

PROVIDER ID: M012    ABC MEDICAL CENTER  
 SAMPLE PHYSICIAN NETWORK  
 0123 ABC BLVD  
 NORTHRIDGE            CA    01234 0000

GROUP NAME	GROUP ID	PLAN CODE	RE-RATE MONTH	RATE EFF-DATE	NUMBER OF SUBSCRIBERS	NUMBER OF DEPENDENTS	TOTAL MEMBERS
SAMPLE 1	012345	61Y	1	10/01/04	2	1	3
SAMPLE 2	12345E	520	1	05/01/05	1	0	1
SAMPLE 3	2345EA	78H	4	04/01/07	3	0	3
SAMPLE 4	2345EA	541	5	05/01/05	3	1	4