

Texas Identification Number	Mail Code	Payment Number	Payment Type	Paying Agency	Total
17460007176	060	3336989	DD	529	102444.20

Document Number	Invoice Number	Invoice Description	Invoice Amount	Interest Amount
9SA23248	PC1274C VOUCHERID:27917	MEDICAID ADMINISTRATIVE CLAIMS (MAC) JULY-SEPTEMBER 2025	107,836.00	0.00
9SA23248	PC1274C VOUCHERID:27917	MEDICAID ADMINISTRATIVE CLAIMS (MAC) JULY-SEPTEMBER 2025	-5,391.80	0.00

Issue Date 05/21/2026

05/26/2026