	MINOT, ND 58701	84.00	84.00	84.00					n	Hogge found one check gross claim \$123 (paid \$100 on 4-14-2003) resulting in reprocessed amount of \$45.60	\$45.6
CITY OF MINOT	10/7/2003	10/7/2003	DAVID OLSON, DDS	DAVID GOODMAN-WYATT GOODMAN	1925 CENTRAL AVE	MINOT, ND 58701	106.00	53.00	53.00				no change - no EOB	n	One claim not previously provided gross \$83 (paid \$83) resulted in reprocessed amount of \$48.20	\$48.2
CITY OF MINOT	9/10/2003	9/15/2003	DAKOTA DENTAL	BRENT WEBER	710 10TH ST., NW	MINOT, ND 58703	104.00	100.00	100.00					n	Claims history shows payable to be \$52.00	\$52.0
CITY OF MINOT	10/1/2003	10/1/2003	MURRAY GREER, DDS	BRUCE HAUGEBERG	1415 4TH ST., SW	MINOT, ND 58701	109.00	100.00	100.00					n.	Hogge had check for \$75 not previously submitted; processed to \$52.20	\$52.2
MINOT PUBLIC SCHOOLS	5/7/2003	7/22/2003	STEPHEN L RICKS, DDS	LEONARD SALSEG	437 22ND ST., NW	MINOT, ND 58703-1849	171.00	136.80	136.80				change - with EOB	175.00 n	Hogge provided prior claims documentation showing a prior claim (MSB Chk No. 25250) was written on 12/02/02 in the amount of \$124 and the submitted claim with DOS 5-7-2003 was paid by MSB Ck. No. 052151 on 08/05/07/03, gross claim = \$105, net claim = \$84. This reduces the claim 10 the unpaid claim of \$86, DOS 05/07/03, gross claim = \$105, net claim = \$84. This reduces the claim to the unpaid claim of \$86, processed at 80%. Pay \$52.80	

EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	PROOF	OBJECTION		AMOUNT AMOUNT	HOGGE_COMMENT	APPROVED AMOUN
MINOT PUBLIC SCHOOLS	9/4/2003	9/4/2003	DAVID OLSON, DDS	CRAIG ERAAS	6800 18TH AVE., NW	MINOT, ND 58703-8805	111.00	100.00	100.00			7,550		n	Hogge provided information indicating previous claim benefits for plan year total \$553,10, putting benefit level at 50%, Hogge states pay \$55.50.	
MINOT PUBLIC SCHOOLS	7/2/2003	7/2/2003	DAVID OLSON, DDS	LINDA COOL-ADAM COOL	2512 BELAIR DRIVE	MINOT, ND 58703	111.00	100.00	100.00					n	Hogge supplied evidence to support prior benefit payments on Adam's behalf totaling \$672.50 Submitted unpaid claim of \$111.0 would process to \$55,50	\$55.6
MINOT PUBLIC SCHOOLS	7/17/2003	7/17/200	LOWELL CHENEY, DDS	KATHLEEN SCHULTZ-MOLLY SCHULTZ	1713 FOOTHILLS RD SW	MINOT, ND 58701	114.00	100.00	100.00					n	Hogge states prevously unsupplied claims information indicates a claim with DOS of 3-18-2003 paid on 4 21-2003 in the amount of \$722. (gross claim was \$1244 by MSB Ck. No. 32771. Hogge process submitted unpaid claim of \$114 to \$57.	
FEDERAL EMPLOYEE SERVICE CENTER	9/24/2003	9/24/200	3 RANDALL HOLLENBERG DDS	KARIE GULLEY-KACIE GULLEY	822 IVORY RIDGE	HOUSTON, TX 77094	115.00	100.00	100.00					n	Prior claim information for Kacle shows previous claim paid of \$503,50 not previously supplied indicates that the claim would process to \$57,50.	\$57.
MANGIERI ELECTRIC	6/13/2003	6/13/200	3 JOHN R BICEGO, DDS	COREY FROELICH	C/O P O BOX 1321, SHAVER AGENCY	GALESBURG, IL 61402	117.00	100.00	100.00					n	Hogge states prior claims information was not properly included in the processing of this claim Pay \$58.50	
WAYNE COMMUNITY COLLEGE	5/30/2003	9/2/200	3 PHILLIP BRANTLY, DDS	CARLOS COTTO	322 RINELAND DRIVE	GOLDSBORO, NC	115 00	216.00	216.00					n	Hogge submitted prior claims information which revealed claim was not properly unbundled. Carlos has submitted unpaid claims totaling \$115 Prior claims information from Mr. Hogge indicates this should process to \$59.00.	\$59.
MINOT PUBLIC SCHOOLS	8/11/2003	8/11/200	3 DAVID OLSON, DDS	JOHNET CHRISTIANSON	2075 76TH ST., NW	GLENBURN, ND 58740-9408	111,00	88.00	88.00					n	Hogge has provided a claim not previously provided which shows QB 34636 was paid on 06/06/06 the amount of \$39. Therefore the submitted claim of \$111 will adjudicate to \$51.00.	in
MINOT PUBLIC SCHOOLS	7/16/2003	7/16/200	3 DAVID OLSON, DDS	LINDA DEAN-DONAVAN DEAN	2939 79TH ST., NW	LANSFORD, ND 58750-9742	83.00	83.00	83.00					n	Hoggs supplied evidence to support prior benefit payments or Donovan's behalf totaling \$159.2 Submitted unpaid claim of \$83.0 would process at 80% to \$66.40	0.1
BETHESDA HOME	10/30/2003	10/30/200	3 HRUBY DENTAL	ROGER OR VERDA PITZL	527 NORTH 2ND ST	WAUBAY, SD 57273	134.00	100.00	100.00			1		n	4 prior claims note payments totalling \$419.50	\$67.
MINOT PUBLIC SCHOOLS	4/15/2003	9/30/200	3 STEPHEN L RICKS, ODS	PATRICK SHELDON	129 26TH ST., SW	MINOT, ND 58701-3355	168.00	114.40	114.40					n	Hogge established prior benefit payment of \$84 ( a AP 00125 wa paid on 06/23/03 in the amount of \$84, DOS 04/15/03, gross claim \$84, net claim = \$84). Reprocessed to \$67.00	of
HOT SPRINGS SCHOOL SYST	8/11/2003	8/11/200	3 C M KNOERNSCHILD, DDS	CHERYL A POOLE-IAN POOLE	102 BREEZE	HOT SPRINGS, AR 71901	100.00	100.00	100.00					n	Previously supplied check was n utbized due to no idenfication as which Poole family member the claim paid. Hogge supplied information that makes this che applicable to lan Poole. Hogge says the submitted unpaid claim should pay at \$69.00	lo
NEW MERCER COMMONS	10/23/2003	3 10/23/200	3 LESLIE PARIS, DOS	MARLENE HOEM	3831 STREAM CT	FT COLLINS, CO 80526	131.00	102.40	102.40					n	Hogge eatablished claimant was Columbine Health Group and ha received prior benefite in the plar year tolalling \$158.60. Hogge processed to pay \$70.00.	d
TEXAS PRINTERS	3/4/200	3/13/200	3 ROBERT WYNNE, DDS	MARLENE BRIVIC-AJAY BRIVIC	6003 SANDIA LAKE LN	HOUSTON, TX 77041	135.00	100.00	100.00				No change - EOB from prior year	n	Hogge has supplied previous cla information showing that a AP 09790 was paid on 0805/03 in the amount of \$85, DOS 01722/03. gross claim = \$85, net claim = \$1 As a result the submitted claim o \$135 would process to \$71,00	he 35.
CITY OF MINOT	7/16/200	7/16/200	3 GREER DENTAL	JOHN KARHOFF-LETICIA KARHOFF	17 ELM ST	BURLINGTON, ND 58722	131.00	100.00	100.00					n	Hogge provided one claim not previously provided gross \$38.0(paid \$38 on 8-5-2003) resulted reprocessed amount of \$77.20	\$77 ) in

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NORTHWESTERN ELECTRIC	10/3/2003	10/3/2003	DANN ROWE, DDS	JASON WENDELBOE-REBECCA WNDELBOE	1248 310TH AVE	FREDERIC, WI 54837	85.00	85.00	85.00			TILLU			n	Hogge believes this claim has already been paid by the employer but did not submit evidence that establishes this fact. Hogge agreed to pay the \$85	\$85.00
REPTRON MANUFACTURING	10/14/2003	10/14/200:	WILLIAM MAGAJNA, DDS	GABRIEL GRAY	114 1STAVE, W	KEEWATIN, MN 55753	178,00	122.40	122.40				Change-bundled under Gabriel Gray, Spirt two claims each were \$179.	122.40	n	Hogge provided prior claims history not previously supplied. AP 20940 was paid on 10/13/03 in the amount of 865, DoS 90/29/03, gross claim = \$55, net claim = \$55, AP 20941 was paid on 10/13/03 in the amount of \$226.50, DOS 10/01/03, gross claim = \$518, net claim = \$326.50, currently at the 50% level. Submitted unpaid claim is \$178, pay \$89	\$89.00
MINOT PUBLIC SCHOOLS	7/1/2003	7/1/2003	DAVID OLSON, DDS	JEFF HOLM-ZACHARY HOLM	700 11TH AVE., NE	MINOT, ND 58703-1527	115,00	100.00	100.00						n	Based on previously not supplied claim ACH EOB dated 11/11/02, gross claim = \$105, net claim =	\$92.00
			let													\$100 and AP 04098 dated 09/04/03 written for \$65,20, DOS 06/09/03, gross claim \$83, net claim \$65,20, \$33 at the 80% payout, leaving a balance of \$217 at the 80% payout, level. Hogge amount \$92,00	
MINOT PUBLIC SCHOOLS	5/5/2003	5/5/2003	A PATRICK LANDSIEDEL, DDS	MARLYS FANDRICH	1837 10TH ST., SW	MINOT, ND 58701-8413	242.00	173,00	173.00						n	Part of participant's submission was a claim for \$146 and a return check for \$95. The \$96 is not contested it relates to a separate claim date of service. Hogge contests the claim for \$4146 with a claim DOS of 5-5-2003. Hogge supplied not previously provided information that establishes the \$146 claim was paid by MSB CK No. 05289 on 81-40-30 (chi dated 6-30-2003) in the amount of \$113.20.	\$96.00
MINOT PUBLIC SCHOOLS	7/15/2003	7/15/2003	LARRY SCOUTON, DDS	BARBARA SANDHOFNER	3 DURANGO DR	BURLINGTON, ND 58722	170.00	116.00	116.00						n	Hogge provided previously unprovided claims information showing DOS 4-17-2003 charge of \$92.00 paid \$92 on 6-30-2003 MSB Chk No.050258, Hogge states claim should pay at \$98.60	\$98.60
CONROE ISD	9/22/2003	9/22/2003	G TODD BRADY, DMD	SUSAN LINTON	75 SCARLETWOODS CT	THE WOODLANDS, TX 77380	175.00	125.00	125.00				no change - no EOB		n	Hogge supplied information that the participant was in Plan B, not Plan A and should have processed	\$100.00
MINOT PUBLIC SCHOOLS	10/22/2003	10/22/200	CURTIS KUMPF, DDS	CINDY BRAAFLAT	225 SOURIS DR	MINOT, ND 58701-5030	128.80	128.80	128.80				No change-EOB not applicable		n	to \$100.00  Hogge states processing error.  Should have processed to \$100.00	\$100.00
MINOT PUBLIC SCHOOLS	10/16/2003	10/16/2003	CURTIS KUMPF, DDS	DARRYL STRUBE	1505 51ST AVE., SW	MINOT, ND 58701-7618	137.00	109.60	109.60				No change-EOB for prior year		n	Hogge claims processing error. New plan year should process to \$100.	\$100.00
RANTEC POWERS SYS	10/21/2003	10/21/200	3 ALAN J SPANO, DDS	DAVID FEARS-FAYE FEARS	630 MAR VISTA DR	LOS OSOA, CA 93402	201.00	140.80	140.80				138.00	138.00	n	Hogge provided additional prior claim information that established claimant was at 50% level of benefits payable. Pay \$100.50.	\$100.50
MINOT PUBLIC SCHOOLS	6/26/2003	6/26/200:	DAVID HERFENDAL, DDS	SUSAN CHELGREN-JOHN CHELGREN	2000 LAKESIDE ST	MINOT, ND 58703-0893	177.00	121.60	121.60						n	Hogge established prior benefit paments of \$100 (a AP 07365 was written on 10/10/03 in the amount of \$100, DOS 06/02/03, gross claim = \$130, net claim = \$100 leaving a balance of \$20 at the 0% (level). Submitted unpaid claim of \$177 processed to \$101.60	\$101.60
PACIFIC GENRAL INC	9/26/2003	9/26/200	3 JAMES DITTBERNER, DDS	JAMES DE YOUNG	6685 ARAYA RANCH RD	FLAGSTAFF, AZ 86004	214.00	151.20	151.20						n	Hogge surmises prior claims based on the fact that a check for a claim paid 50% of the submitted claim; He processes the submitted claim of \$214 to \$107. Based on plan design, Hogge may be correct.	\$107.00
PREMIER RESOURCES	9/15/2003	9/15/2003	WAL-MART VISION	TIM CARPENTER	221 S FOURTH, APT #6	BURR OAK, MI 49030	157.00	145.60	145.60						n	Hogge provided vision plan information not previously available. Processed submitted claim of \$157 to \$115.60.	\$115.60

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MINOT PUBLIC SCHOOLS	8/11/2003	8/12/2003	GMARK HILDAHL, DDS	KATHY FEIST-STEPAHNIE FEIST	1133 23RD ST., NW	MINOT, ND 58703	247.00	AMT 177.60	177.60			, constant	change- not sure it orthobenefits are paid seperately. These claims on Stephanie Feist are for a cleaning \$131.00 and filling \$116.00. If averything is combined Stephanie maxed out around 3-03.		n	Hoggs provided evidence that Stephanie received a total of \$575 in plan benefits for the applicable plan year. Hoggs states submitted unpaid claim should process at 50% to \$123.50	\$123.5(
COLUMBINE HEALTH SYS			WELLS & ABRAMES FAMILY DENTISTRY	CHERRIE THORNTON	825 BITTERBRUSH LANE	FT COLLINS, CO 80526	199.00	150,00	137.00						n	Hogge provide evidence that wrong plan design was applied. Processed to \$124,50	\$124.50
NWSPC DICKINSON PUBLIC SCHOOL	7/8/2003	912912003	3 N/A	SHELIA OLSON	P O BOX 375	VELVA, ND 58790	183 00	183.00	183.00						n	Hogge states processing error. Claim should process to \$126.60	\$126.60
					0.0004004	ST. JOHN, ND 58369	187.00	187.00	187.00						n	per plan design. Hogge states claim processing	\$129.60
NWSPC BELCOURT SCHOOLS			3 KENARD TURNER, DOS	REBECCA HANSON	P O BOX 301											error. Pay\$129,60	\$131.00
MINOT PUBLIC SCHOOLS	8/26/2003	9/18/2003	GREER, GREER & NUTTER	BONNIE OLSON	1630 1ST ST., SE	MINOT, ND 58701	440 00	220.00	220.00						П	Hogge has provided previously unprovided back up on claims that estabishes a prior claims payments in the plan year totaling \$951.00; Nevertheless Hogge recommends \$131.00	
MINOT PUBLIC SCHOOLS	6/24/2003	7/24/2003	3 DAVID OLSON, DDS	LINDA COOL-MASON COOL	2512 BELAIR DRIVE	MINOT, ND 58703	287.00	209.60	209.60				no change - no claims or EOB		n	Hogge supplied evidence to support prior benefit payments on Mason's behalf totaling \$672.50. Submitted unpaid claim for payment \$287.00, Process to \$143.50 pay \$143.50	\$143.50
CAROLINA CAST STONE	9/15/2003	9/15/00	3 PIEDMONT ORAL MAXILLOFACIAL	JULIA PYRON-ASHLEY PARHAM	245 HUTCHINSON ROAD	STONEVILLE, NC 27048	309,00	227.20	227.20			X			n	Hogge reprocessed with additional claims and checks to \$154.50	\$154,50
CITY OF MINOT	10/7/2003	10/9/2003	3 DAKOTA DENTAL	MINDY NEUHALFEN-ROGER NEUHALFEN	1080 54TH ST., N	GRANVILLE, ND 58741	225.00	160.00	160.00						n	Hogge provided previously unprovided information indicating previously paid claims \$188.40 resulting in a reprocessed amount of \$155.10	\$155.10
NWSPC LIDGERWOOD PUBLIC SCHOOL	9/16/2003	9/16/2003	3 JAMES MAROTZKE, DOS	JANICE ILLIES	P O BOX 278952	LIDGERWOOD, ND 58053	227.00	181.60	181.60						n	Hoggs supplied previous claim information showing a AP 01198 was written on 07/03/03 in the amount of \$20, DOS 04/22/03, gross claim = \$20, net claim = \$20, \$20 uikized at the 100% level. The result is the submitted claim of \$227 would process to \$157.60.	\$157.69
MINOT PUBLIC SCHOOLS	7/9/2003	7/22/2003	3 N/A	TRACEY LAWSON	509 19TH AVE., SW	MINOT, ND 58701	326.00	220 80	220.80				change - documentation shows Ashley's benefit year was 10-1-02 to 9-31 03. DOS 10-2-30.3 for \$141.00 is not eligible		n	Hogge submitted evidence to support benefit psyments to Trace, Lawson totaling \$260 20. (a OB 27660 was paid on 01/31/03 in the amount of \$93, DOS 12/26/02, gross claim = \$93, net claim = \$93 ; a OB 30/42 was paid on 03/20/03, gross daim \$446, net claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim = \$78 20 n at 50 km sheet claim	3
CITY OF MINOT	9/24/2003	10/7/2003	3 DAKOTA DENTAL	MINDY NEUHALFEN-REBA NEUHALFEN	1080 54TH ST., N	GRANVILLE, ND 58741	274.00	199.20							n	Hogge provided previously unprovided information indicating previously paid claims \$115.20 resulting in a reprocessed amount of \$163.10	\$163.10
TEXAS PRINTERS	8/18/2003	6/18/200	3 KAREN BRUNE, DDS	STEVEN ROBB	3904 LEELAND	HOUSTON, TX 77003	235.00	220.00	220.00						n	Hogge indicates a processing error. Submitted claim of \$235 should process to \$168.	\$168.00

EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED		PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	OBJECTION	REPROCESS W/ EOB	REPROCESS	Agree	HOGGE_COMMENT	APPROVED AMOUNT
NWSPC HARVEY PUBLIC SCHOOL	6/24/2003	9/9/200	33 MARLIN MEHARRY, DDS	CONNIE SCHNEIDER	240 KENNEDY DR	HARVEY, ND 58341	273.00	AMT 218.40	218.46			FILED			n	Hogge supplied previously unsupplied prior claims Information showing that claims paid on behalf of the claims. It claims paid on behalf of the claims. It claims paid on the claims. It claims paid on the amount of \$100.00; no B 33434 was written on 0615103 in the amount of \$303.00; a CB 34438 was written on 6005030 in the amount of \$100.00 ) Total claims checks written = \$223, which means that \$157.50 has been utilized in the 10% level, leaving \$92.25 remains at the 80% sevel. The gross claim would then process to \$173.40	\$173.40
CITY OF MINOT	7/21/2003	7/24/200	3 SOURIS VALLEY DENTAL	ROBERTA RIPPLINGER-CRYSTAL RIPPLINGER	821 1ST ST, SE	MINOT, ND 58701	271.00	196.80	196.80				change	216.20	) n	Hogge provided one claim not previously provided gross \$87 (paid \$87 on 2-5-03) resulting in	\$179.40
MINOT PUBLIC SCHOOLS	6/4/2003	9/30/200	33 GREGORY EVANOFF, DDS	MICHELLE BLIVEN-KRISTEN BLIVEN	1701 MEADOWLARK DR.	MINOT, ND 58701	432.00	316.00	316.00						n	reprocessed amount \$179.40 Hogge supplied evidence to support that the submitted claim for COS 6.4-2003 has been paid by MSB Ck No. 055328 on Sept. 4, 2003. This reduces the submitted claim to \$359 00. Additional evidence submitted shows a claim COS of 9.9-2003 of \$15 (paid at \$7.50) was paid on behalf of Kristen. Submitted unipaid claim of \$359 would process at 50%. Pay \$179.50.	\$179.50
CITY OF MINOT		. :20-20/2000	3 GREER DENTAL	JOSEPH GROSS-VALERIE GROSS	921 MAIN ST., N	MINOT, ND 58703	273.00	198.40	198.40						n	Hogge found information to support an earlier check to be assessed to Valerie gross \$109 (paid \$100) resulte in payment \$195.60	\$185.60
MANGIERI ELECTRIC	6/19/2003	10/2/200	JOSEPH R NICHOLAS, DDS	BRIAN MARLOW-MARLA MARLOW	103 BROOKVIEW COURT	ABINGDON, IL 61410	283.00	206.40	206.40						n	Hogge claims processing error.  Prior claims were not properly taken into account. Recommends	\$193.10
CITY OF MINOT	1 353504.555	1000 AVA 1700 A	CURTIS KUMPF, DDS	BRUCE INGEBRETSON	1424 HIAWATHA ST.	MINOT, ND 58701	337.00	249.60	3300000						n	pay \$193.10 Hogge had 2 checks not previously provided—claim processed \$197.15	\$197.15
PREMIER RESOURCES	9/25/2003	9/25/200	3 PEARLE VISION	JOANN GORTH	20 CONTROL COURT	MIDDLE RIVER, MD 21220	483.95	400.00	400.00						n	Hogge provided information regarding vision plan not previously available. Processed submitted claim of \$483.95 is 200. (gloss claim = \$483.95 is 200. (gloss 550 is 250 i	\$200.00
MINOT PUBLIC SCHOOLS	4/3/2003	8/19/200	3 PATRICK LANDSIEDEL, DDS	KATHY STROUD	P O BOX 187	LANSFORD, ND 58750-0187	439.90	439 90	439.90						n	Hegge provided information that indicated that the submitted claim for DOS 4-30-2003 \$46 had informed had been paid by MSB CK. No. 053128 was paid at \$48 on 8-12-2003; submitted unpaid claim for DOS 5-14-2003 for \$86 was paid on 9-4-2003 by MSB CK. No. 055580 in the amount of \$52.00. Other claims history shows previously paid claims of DOS 507280/3, gross claim = \$50, net claim = \$28.60. MSB paid \$28.60 on 8-13-2003 (MSB CK No. 053109). This further reduces the submitted unpaid claim for 02/03 plan year to \$303.90. Hogge recommended reprocessing. With prior claims and paid claims, processed to \$216.15	\$216.15
ILA			3 RICHARD SALZMANN, DMD	WILLIAM NEILSON	9873 S W 59TH STREET	COOPER CITY, FL 33328	326.00	326.00	326.00						n	Processing error-pay \$228.00. No prior claims and \$100 deductible not taken appropriately.	\$226.00
GALVESTON ISD	10/13/2003	10/13/200	3 KENNETH GLUSKI, DDS	MARGARITA ESTRADA	717 BROADWAY, #3	GALVESTON, TX 77550	350.00	270.00	270.00						n	Prior claim was not properly included in processing for this plan year. Pay \$226.50	\$226.50

EMPLOYER	BEGINNING	DOS		MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	OBJECTION FILED	REPROCESS W/ EOB	REPROCESS AMOUNT	Agree H	HOGGE_COMMENT	APPROVED AMOUNT
MINOT PUBLIC SCHOOLS	7/7/2003	10/30/200	DALE DOHMS, DMD	ROSIE RODRIGUEZ	707 6TH AVE., SW, APT 203	MINOT, ND 58701-4264	378.00	282.40	282 40			X			ir lo ir T is ip ip	tegge submitted prior claims formation that is only appicable op and of this claim, \$46 was neutred in new plan year 03/04. Hat would pay \$46. Mr. Hogge ubmitted evidence to support reviously unreported benefit ayments on behalf of Rosie \$67.00. Submitted unpaid claims is 2/020 plan year of \$332 would process to \$232.20. Pay \$232.20	\$232.2
ILA			FREDDY GUERRERO, DDS	PETER VALLEDOR	15571 SW 31ST LN	MIAMI, FL 33185	1,340.00	1,249.00	1,240.00				no change - no EOB		5 fo (!	togge supplied not previously upplied information evidence that articipant had received benefits or the plan year totalling \$1,760.01 MSB Check Nos 52533, 51011, 1735, 058023. Participant benefit of it is \$240.00	
NWSPC HARVEY PUBLIC SCHOOL			3 MARLIN MEHARRY, DOS	GAYLE LEE-ROBERT LEE	513 PLEASANT ST	HARVEY, ND 58341	482.00	341.00	341.00						n H 6 (1 5	logge supplied information that stablishes prior claims payments or this participant totaling \$455.20 MSB Chk nos. 50861, 50830, 10831, 33753, Claim should rocess to \$241.00	\$241.0
CITY OF MINOT			MARK MAERCKLEIN, DDS	JAMES MERCK-MAJORIE MERCK	1008 19TH AVE., SW	MINOT, ND 58701	560.00	380.00	380.00				Change- reprocessed with an additional claim DOS 11-5-03 for \$69.00	314 50	n C	One new claim not previoulsy provided gross \$560 (paid (380,00) resulted in reprocessed mount \$286,30	\$286.3
CITY OF MINOT	9/26/2003	9/23/2003	NOT PROVIDED	JEFFREY BLOMS-GWEN BLOMS	5 GLACIAL POINT	MINOT, ND .58703	404.00	302.00	302.00						n H ci 9 9	logge provided 2 checks and laims not previously provided (ross \$83.00 (paid \$83 on 8-5-03) (ross \$48.00 (paid \$17 on 10-10- 3) resulted a reporcessed amount f \$287.50	
MSALC			VADNAIS HGTS. FAMILY	JOEL MELINE-KIM MELINE	4250 BRIDGEWOOD TERRACE	PORT ST LUCIE, FL 34953-5710	467.00	333.50	333.50						n H b o p	logge established that prior enefits have been paid on behalf If Kim in the amount of \$100 not reviously attributed to Kim. Submitted claims now process to 303.25	\$303.2
NORTHERN BUSINESS PRODUCTS			STEPHEN HERO, DDS	CHARLENE JACQUART	2346 APPLE RIDGE DR	DULUTH, MN 55811-4280	610.00	405.00	405.00						n H u sl b o ai	logge provided previously nasupplied claims information that hows prior benefit payments on ehalf of Charlens of \$94 (AP 4653 was paid on 09/09/03 in the mount of \$94, DOS 05/19/03, ross claim = \$94, not claim = 94). Submitted unpaid claim of 610 would process to \$308.	\$308.00
NALCS_MINNEAPOLIS	9/24/2003	10/16/2003	ROGER AUSTIN, DDS	NEIL HEIGES	4089 146TH AVE., NW	ANDOVER, MN 55304	1,959.44	1,079.00	1,079.00				no change - EOB from prior year		pi pi lh	logge supplied information not reviously provided that indicates articipant was in the 750 plan, not the 1500 as previously processed. 315.00	\$315.00
ST LUKES NURSING	10/17/2003	10/17/2003	JASON DAHL, DDS	JOAN BREW	121 6TH AVE., W	DICKINSON, ND 58601	1,422.00	711.00	711.00			x			n H bi cl pi su re	logge would process to \$777.00 ut he processed claims not in hronological order. However with rior claims information currently upplied, only \$324.40 in benefits amain for Ms. Brew for the plan ear under the \$1000 plan to pay n this claim. Pay \$324.40	\$324.40
MINGT PUBLIC SCHOOLS	7/23/2003	7/23/2003	JOHN FISHPAW, DDS	DIANA TURNER	232 28TH AVE., SE	MINOT, ND 58701-7197	698.00	399.00	399.00					•	pi pa C pi gr 20	logge supplied previously not rovided claims information Claims yament of \$100 was paid by MSB k No. 26711 on 01/15/03 and a revious claim DOS 6-28-2003 cross \$102, paid \$51 on 7-31-03 MSB Ck No. 051808. Hogge lates submitted claim of \$698 hould pay \$349.00	

EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	OBJECTION	REPROCESS W/ EOB	REPROCESS Agr	ee HOGGE_COMMENT	APPROVED AMOUN
WARD CO SOC. SERVICES	9/29/2003	9/29/2009	STANLEY HIRST, DDS	FERN BILLADEAU	715 24 AVE., NW	MINOT, ND 58703	621.00	362 50	362.50				no change	n	Hogge supplied prior claim information not previously provided that shows first that Fern Billadeau chose the Plen 1000 according to invoicing; second o Q8 32004 was paid on 04/17/03 in the amount of \$6 and to AP 03093 was paid on 07/25/03 in the amount of \$54.40, DOS 05/06/03, gross claim = \$117, net claim = \$54.40, which puts Fern at the 80% level, leaving \$137 at the 80% level, leaving \$137 at the grocessing of the submitted unpair claim of \$621 to process to \$351.60.	9 3 1
BETHESDA HOME	10/9/2003	10/20/200	3 JOHN SORBEL, DDS	DARLENE RUMPCA	14370 441st AVE	WEBSTER SD 57274	600.00	400.00	400.00					n	a prior claim exists	\$352, \$359.
CAROLINA CAST STONE	9/23/2003	9/23/0	8 ALAN IRVIN, DDS	DARLENE RUMPCA JULIA PYRON-ASHLEY PARHAM	245 HUTCHINSON ROAD	WEBSTER, SD 57274 STONEVILLE, NC 27048	600.00 664.45	400.00 359.53	359.53			X	change - with EOB	394.23 n	Hogge reporcessed with additional claims and check information to \$359.53	
NWSPC HARVEY PUBLIC SCHOOL	10/17/2003	10/17/200	3 DELVIN HANSEN, DDS	KENNETH SCHILD	2641 22ND ST., NE	HARVEY, ND 58341	534.00	478.00	478.00					n	Hogge states claim processing error. Submitted claims of \$ \$534 should process to \$367.	\$367.0
JOHNSON MEMORIAL HOME	7/28/2003	7/28/200	3 THOMAS W HANSEN, DDS	NANCY FOSSE	121 NORTH 5TH STREET	DAWSON, MN 56232	594.00	397.00	397.00					n	Hogge claims processing error and established prior claims paid reducing payable to \$369.61	1000000
NWSPC WILDROSE ALAMO PUBLIC SCHOOL	7/25/2003	7/25/200	3 FACE & JAW SURGERY	LORNA CARLSON-JONATHAN CARLSON	8669 99TH AVE., NW	POWERS LAKE, ND 58773	1,370.00	1,000.00	1,000.00					n	Hogge supplied prior claim information not previously provider. Plan year is 10-1 to 9-30. On 2-3-2003 payment on MSB dkd/2635 paid a claim with DOS of 11-25-2002 for \$625.00. Hogge believes claim submitted for DOS 7-25-2003 should process to \$375. (plan max is 1000 and the processed amount is the remaining benefit.	
MINOT PUBLIC SCHOOLS	6/24/2003	6/30/200	3 CURTIS KUMPF, DDS	JENNY NELSON	604 13TH AVE., NE	MINOT, ND 58703-1569	796.00	449.00	449.00				Change - docmentation shows other claims	467.30 n	Hogge has one additional claim and EOB showing claim gross \$70 (paid \$56 on 9-4-2003 MSB Ck#055393) Claim processed \$380.50	\$380.5
MINOT PUBLIC SCHOOLS	9/17/2003	9/17/200	3 GREGORY EVANOFF, DDS	STEPHEN MARTIN	2400 23RD ST, SW	MINOT, ND 58701-6811	675 00	437.50	437 50					n	Hoggs supplied information not previously provided that established Mr. Martin received prior paid benefits of \$100. (cr AP 06549 was paid on 090/4/03 in the amount of \$100, DOS 06/2/4/03, gross claim \$114, but claim \$100, leaving is balance of \$36 at the 0% leavily balance of \$36 at the 0% leavily would process to \$394.5 which would process to \$394.5 would proces	3
COLUMBINE HEALTH SYS-CENTRE PHARMACY	10/15/2003	3 10/15/200	3 ROBERT L LAMB, DDS	REGINA SNYDER-ERICA NORWAK	6519 ABERDOUR CIRCLE	WINDSOR, CO 80550-7012	3,070.00	1,000.00	1,000.00				change - max on benefits after visit on 10-	601.00 n	Hogge provided information that showed participant was in standard	\$419.0
													15-03		plan, not premier plan-processed to \$419.00	
CENTRAL MN JOBS & TRAINING	8/6/2003	8/6/200	3 ENDODONTIC ASSOCS	KRISTA MCFARLAND	301 ASH AVE., NE	ST MICHAEL, MN 55376	1,110.00	655.00	655.00					n.	Participant did not proof payment - only proved \$430.00	\$430.0
SOUTHVIEW ACRES	9/30/200	9/30/200	3 DAKOTA FAMILY DENT.	CARMEN BESSLER	1331 VIRGINIA ST., #4	CHARLESTON, WV 25301	870.00	507.49	507.49					n	Hogge supplied evidence of prior claim payment on Ms. Bessler's behalt. QB 35712 was paid on 06/30/03 in the amount of \$124 03. Submitted gross claim of \$870 would now process to \$435 00.	
MIMCO	7/8/200	3 7/8/200	3 EDWARD MAPULA, DDS	ROBERT AYOUB-CELESTE AYOUB	624 COEUR D'ALENE	EL PASO, TX 79922	775.00	487.50	487.50				No change - no EOB for Celeste	n	Hogge provided a prior claim on Celeste (DOS 5-5-03 \$110; paid b MSB Chk No. 054550 \$100). Claim was not previously identified with Celeste. Pay \$442.50	
MINOT PUBLIC SCHOOLS	9/24/200	3 10/29/200	3 CURTIS KUMPF, DDS	CINDY BRAAFLAT-CARTER BRAAFLAT	225 SOURIS DR	MINOT, ND 58701-5030	716.00	462.50	462.50					n.	Hogge slates processing error. Should have processed to \$458.00	
CITY OF MINOT	8/13/200	9/20/200	3 MICHAEL MCMAHON, DDS	CHERYL GESSNER	400 18TH AVE., SE, #26	MINOT, ND 58701	927.00	563.50	563.50					n	Hogge had one check not previously provided resulting in a reprocessed amount \$529.00	\$529.0

EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	OBJECTION FILED	REPROCESS W/ EOB	REPROCESS	Agree	HOGGE_COMMENT	APPROVED AMOUNT
MINOT PUBLIC SCHOOLS	6/25/2003	3 10/27/204	DS MURRAY GREER, DDS	DAWN STREMICK	1609 CENTENNIAL ST., SW	MINOT, ND 58701	1,339.00	669.50	669.50			5	change - with EOB	650.00	n	Hogge supplied previously not supplied claims information that shows prior claim DOS 10-15-2002 gross claim of \$700 was paid not 11-13-2002 in the amount of \$450 (MSB CK No. 24317) and prior claim DOS 410-2003 gross claim of \$75 was paid on 6-30-2003 in the amount of \$37.50 (MSB CK No. 050261). Hogge states pay \$512.50 which is the balance of the benefit for that plan year. However, \$1.90 of the submitted unpaid claim of \$1339 was incurred in a new plan year. Therefore with the prior claim information as supplied by Mr. Hogge the claim would process \$1230 times 50% equals \$615 (but plan yes \$12.50 which is all the benefit for plan year 02/02, Pay \$100 for the claim for \$109, incurred in new ghan year 03/04, Total RMI payment as now provided by Hogge: \$612.50.	
NWSPC HARVEY PUBLIC SCHOOL	9/9/2003	9/9/200	03 MARLIN MEHARRY, DOS	LORI SCHIMKE	408 CLARK AVE	HARVEY, ND 58341	1,080.00	655.00	655.00						n	Hogge states processing error. Submitted claims of \$1060 should process to \$630,00	\$630.00
MID-AMERICA STEEL	8/11/2003	8/29/200	03 LUNDSTROM & SKARI	JOHN TESKE	808 5TH AVE., E	WEST FARGO, ND 58078	1,113.00	\$1,000.00	\$1,000.00						n	Hogge states claim was not processed, but simply given the	\$651.50
CITY OF MINOT	9/26/2003	9/23/200	03 NOT PROVIDED	JEFFREY BLOMS-BLAIR BLOMS	5 GLACIAL POINT	MINOT, ND 58703	1,205.00	1,000.00	1,000.00						n	max Should pay \$651.50 Hogge provided one claim not previously provided gross \$125 (paid \$79.20 on 8-5-03) resulted	\$655.00
MINOT PUBLIC SCHOOLS	3/3/2003	10/22/200	03 DAVID HERFENDAL, DDS	ARLYN MARQUARDT	1809 14TH ST., SW	MINOT, ND 58701-6175	1,551.00	875.50	875.50				No change		n	reprocessed amount of \$665.00 Hogge shows prior checks attirbutable to claims in plan year 02-03; 03-04 claim was processed	\$699.00
MINOT PUBLIC SCHOOLS	5/29/2003	5/29/200	03 PATRICK LANDSIEDEL, DDS	ROBERT HALL-NANCY HALL	14118 SUMMIT DR	STERLING, CO 80751	1,348.00	774.00	774.00				no change		n	to \$599.00 Hogge established through supporting documentation not previously provided that prior benefits paid on behalf of Nancy tolal \$164.80. The submitted unpaid claim of \$1348 would process to \$724.70	\$724.74
MINOT PUBLIC SCHOOLS	9/8/2003	9/16/200	D3 DAVID OLSON, DDS	JEFF HOLM	700 11TH AVE., NE	MINOT, ND 58703-1527	1,363.00	781.50	781.50				no change- no EOB		n	Based on previously not supplied claim DOS 11-14-2002 of \$111.00, paid \$100, Hogge amount adjusts to payment of \$	\$746.64
MINOT PUBLIC SCHOOLS	9/8/2003	9/9/200	D3 DAVID OLSON, DDS	LINDA COOL-GREG COOL	2512 BELAIR DRIVE	MINOT, ND 58703	2,653.00	1,000.00	1,000.00				no change - no claims er EOB		n	746.60 Hagge supplied evidence to support prior benefit payments on Greg's behalf totaling \$236. Submitted unpaid claim for payment \$2,653.00, annual maximum = \$1000, benefit remaining = \$1000 · \$236 = \$764 pay \$764	\$764.00
NWSPC WILLISTON PUBLIC SCHOOL	8/19/2003	8/19/200	03 JOHN GRUNSETH, DDS	JAMES WAGNER -DARLENE WAGNER	151 S BREWER DR	PUEBLO WEST, CO 81007	1,444.00	822.00	822.00				no change- no EOB for Darlene Wagner		n	Previously unsupplied claim information shows or AP 05164 was paid on 10/10/03 in the amount of \$100, DOS 06/11/03, gross claim = \$117.50, not claim = \$100. Therefore the submitted claim of \$1444 would process to \$778.75.	\$778.7
COLORADO RETIREES	9/12/2003	9/27/200	03 TODD M PARCO, DDS	JAMES D ROTH-LORETTA ROTH	48 BAYLOR ST	PUEBLO, CO 81005	1,520.00	1,200.00	1,200 00				No change-EOB's from prior year		n	Hogge provided two additional checks and EOB's resulting in a reprocessed amount of \$778.90	\$778.9
HOT SPRINGS SCHOOL SYST	10/8/2003	10/8/200	03 ARKANSAS OMS, P.A.	SUSAN CHAPMAN-RYAN CHAPMAN	119 SUBURBAN DR	HOT SPRINGS, AR 71901	1,160.00	1,000.00	1,000.00				no change- EOB does not give enough information		n	Hogge believes claim should process to \$790 under plan design	
TORAH ACADEMY	8/21/2001	8/21/200	DI WALTER PARSONS, DDS	BINYOMIN GINSBERG-ELIEZER GINSBERG	2837 MONTEREY PKWY	ST LOUIS PARK, MN 55401	4,953.00	1,000.00	1,000.00						n	Hogge only processed the charges incurred during the year, not the entire full ortho amount, since that is being charged out monthly by the dentist. Processed payment is \$928.00	\$928.0

EMPLOYER	BEGINNING	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	PROOF	OBJECTION	REPROCESS W/ EOB	REPROCESS Ag AMOUNT	HOGGE_COMMENT	APPROVED AMOUNT
MINOT PUBLIC SCHOOLS	6/11/2003	6/11/200	3 DALE DOHMS, DMD	SHERRY BRODERICK	41 ROLLING HILLS DR	MINOT, ND 58703	1,262.50	1,262.50	1,262.50			FILED		n	Hogge supplied information that indicates these claims were in one plan year and were processed incorrectly. Pay \$1,000	\$1,000.00
CONROE ISD	9/11/2003	10/2/200	3 WOODLANDS DENISTRY	MIKE MARSH	23 SWEETDREAM PLACE	THE WOODLANS, TX 77381	1,905.00	1,200.00	1,200.00					n	Hogge would have processed out rather than just pay max. Processed to \$1,077.50	\$1,077.50
LINK RECREATIONAL	10/15/2003	10/15/200	3 MARK R JUNG, DDS	PATRICK HULT	34768 305TH ST	BATTLE LAKE, MN 56515-9304	931.00	565.50	565.50					n	Hogge provided two prior claims not previously provided. AP 18014 was processed on 101/10/03 for \$113.60, DOS 091/00/3, gross claim = \$167, net claim = \$113.60 MSB Ck. No. 058988 and AP 18675 was processed on 10/10/00 for \$46.40, DOS 0917703, gross claim = \$58, net claim = \$46.40 MSB Ck. No. 058998. Hogge states submitted unpaid claim should pay \$535.50	3
BLACK CANYON INN	7/31/200	3 7/31/200	3 WILLIAM R PIKE, DDS	THERESA MURRAY-AMBER MURRAY	P O BOX 1472	ESTES PARK, CO 80517	344.00	172.00		172.00	) Y			n	Hoggs believes plan terminated or June 30, 2003. Documents that IF has indicates plan termination effective August 1, 2003. Hogge believes zero payment due. We believe zero payment for late proof of payment (zero)	1
INTEK	11/13/200	2 12/19/200	Z TIM KAPPENMAN, DOS	DAVID FEIST-HANNAH FEIST	6709 W 53RD ST.	SIOUX FALLS, SD 57106	299.00	219.20	219.20		2	x	207.00	207.00 n	Hogge states claim was already paid by ACH deposit to David Feis on 12-30-2002 in an amount of \$150 (was a bundled check payment) Hogge has supplied this information earlier, ACH statements show a check run but do not indicate the payment was received by the participant. Additional evidence submitted by Hogge indicates payment made to Feist account.	E .
INTEK	5/20/200	5/20/200	33 TIM KAPPENMAN, DDS	DAVID FEIST-HANNAH FEIST	6709 W 53RD ST:	SIOUX FALLS, SD 57106	116.00	88.30	88.30			×	69.00	69.00 n	Hogge believes claim was already and by ACH deposit to David Fels ACH runs show listings but do not indicate the payment was received by the participant. Additional evidence supplied by Hogge indicates payments made to Felst bank account.	
INTEK	9/18/200	9/18/200	02 TIM KAPPENMAN, DDS	DAVID FEIST-JORDAN FEIST	6709 W 53RD ST.	SIOUX FALLS, SD 57106	98.00					x	No change	y	Hogge states claim was already paid by ACH deposit to David Feis on 10-17-2002 in an amount of \$98 (was a bundled ACH paymen of \$298) Hogge has suppide this information earlier, ACH statements show a check run but do not indicate the payment was received by participant. Additional evidence supplied by Hogge indicates payments made to Feist account.	ıt
INTEK	3/19/200	3/19/200	33 TIM KAPPENMAN, DDS	DAVID FEIST-JULI FEIST	6709 W 53RD ST.	SIOUX FALLS, SD 57106	72.00	20.80	20.80			x	No change-EOB for prior year	n	Hogge states claim was already paid by ACH deposit to David Feis on 4-10-2003 in an emount of \$59.20 (was a bundled check payment) Hogge has supplied this information earlier. ACH statements show a check run but do not indicate the payment was received by participant. Additional information supplied by Hogge indicates payments received into Feist bank account.	5
RNTEK	3/19/200	3/19/200	03 TIM KAPPENMAN, DDS	DAVID FEIST-TYLER FEIST	6709 W 53RD ST.	SIOUX FALLS, SD 57106	86.00	30.40	30.40			x	No change	n	Hogge states claim was already paid by ACH deposit to David Feis on 4-10-2003 in an amount of \$59.20 (was a bundled check payment) Hogge has supplied this information earlier. ACH statements show a check run but do not indicate the payment was received by participant. Additional evidence submitted by Hogge indicates payment was made into Feist bank account.	9

EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	PROOF	OBJECTION	REPROCESS W/ EOB	REPROCESS AMOUNT	Agree HOGGE_COMMENT	APPROVED AMOUNT
GRISWOLD COMMUNITY SCHOOL	10/9/2003	10/9/2003	SATLANTIC DENTAL	DORIS RIEKEN	P O BOX 548	GRISWOLD, IA 51535	92.00	33.60	33.60						Hogge states plan design pays 0* of first \$100. Plan design document provided by Mr. Hogge earlier discloses plan pays 0% of first \$50, 80% of \$250 and 50% or next \$800. Hogge would pay zero Hogge removed objection	e of
MINOT PUBLIC SCHOOLS	7/31/2003	7/31/2003	THOMAS SLAGLE, DDS	ANDREW SCHAFER	8036 FERGUSON RD	PEYTON, CO 80831	83.00	41.50	41.50						h Hogge states previously provided claims check in the amount of \$508 00 (MSB Ch N, 0,3570) was not properly accounted for in processing the submitted unpaid claim. Claim was not properly unbunded to reflect actual claim was for five individuals, not just M Schaefer based upon the submitted proof of payment. Mr. Schaefer's claim was \$3.00, the balance belonging to his family as now reflected. Objection removed.	i.
WINTHROP & WEINSTINE	8/12/2003	8/12/2003	ROBERT GRIMM, DDS	PHILIP COLTON	7205 SCHEY DRIVE	EDINA, MN 55439	104.00	100.00	100.00						Hogge states Colton on \$500 plan but did not supply supporting evidence. RMI processed Colton on \$1500 plan as that was the ADA form provided by Hogge previously. RMI Amount \$100; Hogge amount \$43.20. Hogge supplied additional evidence confirming Colton on \$500 plan.	n, \$43.20
GRISWOLD COMMUNITY SCHOOL	10/7/2003	10/27/2003	SATLANTIC DENTAL	IVAN LYNCH	603 1 ST, BOX 64	GRISWOLD, IA 51535	106.00	44.80	44.80						Hogge states plan design pays 09 of first \$100. Plan design document provided by Mr. Hogge earlier discloses plan pays 0% of first \$50, 80% of \$250 and 50% onext \$600. Hogge would pay \$4.80Hogge removed objection.	e of
ST PAUL APWU	10/20/2003	10/20/2003	FRANKLIN STEEN, DDS	KEITH LANDSMAN	903 CHRISTENSEN AVE WEST	W. ST PAUL, MN 55118	58.00	58.00	59.00						h Hogge would pay zero as he stall Landsman was not in jeho no dat of service. Hogge has not supplie information to substantiate his position. He has provided prior claims information that shows prior benefit payments of \$14 and \$86 benefit payments of \$14 and \$14 DOS 06/28/03, gross claim = \$14 net claim = \$14 and and AP 19401 check was written on 10/02/03 in the amount of \$86, DOS 05/29/02 gross claim = \$215, not claim = \$180, After reviewing Mr. Hogge's documentation, MSB incorrectly processed AP19401. This error was not submitted for reimbursement. Therefore the actual benefits paid balance was used by RMI as prior paid benefits as well as credit to the participant for the unpaid portion he should have received to process the submitted claim, which would put Mr. Lundstrom at 80%. Submitted unpaid claim \$59 processes to \$45.40. Hogge amount zero. RMI revised amount \$46.40. Hogge objection removed.	te dd S S In I,
NWSPC WILLISTON PUBLIC SCHOOL	8/13/2003	8/13/2003	WILLIAM MAISEY, DDS	SANDRA SCHILKE-LARRY SCHILKE	508 15 AVE., W	WILLISTON, ND 56801	64.00	51.20	51.20						Claim was not properly unbundler when reviewed by Hogge. After unbunding, \$64.00 claim for Larry would process to \$61.20 based o prior claim history. Hogge objectio withdrawn.	y in
MID AMERICA STEEL	10/24/2003	10/24/2003	STHOMAS KAPLA, DOS	THOMAS ADAMS-PAMELA ADAMS	1613 WLCHITA DR	BISMARCK, ND 58504	115.00	57.50	57.50						Hopge amount recommended based on member/employee clain Claims were incorrectly sited and not unbundled. With prior claims history, Pamela Adams is at 50% amount. Pay \$57.50. Objection removed.	

EMPLOYER	BEGINNING	DOS	1.16-30-6300000	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	PROOF	OBJECTION FILED	REPROCESS W/ EOE	REPROCESS AMOUNT	Agree	HOGGE_COMMENT	APPROVED AMOUNT
KLNENTERPRISES	10/21/200	3 10/21/200	36 SMITH FAMILY DENTISTRY	JOYCE LEE	37690 CO HWY 36	FRAZEE, MN 56544	79.00	65.68	65.68			14.50			n	Hogge argues the claim should pay \$23,20 because he slates there is no prior claim. We show a claim check MSB Ck No. 28579 (provided to us by Hogge) for \$137.60 written in the current plan year. Our recommended amount is \$65,28. Hogge withdrew objection.	00000000
MINOT PUBLIC SCHOOLS	7/31/200:	3 7/31/200	DS THOMAS SLAGLE, DDS	ANDREW SCHAFER-NOAH SCHAEFER	8036 FERGUSON RD	PEYTON, CO 80831	74.00	74.00	74.00						n	Hogge states previously provided claims check in the amount of \$508.00 (MSB Chk No. 30570) was not properly accounted for in processing the submitted unpaid claim. Claim was not properly unbundled to reflect actual claim was for five individuals, not just Mr. Schaefer. Mr. Schaefer foliam was \$83.00, the balance belonging to his family as now reflected. Objection removed.	\$74.0
MINOT PUBLIC SCHOOLS	7/31/2003	3 7/31/200	3 THOMAS SLAGLE, DDS	ANDREW SCHAFER-CONNIE SCHAEFER	8036 FERGUSON RD	PEYTON, CO 80831	83.00	83.00	83.00						n	Hogge states previously provided claims check in the amount of \$508.00 (MSB Chk No. 30570) was not properly accounted for in processing the submitted unpaid claim. Claim was not properly unbundled to reflect actual claim was for five individuals, not just Mr. Schaefer. Mr. Schaefer's claim was \$83.00, the balance belonging to his family as now reflected.	\$83.00
NWSPC WILLISTON PUBLIC SCHOOL	9/29/2003	9/29/200	03 WILLIAM MAISEY, DDS	SANDRA SCHILKE	508 15 AVE., W	WILLISTON, ND 58801	104.00	83.00	83.00						n	Claim was not properly unbundled when reviewed by Hogge. After unbundling, \$104 claim for Sandra processed to \$83.00 based on prior claims history. Hogge objection withdrawn.	\$83.00
NALCS_MINNEAPOLIS	10/21/2003	10/21/200	3 RONALD LABELLE, DDS	BERNICE MAY	3100 85TH AVE., N, #201	BROOKLYN PARK, MN 55443	85.00	85.00	85.00						n	Hogge argues claim should only pay \$27 because Hogge alleges the insurance agen/broker paid Ms. May \$58 toward Ihis claim. No evidence submitted to support allegation. RMI Amount \$85.00. Hogge objection withdrawn.	\$85.00
MID AMERICA STEEL	6/18/2003	6/18/200	33 THOMAS KAPLA, DDS	THOMAS ADAMS-LUKE ADAMS	1613 WLCHITA DR	BISMARCK, ND 58504	100.00	100.00	100.00						n	Hogge amount recommended based on member/employee claim Claims were incorrectly listed and not unbundled. This is reimbursement claim for returned check. Hogge removed objection.	\$100.00
MID AMERICA STEEL			3 THOMAS KAPLA, DDS	THOMAS ADAMS	1613 WLCHITA DR	BISMARCK, ND 58504	100.00	100.00	100.00						n	Hogge amount recommended based on member/employee claim. Claims were incorrectly listed and not unbundled. This is reimbursement claim for returned check. Objection removed.	\$100.00
MINOT PUBLIC SCHOOLS			3 THOMAS SLAGLE, DDS	ANDREW SCHAFER-GABRIEL SCHAEFER	8036 FERGUSON RD	PEYTON, CO 80831	141.00	0.000	100.00						n	Hogge states previously provided claims check in the amount of \$508.00 (MSB Chk No. 30570) was not properly accounted for in processing the submitted unpaid claim. Claim was not properly unbundled to reflect actual claim was for five individuals, not just Mr. Schaefer: Mr. Schaefer sclaim was \$83.00, the balance belonging to his family as now reflected.	
MINOT PUBLIC SCHOOLS	7/31/2003	7/31/200	3 THOMAS SLAGLE, DDS	ANDREW SCHAFER-SAMUEL SCHAEFER	8036 FERGUSON RD	PEYTON, CO 80831	141.00	100.00	100.00						n	Hogge states previously provided claims check in the amount of \$508.00 (MSB Chk No. 30570) was not properly accounted for in processing the submitted unpaid claim. Claim was not properly unbundled to reflect actual claim was for five individuals, not just Mr. Schaefer. Mr. Schaefer. Kin. Schaefer. Kin. Schaefer. Kin. Schaefer. Salim was \$83.00, the balance belonging to his family as now reflected. Objection removed.	\$100.00

EMPLOYER	BEGINNING DOS	DOS		MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	F OBJECTION	REPROCESS W/ EOB	REPROCESS	Agree HOGGE_COMMENT	APPROVED AMOUN
MINOT PUBLIC SCHOOLS	6/25/200		03 MURRAY GREER, DDS	DAWN STREMICK-BENJAMIN STREMEICK	1609 CENTENNIAL ST., SW	MINOT, ND 58701	124.00	AMT 100.00	100.00			FILED			n Hogge provided prior claims information but is inapplicable to the submitted claim as it is in a new plan year. Objection removed Hogge notes his business closed four days before date of service.	1
MINOT PUBLIC SCHOOLS			03 MURRAY GREER, DDS	DAWN STREMICK-LISA STREMICK	1609 CENTENNIAL ST., SW	MINOT, ND 58701	118.00	100.00	100.00						n Hogge provided prior claims information but is inapplicable to the submitted claim as it is in a new plan year. Objection removed. Hogge notes his business closed four days before date of service.	\$100.
STEPHEN AUSTIN ALUMNI ASSN			03 LARRY HANCOCK, DDS	BAILEY NATIONS-FRANCES NATIONS	3706 CHEVY CHASE	NACOGDOCHES, TX 75965	114.00	100.60	100.60						n Hogge amount is based on wrong plan benefit outline. Claims history already provided. Hogge amount \$60.60. RMI amount \$100.60. Hogge removed objection.	
MINOT PUBLIC SCHOOLS  MINOT PUBLIC SCHOOLS			03 SOURIS VALLEY DENTAL	LEANNE GRONDAHL	517 12TH ST., SW	MINOT, ND 58701	151.00	100.80	100.80				no change- no EOB		n Hogge provided prior claims information that Indicates Learn Grondath maxed out benefits in 02/03 plan year and states claim should pay zero. Submitted unpaid claims were incurred in new plan year commencing 10/1/2003 so prior claims not applicable. Hogge removed objection.	
			03 DAVID HERFENDAL, DDS	SHIRLEY BROWN-TASHA BROWN	1518 GLACIAL DR	MINOT, ND 58703	129.00	103.20	103.20						n Hogge recommended plan rnaximum. Claim was not properly denoted as an unbundied claim. Claims have now been unbundied. He recommends \$1,000 for all Brown claims as bundied. Per Court Order-unbundied for Tasha Brown is \$103.20, Hogge objection withdrawn.	\$103.2
INTERSPEC			33 LAKESIDE DENTAL	STEPHEN PITTSINGER-CAEY PITTSINGER	741 LAKE PARK DR	LITTLE ELM, TX 75068-3085	155.00	150.00	150 00				no change - no EOB		n Hogge states claim should pay only at \$100. No plan document provided. Plan application shows \$1500 plan with plan year starting 8-1-2001. Hogge suggested breakdown would indicate payment of \$104, not \$100.	70000
MID AMERICA STEEL  MATHIAS DIE	7.00 2.00 2.000		33 THOMAS KAPLA, DDS	THOMAS ADAMS-TAMMY ADAMS	1613 WLCHITA DR	BISMARCK, ND 58504	107.20	107.20	107.20						n Hogge amount recommended based on member/employee claim Claims were incorrectly listed and not unbundled. This is reimbursement claim for returned check. Objection removed.	\$107.2
MINOT PUBLIC SCHOOLS			3 THOMAS KLOSTER, DDS	CHARITY WILLIAMS-JASON WILLIAMS	2174 45TH AVE	STAR PRAIRIE, WI 54026	165.00	112.00	112.00						n Processing error. Hogge beleved claim was for Charity, not Jason based on incorrect listing on spreadsheet. Claim processed correctly. Hogge removed objection.	\$112.0
		15236090	3 JOHN FISHPAW, DDS	DIANNE WALLACE	717 5TH ST., NE	MINOT, ND 58703-2601	199.00	119.20	119 20				Change - dates 7-30-03, & 8-11-03 bundled together. Need to unbundle which changed amount	123.80	n Hogge claims processing error. Hogge amount is \$99.50. Objection removed with reprocess amount	\$119.2
WINTHROP & WEINSTINE	10/20/2003	16/20/200	3 SOUTHDALE DENTAL	JEFFREY BLAND	7 LAYTON TERRACE	MINNEAPOLIS, MN 55404	209.00	147.20	147 20				OTTAMES.		n Hoggs states Bland on \$500 plan, but did not supply supporting endence. RMI processed Bland on \$1500 plan as that was the ADA form provided by Hoggs previously RMI Amount \$147.20, Hoggs amount \$127.20. Hoggs additional information confirming Bland on \$500 plan	2.

EMPLOYER	BEGINNIN	DOS	3	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	PROOF	OBJECTION	REPROCESS W/ EOB	REPROCESS	Agree	HOGGE_COMMENT	APPROVED AMOUNT
NALC-MILW	9/28/200		ALAN SHILMOVITZ, DDS	KENNETH SULLIVAN	6801 ENGE DRIVE	WEST BEND, WI 53090	292.00	204.00	204.00			FILED	change - with EOB	180.80	) n	Hogge has provided information that has already been taken into consideration. Many of the claims he argues are not applicable in the plan year for the submitted unpaid claims. Hogge states payment should be \$140. RMI \$180.80. Plan only porvided for a 6 month plan year per SPD supplied by Hogge (61-12003 to 12-31-2003). Additional information supplied by Hogge (61-12003 to 12-31-2003). Additional information supplied by Hogge (61-12003 to 12-31-2003). Additional information supplied by Hogge indicates claim processed to \$213.60 minus a primary insurance payment of \$77. Pay \$136.60.	\$136.60
CONROE ISD	9/3/200	1	003 JEFFREY LEWIS, DDS	MARY L WILSON-RONALD WILSON	3 CEDAR WING LANE	THE WOODLANDS, TX 77380	284.00	207.20	207.20				no change EOB prior year		n	Hogge identified 2 previous claims not previously provided and reprocessed \$142.00	\$142.00
COMMUNITY BAPTIST			003 HUGH A BIALECKI, DMD	MACK BRADEN	P O BOX 836	LAKE ARROWHEAD, CA 92352	203.00	169.00	169.00						n	reprocessed \$142.00 Hogge believes ealier claim check shoul be applied to claim and would process under the \$1,000 generic plan and reprocessed amount \$129.20. Ublized Conroe Plan \$1200 as actual plan document not available.	\$153.60
NWSPC LIDGERWOOD PUBLIC SCHOOL			003 OMS ASSOCIATES	DONALD NASH-BRUCE NASH	210 6TH AVE., SE	LIDGERWOOD, ND 58053	222.00	157.60	157.60				No change- no EOB for Bruce Nash who claim is on		n	Hogge supplied previous claim information on Donald. It is not applicable to the submitted claim from Bruce Nash, Hogge objection	\$157.60
NALCS_MINNEAPOLIS			003 GREGORY LECY, DDS	RICK ERKS-SARAH ERKS	806 6TH AVE., SE	PIPESTONE, MN 56164	320.00	160.00	160.00						n	withdrawn. Hogge argues claim should pay zero; he alleges an insurance broker has paid the claimant in full. No evidence has been suppiled to support the allegation at this point. Hogge objection withdrawn.	\$160.00
NALC-MILW			003 NIAL PETERSON, DDS	MICHAEL PETROWSKY-LAURA PETROWSKY	1054 5TH AVE	GRAFTON, WI 53024	248.00	182 00	162.00			x	no change - Have an EOB on Laura and a claim on Michael		n	Hogge has provided information that has already been taken into consideration. Many of the claims he argues are not applicable in the plan year for the submitted unpaid claims. Hogge states payment should be \$166. RMI \$162.00. Plan only provided for a 6 month plan year per SPD supplied by Hogge (6-1-2003) to 12-31-2003). Hogge objection withdrawn.	\$182.00
NALC-MILW			003 NIAL PETERSON, DOS	MICHAEL PETROWSKY-PAUL PETROWSKY	1054 5TH AVE	GRAFTON, WI 53024	248.00	182.00	182.00			X			n	Hogge has provided information that has already been taken into consideration. The prior claim DOS was prior to 6-1-2003 and therefore not applicable to the submitted claim. Hogge stales payment should be \$158.40. RMI \$182.00. Plan only provided for a 6 month plan year per SPD supplied by Hogge (6-1-2003) to 12-31-2003). Hogge objection withdrawn.	\$182.00
NALCS-MINNEAPOLIS	9/26/2003	3 10/10/20	JAMES ERLANDSON, DDS	JOHN JOHNSON	8637 IRONWOOD AVE S	COTTAGE GROVE, MN 55016	291.00	212.80	212.80						n	Hogge argues plan changed. Hogge amount \$170.50, RMI amount \$212.80, Hogge objection	\$212.80
NWSPC DICKINSON PUBLIC SCHOOL			003 MORTON KREIG, DDS	MARY BRUELS	540 11TH AVE., W	DICKINSON, ND 58601	627 00	344.50	344.50						n	withdrawn. Hogge states claims should process to \$313.50. This is a returned check replacement. Per processing participant gets amount of returned check which is \$344.50. Hogge objection	\$344.50
MINOT PUBLIC SCHOOLS  MINOT PUBLIC SCHOOLS			DAVID HERFENDAL, DDS	SHIRLEY BROWN-TRAVIS BROWN	1516 GLACIAL DR	MINOT, ND 58703	505.00	352.50	352,50						n	withdrawn. Hogge recommended plan maximum. Claim was not properly denoted as an unbundled claim. Claims have now been unbundled He recommends \$1,000 for all Brown claims as bundled. Per Court Order-unbundled for Travis Brown is \$352,50. Hogge withdrew objection.	\$352.50
MINTO I FUBLIC SCHOOLS	//31/2003	9/2/20	003 DAVID OLSON, DDS	CRAIG ERAAS-MATTHEW ERAAS	6800 18TH AVE., NW	MINOT, ND 58703-8805	556.00	378.00	378 00						n	Hogge claims processing error. Hogge amount \$373.00. Hogge processing has error. \$556 minus 100 is not \$446. Objection removed by Hogge.	\$378.00

EMPLOYER	BEGINNING DOS	DOS		MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	OBJECTION	REPROCESS WI EOB	REPROCESS AMOUNT	Agree HOO	GGE_COMMENT	APPROVED AMOUNT
MINOT PUBLIC SCHOOLS	6/23/200	3 7/7/200	3 DAVID HERFENDAL, DDS	SHIRLEY BROWN-RICHARD BROWN	1516 GLACIAL DR	MINOT, ND 58703	669.00	384.50	384.50			FILED			rnaxi deno Clair He n Brov Cour	ge recommended plan imum, Claim was not properly teld as an unbundled claim, as have now been unbundled, ecommends \$1,000 for all in claims as bundled. Per tr Order-unbundled for Richard in is \$384,50	\$384.5
NWSPC WILLISTON PUBLIC SCHOOL  PACIFIC GENERAL INC			3 RANDOLPH PITZER, DDS	LINDA HAUGEN	308 E 20TH STREET	WILLISTON, ND 58801	575.00	387.50	387.50						\$283 of \$2 estal subn This unpa amo \$387 indic back	ge processed payment of 150 starts from a gross claim 250, not \$575. Prior paid claim bishes that \$79 of the mitted claim has been paid would leave \$496 as the gross id claim to process. This nut processed by RMI to \$50, which is the amount aled by MSB if would pay in 2009. Hogge objection frawn.	\$367.5
FEDERAL EMPLOYEE SERVICE CENTER			Z DAVID S MCCANN, DDS	MISTY FOWLER-K C FOWLER	65 SKYWOOD	LADERA RANCH, CA 92694	625.00	412.50	412.50						RMI no e claim supp claim \$387	ge used Plan B to process, used Plan A when there was vidence as to which plan nant was in, Hogge did not by information as to which plan nent was in, Hogge amount (.50, RMI amount \$412.50, ge objection withdrawn.	\$412.5
PEDERAL EMPLOYEE SERVICE GENTER	10/2/2003	10///2003	3 MARVIN OLIN, DDS	KARIE GULLEY-JAMES GULLEY	822 IVORY RIDGE	HOUSTON, TX 77094	774.00	562.00	562.00						not p that I \$420	claim information for Jamie previously supplied indicates the claim would process to 0.00. We show patient name	\$420.0
NWSPC MADDOCK PUBLIC SCHOOL	8/7/2003	8/7/2003	JAMES LAWSON, DDS	BRENDA FOSSEN	4590 31ST ST., NE	MADDOCK, ND 58348	488.10	444.10	444.10						n Hogg would \$244 claim by th chec \$8B to the alrea on cl	umes but no DOB, ye with pior ordaims information d process the claim to 105. Not all of the submitted is seflect just unreimbursed is. \$400.10 of line submission e claimant is for bad/refurned ks. The only unpaid claim is The \$80 was process by RMI 50% emount since RMI dy had pior claims informatin pilmant. Thus the processed amount is \$444.10. Hogge sion withdraws.	\$444_1(
NWSPC MADDOCK PUBLIC SCHOOL	9/3/2003	9/3/2003	FAMILY DENTISTRY	VALERIE JARBOE	P O BOX 828	GUERNSEY, WY 82214	805.00	502.50	502.50				change - EOB shows to be paid at 80% and 50%	452.50	shou base desig	ge believes gross claim \$805 Id process to \$429.50, RMI d on information and plan in processed to \$452.50, ge objection withdrawn,	\$452.50
CAROLINA CAST STONE	7/31/2003	9/23/2003	JOHN HAMRICK, DDS	PAUL SEWARD-BETTY SEWARD	1719 HAYNES AVE	GASTONIA, NC 28052	979.00	589 00	589.00				change	512 90	n Hogg	ge reprocessed with missing check to \$497.90	\$497.90
wspc	10/29/2003	10/29/2003	THOMAS FELLMAN, DDS	STAN HAGGART	806 ROSE STREET	LISBON, ND 58054	859.00	522.70	522.70						n Hogg unsu show was samo gross (part DOS on 00 DOS \$155 these unpa reimt 29-03 subm \$471	pe supplied previously poplied prior dismis information ing DOS 4-9-03 (a AP 01798 and on 080%) 30 in the Int of \$54, DOS 04.0903, cidim = \$38, not cidim = \$38, not cidim = \$34, rol cidim = \$4, rol cidim =	\$522.76

EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	PROOF	OBJECTION	REPROCESS W/ EOB	REPROCESS AMOUNT	Agree HO	DGGE_COMMENT	APPROVED AMOUNT
MANGIERI ELECTRIC	6/19/2003	3 10/2/200	3 JOSEPH R NICHOLAS, DDS	BRIAN MARLOW	103 BROOKVIEW COURT	ABINGDON, IL 61410	1,866.00	585.00	585.00			FILEO			\$4 tol rei Hic ch do Mr 10 inc	page recommended amount of 1984.0 is based upon prior claims lal as a balance benefit maining, However because Mr, page states plan year 11-1 to 10- 10-10, he falls to indicate that the \$97 rarge is in a new plan year. Plan ocuments previously supplied by t-Hogge indicate a plan year of 1-1 to 9-30. Our processed figure to the plant of the total country of the ferest to. We recommend our nount of \$585.00. Hogge moved objection.	
MINOT PUBLIC SCHOOLS	6/16/2003	6/16/200	MICHAEL MCMAHON, DDS	ANN RADI-ANNALISE M. RADI	2048 5TH ST., NW, APT 3	MINOT, ND 58703-1052	985.00	592.50	592.50						inf pro We Cla Wa Ho \$4 sh	ogge states prior claim ormation previously provided not oppenly accounted. Prior claims ere attributed to Ann Radi, aims were for Annalise (which as not properly noted by RMI), ogge states claim should pay 192.50. RMI claims payment ould be for \$592.50. Objection moved by Hogge.	\$592.50
MINOT PUBLIC SCHOOLS	10/20/2003	10/22/200	3 DAKOTA DENTAL	LEANNE GRONDAHL-SHANE GRONDAHL	517 12TH ST., SW	MINOT, ND 58701	987.00	593.50	593.50						n He inf Gr 02 sh un pla so	ogge provided prior claims ormation that indicates Leann ondahl maxed out benefits in 1/03 plan year and states claim outle pay 5364. Submitted apaid claims were incurred in new an year commencing 10/1/2003 prior claims not applicable, gge removed objection,	\$593.50
CONROE ISD	9/29/2003	9/29/200	RON BAUTSCH, DDS	KATHY BORUM-THOMAS BORUM	1116 N SAN JACINTO	CONROE, TX 77305	1,860.00	1,047.00	624.00				change - claim was on Thomas Borum for a total of \$1860.00. Mrs Borum paid out of pocket \$624.00. This looks like an ortho claim and there is documentation as how it is to be paid. If it goes with the standard benefit schedule this is the amount owed.	1,047.00	sh \$6	ogge believee processed amount ould be \$437.00. We believe 224.00 (patient only proved (24.) Objection was removed	\$624.00
ILA	4/22/2003	4/22/200	3 DAVID M FEINERMAN, DMD	LINTON ROWE-MARIA ROWE	3396 N W 33RD COURT	FT LAUDERDALE, FL 33309	1,564.00	1,220.00	1,175.00				no change EOB from prior year		an sh	ngge claims lhe processed mount was under Plan A and ould have been under Plan B	\$625.00
MINOT PUBLIC SCHOOLS	9/24/2003	9/24/200	3 DAVID HERFENDAL, DDS	SHIRLEY BROWN	1516 GLACIAL DR	MINOT, ND 58703	1,198.00	679.00	679.00						n Ho ma de Cla He Bri Co	d processed to \$625.00 sigge recommended plan aximum. Claim was not properly noted as an unbundled claim, aims have now been unbundled, recommends \$1,000 for all own claims as bundled. Per purf Order-unbundled for Shirty own is \$679.00. Hogge ejection withdrawn.	\$679.00
CAROLINA CAST STONE	7/31/2003	9/23/200	3 JOHN HAMRICK, DDS	PAUL SEWARD	1719 HAYNES AVE	GASTONIA, NC 28052	1,531.00	765.50	765.50				change	804.20	no pro Ho ma	ogge reprocessed with prior claim it previously received to a ocessed amount \$701.80. ogge does not have ADA form to atch with the check. Used IF signment of prior claims to judicale to \$701.90	\$701.80
CONROE ISD	9/10/2003	9/10/200	3 TODD HUGHES, DDS	LACHELLE GENTRY-COLE GENTRY	158 WISTERIA WALK CIRCLE	THE WOODLANDS, TX 77381	1,230.00	800 00	800.00				no change		n Ho shi cla fou	ogge believes process amount ould by \$711.50 based on a aim of \$57.00 (check was not und). Hogge reprocessed.	\$740.00
ST PAUL LUTHERAN SCHOOLS	10/13/2003	10/13/200	3 ROBERT THORNTON, DDS	CATHI HANSEN-ROBERT HANSEN	8636 HARRISON	MUNSTER, IN 46321	1,455.00	855.00	855.00						n Ho infe no Ro	ogge provided prior claim ormation for Cathi. Claim was Il properly noted as being for obert RMI amount is \$855. ogge objection withdrawn.	\$855.00

EMPLOYER	BEGINNING DOS	ENDING DOS	PROVIDER NAME	MEMBER NAME	ADD1	ADD2	GROSS	FINAL PROCESSED AMT	PARTICIPANT TIMELY PROVED AMT PAID	PARTICIPANT UNTIMELY PROVED AMT PAID	LATE PROOF	OBJECTION FILED	REPROCESS W/ EOB	REPROCESS AMOUNT	Agree	HOGGE_COMMENT	APPROVED AMOUNT
MINOT PUBLIC SCHOOLS	6/11/2003	6/11/200	3 STEPHEN RICKS, DDS	BLAINE BURCKHARD-SONDA BURCKAHRD	9460 4TH AVE	MINOT, ND 58703	1,600.00	900.00	900.00			FILED			n	Hogge states prior claims not properly taken into consideration, submitted unpied claims is for Sonda Burckhard (not properly noted by RMI). Therefore prior claim not applicable to Sonda Hogge recommends payment of 8835.50. RMI amount is \$900.00. Additional information supplied by Hogge indicates prior claim for Sonda. Hogge amount is \$858.00.	\$858.0
MINOT PUBLIC SCHOOLS	6/18/2003	6/18/200	S PATRICK LANDSIEDEL, DDS	COLLEEN HODENFIELD-CODY HODENFIELD	517 2ND ST., SE	MINOT, ND 58701-4424	2,161.00	1,000.00	1,000.00				No change-EOB not applicable		n	Hogge provided previously unsuppied claims Information that indicates a previous claim information and indicates a previous claim attributable to Cody with DOS 03/1903 was paid in the amount of \$99, processed and paid at \$99.00, however ACH payment of \$98 does not match the EOB of \$99.00, however ACH payment of \$98 does not match the EOB of \$99.00, however ACH payment of \$99.00, however ACH payment of \$99.00, however ACH payment of \$90.00, how the ACH payment o	
NWSPC DUMSEITH PUBLIC SCHOOLS	9/3/2003	9/30/200	3 NIEMI & VAN BUSKIRK	PAT BRENDEN	9589 23RD AVE., NE	DUNSEITH, ND 58328	1,580.00	916.00	916.00						n	Hogge states that prior claim with DOS of 6-30-2003 of \$20 was peak on 10-22-03. Though Mr. Hogge pxovided a canceled check-our copy of this check submitted by the claimant clearly indicates the check was returned for uncollected funds on 10-28-2003 Mr. Hogge etales claims should pay \$890. RMI recommends \$916. Hogge abjection withdrawn.	
MINOT PUBLIC SCHOOLS	18/7/2003	10/30/200	S PATRICK LANDSIEDEL, DDS	KATHY STROUD	P O BOX 187	LANSFORD, ND 58750-0187	2,541.90	1,000.00	1,000.00						n	Hogge submitted information on prior claims, however none of it was applicable to plen year 03/04 Hogge objection removed.	\$1,000.0
GRAPHIC PRINTING			N/A	GRAPHIC PRINTING	4301 WATERLEAF COURT	GREENSBORO, NC 27410	16,996.50	13,644.20	8,183.45						n	Hogge information supplied has	\$8,183.4
TRIANGLE COMPANIES			N/A	TRIANGLE COMPANIES	P O BOX 1189	ENID, OK 73702	41,767.44		20,064 20						n	changed adjudications.  Hogge has objections. See separate sheet. Hogge objections withdrawn.	\$18,782.2
DIRECT BENEFITS			N/A	DIRECT BENEFITS	111 EAST 5600 S, #304	MURRAY, UT 84107	51,579.80	30,338.50	25,940.92						n	Hogge has disputed claims Disputes resolved	\$25,940.9
HEALTH SYSTEM INNOVATIONS	8/25/2003	8/25/200	3 METRO DENTAL CARE	DAVID HOPTSTOCK-ARIANA HOPSTOCK	2126 S ROSEWOOD LN	ROSEVILLE, MN 55113	854.00	527.00	527.00						n	Hogge states the Appollene processed amount is correct at \$486.40. Based on plan design, the processed amount would be \$527.00. Hogge removed objection.	\$527.0
INTEK	9/18/2002	9/18/2003	2 TIM KAPPENMAN, DDS	DAVID FEIST-JULI FEIST	6709 W 53RD ST.	SIOUX FALLS, SD 57106	114.00	S#1				×	No change-EOB for prior year				\$0.00
INTEK	9/18/2002	9/18/2003	TIM KAPPENMAN, DDS	DAVID FEIST-TYLER FEIST	6709 W 53RD ST.	SIOUX FALLS, SD 57106	102.00					X	No change				\$0.00