

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK: PART 59-----X
In the Matter of

Index No.: 451399/2020

the Liquidation of

AFFIRMATIONQUALITY HEALTH PLANS OF NEW YORK, INC.
-----X

I, Melissa A. Pisapia, an attorney at law, duly admitted to practice before the Courts of the State of New York, hereby affirm under penalty of perjury under the laws of New York that the following is true, and that I understand that this document may be filed in an action or proceeding in a court of law.

1. I am an attorney with the New York Liquidation Bureau (“NYLB”), which serves as the staff of Adrienne A. Harris, Superintendent of the Department of Financial Services of the State of New York (“Superintendent”), in her capacity as liquidator (“Liquidator”) of Quality Health Plans of New York, Inc. (“QHPNY”). I submit this affirmation upon information and belief, based on my review of the QHPNY files maintained by the NYLB and the conversations I have had with employees of the Liquidator, in support of the Liquidator’s application for an order approving the Liquidator’s report on the status of and request to close the QHPNY liquidation proceeding (“Closing Report”) and the financial transactions therein detailed.

2. A copy of the proposed order is annexed hereto as Exhibit 1.

3. The Closing Report is annexed hereto as Exhibit 2.

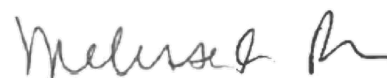
4. The Schedule of claims recommended for allowance is annexed hereto as Exhibit 3.

5. The Liquidator proposes to give notice of the return date of the accompanying Order to Show Cause by posting the Order to Show Cause and its supporting papers on the NYLB Internet web page at <https://www.nylb.org/home> under Legal and Estate Notices, within five (5) days following the Liquidator’s receipt of a signed copy of the Order to Show Cause.

6. No previous application for the relief sought herein has been made to this or any other court or judge thereof.

WHEREFORE, it is respectfully requested that the Court grant an order substantially in the form of the proposed order annexed hereto as Exhibit 1: (i) approving the Closing Report and the financial transactions detailed therein, annexed hereto as Exhibit 2; (ii) approving the Liquidator's recommendation regarding the allowance of certain Class Two policyholder claims set forth in the schedule attached hereto as Exhibit 3; (iii) authorizing the continued payment of actual and necessary administrative expenses incurred by the Liquidator in the administration of the QHPNY liquidation proceeding, including such expenses pertaining to the closing of the liquidation proceeding; (iv) authorizing the Liquidator to distribute QHPNY's assets, consistent with the priorities set forth in Insurance Law § 7434, to those Providers with allowed claims; (v) terminating and closing the liquidation proceeding; (vi) authorizing the Liquidator to receive and disburse, without further application to this Court, any receipts that are received after the termination of the liquidation proceeding; (vii) authorizing the Liquidator, after termination of the liquidation proceeding and without further order of this Court, to destroy or otherwise dispose of any and all of the books, files, records (paper or electronic) and other property of the QHPNY estate; (viii) releasing and discharging the Liquidator, her predecessors and successors in office, the NYLB, and their agents, attorneys and employees, from any and all liability arising from their acts or omissions in connection with the liquidation proceeding; and (ix) for such other and further relief that this Court deems just and proper.

Dated: New York, New York
October 31, 2024



Melissa A. Pisapia
Senior Counsel

Exhibit 1 – Proposed Order

At IAS Part 59 of the Supreme Court of the State of New York, County of New York, at the Courthouse located at 60 Centre Street, New York, New York, on the ____ day of _____, 202__.

P R E S E N T:

HON. DEBRA A. JAMES, J.S.C.

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

-----X
In the Matter of

Index No.: 451399/2020

the Liquidation of

ORDER

QUALITY HEALTH PLANS OF NEW YORK, INC.
-----X

Upon the motion of the Superintendent of the Department of Financial Services of the State of New York, as liquidator (“Liquidator”) of Quality Health Plans of New York, Inc. (“QHPNY”), through her staff at the New York Liquidation Bureau (“NYLB”) for an order, *inter alia*: (i) approving the Liquidator’s report on the status of and request to close the QHPNY liquidation proceeding (“Closing Report”), and the financial transactions detailed therein, including the Liquidator’s recommendation to allow certain claims filed in the liquidation proceeding, annexed as Exhibit 2 to the affirmation of Melissa A. Pisapia; (ii) approving the Liquidator’s recommendation regarding the allowance of certain Class Two policyholder claims set forth in the schedule attached to the Pisapia Aff. as Exhibit 3; (iii) authorizing the continued payment of actual and necessary administrative expenses incurred by the Liquidator in the administration of the QHPNY liquidation proceeding, including such expenses pertaining to the closing of the liquidation proceeding; (iv) authorizing the Liquidator to distribute QHPNY’s assets, consistent with the priorities set forth in Insurance Law § 7434, to those former Providers with allowed

claims; (v) terminating and closing the liquidation proceeding; (vi) authorizing the Liquidator to receive and disburse, without further application to this Court, any receipts that are received after the termination of the liquidation proceeding; (vii) authorizing the Liquidator, after termination of the liquidation proceeding and without further order of this Court, to destroy or otherwise dispose of any and all of the books, files, records (paper or electronic) and other property of the QHPNY estate; (viii) releasing and discharging the Liquidator, her predecessors and successors in office, the NYLB, and their agents, attorneys and employees, from any and all liability arising from their acts or omissions in connection with the liquidation proceeding; and (ix) for such other and further relief that this Court deems just and proper;

NOW, on the motion of the Liquidator, and no opposition having been filed with the Court, it is:

ORDERED, that the application is granted; and it is further

ORDERED, that the Closing Report and the financial transactions detailed therein are approved; and it is further

ORDERED, that the Liquidator's recommendation regarding the allowance of certain Class Two policyholder claims set forth in the schedule attached to the Pisapia Aff. is approved;

ORDERED, that the continued payment of actual and necessary administrative expenses, if any, including such expenses pertaining to the closing of the QHPNY liquidation proceeding, is authorized; and it is further

ORDERED, that the Liquidator is authorized to distribute QHPNY's assets, consistent with the priorities set forth in Insurance Law § 7435, to those Providers with allowed claims; and it is further

ORDERED, that the liquidation proceeding is terminated and closed; and it is further

ORDERED, that the Liquidator's receipt and disbursement, without further application to this Court, of any receipts that are received after the termination of the liquidation proceeding, is authorized; and it is further

ORDERED, that the Liquidator, after termination of the liquidation proceeding and without further order of this Court, is authorized to destroy or otherwise dispose of any and all of the books, files, records (paper or electronic) and other property of the QHPNY estate; and it is further

ORDERED, that the Liquidator, her predecessors and successors in office, the NYLB, and their agents, attorneys, and employees, are released and discharged from any and all liability arising from their acts or omissions in connection with the liquidation proceeding.

E N T E R

J.S.C.

Exhibit 2 – Closing Report

**FINAL REPORT ON THE STATUS OF AND REQUEST TO CLOSE
THE LIQUIDATION PROCEEDING OF
QUALITY HEALTH PLANS OF NEW YORK, INC.**

INTRODUCTION

Adrienne A. Harris, Superintendent of the Department of Financial Services of the State of New York (“Superintendent”), as liquidator (“Liquidator”) of Quality Health Plans of New York, Inc. (“QHPNY”), reports that upon approval of outstanding claims, detailed below, she has completed her duties regarding the liquidation of QHPNY.¹

The Liquidator submits this final report (“Closing Report”) to apprise the Court of the status of the liquidation proceeding and to respectfully request that the Court enter an order substantially in the form of the proposed order annexed as Exhibit 1 to the accompanying affirmation of Melissa A. Pisapia (“Pisapia Aff.”), *inter alia*, approving the Closing Report and the financial transactions detailed herein, including the Liquidator’s recommendation to allow certain claims filed in the liquidation proceeding as set forth in the schedule attached as Exhibit 3 to the Pisapia Aff., and terminating and closing the QHPNY liquidation proceeding.

BACKGROUND

A. QHPNY and Its Consent to Liquidation

QHPNY was incorporated in the State of New York on February 13, 2009, and obtained a certificate of authority from the New York Department of Health, effective May 13, 2009, to operate as a health maintenance organization in the State of New York. QHPNY was not authorized to operate in any state other than New York.

¹ The Liquidator has appointed David Axinn as Special Deputy Superintendent and Agent of the Liquidator and other agents to carry out through her staff at the New York Liquidation Bureau (“NYLB”) the responsibilities of the Liquidator.

Pursuant to Article 44 of the New York Public Health Law, QHPNY offered plans (“Plans”) providing Medicare Advantage and Medicare Advantage Part D prescription drug coverage to Medicare beneficiaries (“Members”), and healthcare services for Members through a network of hospitals and other healthcare service providers (“Providers”). All QHPNY’s Plans were terminated effective February 29, 2020.

By a written resolution dated March 30, 2020, QHPNY’s directors unanimously consented to the entry of an order of liquidation pursuant to Article 74 of the New York Insurance Law (“Insurance Law”).

On September 9, 2020, the Supreme Court of the State of New York, County of New York (the “Court”), entered an order placing QHPNY into liquidation and appointing the Superintendent as Liquidator (“Liquidation Order”). NYSCEF Doc. No. 13.

B. Bar Date

The Liquidation Order established the bar date (“Bar Date”), or deadline by which all claims against QHPNY or its insureds, other than the Liquidator’s claims for administrative expenses, were required to be submitted to the Liquidator as the earlier of (i) the contractual deadline established for the timely submission of claims in QHPNY’s health plans or agreements between QHPNY and its network of Providers for providing services to Members under the Plans; or (ii) four months from the date of entry of the liquidation order, *i.e.*, January 9, 2021.

C. Assignment of the D&O Claims

Northwell Health, Inc. (“Northwell”), QHPNY’s largest creditor, commenced a pre-liquidation directors and officers liability action against former owners, certain directors and officers of QHPNY and their affiliates, pending in Nassau Supreme, Index No. 602464/2020 (the “D&O Suit”). After the entry of the Liquidation Order, the Liquidator determined that QHPNY

also had similar claims against certain former owners, directors and officers (and their affiliates) of QHPNY but that the resources available to QHPNY to pursue the claims were too limited, especially in light of the litigation risks involved. As a result, with Northwell willing to take the entire litigation risk, the Liquidator negotiated the assignment of QHPNY's claims to Northwell so that Northwell could pursue the claims in its pre-existing D&O Suit. As part of the assignment terms, any recovery by Northwell on the assigned claims would, after legal expenses, be shared *pro rata* with other holders of allowed Class Two claims under the priorities set forth in Insurance Law §7434.

Thereafter, by order dated September 13, 2021, this Court approved an Assignment of Claims Agreement whereby the Liquidator assigned to Northwell QHPNY's claims against QHPNY's former owners, certain directors and officers, and their affiliated companies. *See* NYSCEF Doc. No. 31. The order approving the agreement provides that Northwell will, at their own expense, continue to litigate the claims. Any recovery will be submitted to the NYLB who, after deducting Northwell's legal expenses, will distribute monies *pro rata* to holders of allowed claims as set forth in Insurance Law §7434. Proceeding in this manner allowed the Liquidator to preserve QHPNY's assets thereby guaranteeing some distribution to holders of allowed claims while providing security that if there is a future recovery in the D&O Suit, then all holders of allowed Class Two claims would receive a further distribution in accordance with the priorities set forth in Insurance Law §7434.

As the Liquidator anticipated, the D&O Suit will most likely take years to be resolved. Indeed, at present, the Court in the D&O Suit is still dealing with motions addressed to the pleadings. Accordingly, the Liquidator believes it is in the best interests of the estate to close the

liquidation proceeding to allow distribution to holders of allowed claims to be made as soon as possible while preserving potential future distributions if the D&O Suit results in a recovery.

D. Classes of Creditors

The priority of distribution of assets from a liquidating insurer is set forth in Insurance Law §7434, which provides that all members of a senior class be paid in full before the members of the next class may receive any payment, and establishes the following classes of claims:

Class One – Administrative Claims

Claims with respect to the actual and necessary costs and expenses of administration, incurred by the Liquidator or rehabilitator;

Class Two – Policyholder Claims

All claims under policies, including claims of federal, state or local government for losses incurred, third party claims, claims for unearned premiums, and all claims of security funds or guaranty associations, but excluding claims under reinsurance contracts;

Class Three – Federal Government Claims

Claims of the federal government, except those under Class Two.

Class Four – Employee Claims

Claims for wages owing to employees of an insurer against whom an Article 74 proceeding is commenced and claims for unemployment insurance contributions required by Article 18 of the New York Labor Law;

Class Five – State and Local Government Claims

Claims of state and local governments, except those under Class Two;

Class Six – General Creditor Claims

Claims of general creditors, including but not limited to claims arising under reinsurance contracts;

Class Seven – Late Filed Claims

Claims filed late or any other claims other than claims state in Class Eight or Class Nine below; and

Class Eight – 1307 Loans

Claims for advanced or borrowed funds made pursuant to Insurance Law Section 1307;

Class Nine – Shareholder Claims

Claims of shareholders, or other owners in the capacity as shareholders.

CURRENT STATUS OF CLAIMS PRESENTED**A. Claims Submitted**

Because the deadlines for the submission of claims was no later than January 9, 2021, no additional claims or evidence in support of such claims against QHPNY or its insureds may be presented to the Liquidator. In total, 87,911 claims were filed in the liquidation proceeding, of which 87,906 were Class Two policyholder claims, one was a Class Three claim, and four were Class Six claims.

B. Adjudication of Claims

Based on QHPNY's severely limited assets and in an effort to maximize the distributions on claims, the Liquidator did not apply to the Court for adjudication procedures nor prepare individual Court Order applications for the allowance or disallowance of claims. Rather, the Liquidator classified claims in accordance with the statutory priorities set forth in Insurance Law §7434, utilized a standard claims adjudication process that provided claimants with an opportunity to object and be heard, and now seeks Court approval of certain claims in this Closing Report.

All timely filed claims were reviewed and classified. Those claims that were within a priority that would receive a distribution (*i.e.*, Class Two policyholder claims) were reviewed by the Liquidator. The Class Two claims were all filed by the Providers of medical services insured by QHPNY under a medical plan. Thereafter, the Liquidator mailed each Provider, *i.e.*, the holders of Class Two claims, a Notice of Determination ("NOD"), which informed them of (i) the number of claims recommended for allowance and the total amount recommended, if any, or disallowance, (ii) how the claimant can object to the Liquidator's determination; and (iii) the claimant's right to share in the distribution of QHPNY's assets, if any, based on the amount allowed. In addition, Providers were informed that if they accept the Liquidator's recommendation, they should return

a completed Form W-9, which was provided with the NOD. Attached hereto as Exhibit A is the form NOD and Form W-9 that were mailed to each Provider. The Liquidator received one objection only, which was resolved without the need for Court intervention.

After verifying Provider information from the completed Form W-9s, the Liquidator is now seeking Court approval of those Class Two policyholder claims that were recommended for allowance each in an amount greater than \$25,000.

1. Class Two Claims

Of the 87,906 Class Two policyholder claims, 178 were voided as duplicates, leaving 87,728 claims in the aggregate amount of \$38,062,743. For purposes of distribution, the 87,728 Class Two policyholder claims have been consolidated by Provider tax identification number into 2,076 Providers.

Of the 2,076 Providers, 1,944 Providers submitted claims to the Liquidator for \$25,000 or less, which did not exceed the \$25,000 threshold for claims allowances requiring Court approval. *See* Insurance Law §7602(g). Therefore, the claims of the 1,944 Providers have been allowed by the Superintendent. *See id.*

The remaining 132 Providers have submitted claims to the Liquidator for more than \$25,000 and therefore those claims require Court approval. *See id.* By this application, we seek Court approval of those claims recommended for allowance for more than \$25,000, and upon approval, the closing of the estate and termination of this proceeding.

a. Class Two Policyholder Claims of the 132 Providers Should Be Allowed

The Liquidator reviewed the claims of the 132 Providers and determined that such claims fall within Class Two as stated in Insurance Law §7434. Of the 132 Providers, the Liquidator verified the contact and payment information for 128 Providers. The four remaining Providers did

not respond to the Liquidator's multiple requests for verification of their contact and payment information. Because no objections were received, the Liquidator deemed those claims as accepted thereby allowing the claims to be paid as part of the distributions to holders of allowed Class Two claims.

The Liquidator respectfully submits that this Court approve the Liquidator's recommended allowance of the claims listed on the annexed Schedule in the total amount of \$38,062,743. (Pisapia Aff. Ex. 3). This will allow the Providers listed in the Schedule to share, *pro-rata*, in a distribution of the assets of QHPNY, if any, with respect to such claims. Proceeding in this fashion maximizes the amount of assets available for distribution to holders of allowed claims against the estate.

2. Claims Below Class Two

The Liquidator, acting on authority granted by this Court in the Liquidation Order, has refrained from adjudicating claims below Class Two because the estate has insufficient assets to pay Class Two claims in full. By refraining from adjudicating claims with no possibility of receiving a distribution, the Liquidator reduced costs thereby increasing the amount of assets available for distribution to holders of allowed Class Two claims.

FINANCIAL REPORT

QHPNY's Statement of Assets and Liabilities as of September 30, 2024, and QHPNY's Statement of Receipts and Disbursements for the Period September 9, 2020 to September 30, 2024, are attached hereto as Exhibit B.

A. As of September 30, 2024

As of September 30, 2024, QHPNY's records reflect total assets in the amount of \$783,858, and total liabilities in the amount of \$40,313,962.

1. Assets

As of September 30, 2024, QHPNY's records reflect total assets in the amount of \$783,858, consisting of \$533,412 in cash and cash equivalents, \$247,617 in bonds at fair market value, and \$2,829 in accrued investment income.

2. Liabilities

As of September 30, 2024, QHPNY's records reflect total liabilities of \$40,313,962, consisting of \$21,182 in Class One Administrative Expenses², \$38,062,743 in Class Two Policyholder Claims, \$2,158,391 in Class Three Federal Government Claims, and \$71,646 in Class Six General Creditor Claims.

3. Collection of Assets

As of September 30, 2024, the Liquidator collected a total of \$86,712 in assets consisting of \$50,248 in investment income and \$36,464 in premium collected.

4. Disbursements

As of September 30, 2024, the Liquidator had incurred \$668,533 in administrative expenses, consisting of: \$134,705 for salaries of the Liquidator's staff and related payroll taxes, \$199,529 for rent and related expenses, \$232,839 for professional fees (*e.g.*, audit of financial statements and legal fees), and \$100,169 for general and administrative expenses (*e.g.*, insurance, office equipment and supplies, printing, postage and telephone services). In addition, the Liquidator incurred \$1,291 in miscellaneous expenses.

5. Payment to Claimants

² This amount reflects the projected future cost for closing expenses.

No distribution of assets has yet been made to any class of claimant other than Class One. Subject to the Court's approval, the Liquidator will make a distribution within ninety days of the final closing order to all verified Providers. Any unclaimed distributions will be escheated to the State of New York pursuant to the Abandoned Property Law. The Liquidator has established an online creditor portal through which QHPNY creditors with allowed Class Two claims can search for unclaimed funds in their name. Notice of and accessibility to this unclaimed funds portal is available on the NYLB website at www.nylb.org.

RELIEF SOUGHT

The Liquidator submits this Closing Report to report that the affairs of the QHPNY liquidation proceeding have been completed and that it is in the best interests of the estate to close the liquidation proceeding at this time under the terms and conditions outlined herein. Accordingly, the Liquidator respectfully requests that the Court issue an order:

1. Approving the Closing Report and the financial transactions detailed herein;
2. Approving the Liquidator's recommendation regarding the allowance of certain Class Two policyholder claims set forth in the schedule attached as Exhibit 3 to the Pisapia Aff.;
3. Authorizing the continued payment of actual and necessary administrative expenses, if any, including such expenses pertaining to the closing of the liquidation proceeding;
4. Authorizing the Liquidator to distribute QHPNY's assets, consistent with the priorities set forth in Insurance Law § 7434, to those Providers with allowed claims;
5. Terminating and closing the liquidation proceeding;
6. Authorizing the Liquidator to receive and disburse, without further application to this Court, any receipts that are received after the termination of the liquidation proceeding;
7. Authorizing the Liquidator, after termination of the liquidation proceeding and without further order of this Court, to destroy or otherwise dispose of

all the books, files, records (paper or electronic) and other property of the QHPNY estate; and

8. Releasing and discharging the Liquidator, her predecessors, and successors in office, the NYLB, and their agents, attorneys, and employees, from all liability arising from their acts or omissions in connection with the liquidation proceeding.

Dated: New York, New York
October 31, 2024



David Axinn
Special Deputy Superintendent and
Agent of Adrienne A. Harris,
Superintendent of the Department of
Financial Services of the State of New York,
as Liquidator of Quality Health Plans of
New York, Inc.

EXHIBIT A



New York Liquidation Bureau

Adrienne A. Harris

Superintendent of Financial Services as Receiver

April 1, 2024

NOTICE OF DETERMINATION

BROOKHAVEN CARDIAC LLC
475 EAST MAIN ST STE 205
PATCHOGUE, NY 11772

Re: **IN THE MATTER OF THE LIQUIDATION OF
QUALITY HEALTH PLANS OF NEW YORK, INC.
Index No. 451399/2020 (Supreme Court, New York County)**

Dear Service Provider:

By order of the Supreme Court of the State of New York, effective September 9, 2020, Quality Health Plans of New York, Inc. ("QHPNY") was placed into liquidation and the Superintendent of Financial Services of the State of New York was appointed Liquidator (see <https://www.nylb.org/QualityHealth.htm>).

Based on QHPNY's records, you are a Medical Service Provider with a claim(s) recommended for allowance in the liquidation proceeding related to services provided to a patient that had health insurance coverage with QHPNY. Attached is a Notice of Determination of Allowance ("NOD") for your review.

If you accept the Liquidator's recommendation, you are required within 60 days of the date of the NOD to complete the attached ACKNOWLEDGEMENT OF RECEIPT and FORM W-9 for **BROOKHAVEN CARDIAC LLC** (TIN ending in **-7862**). On the FORM W-9 you must indicate the address that you or your entity use on your tax return.

Please return your completed ACKNOWLEDGEMENT OF RECEIPT and FORM W-9 by email to QHPNY@nylb.org or by U.S. mail to the address below:

Quality Health Plans of New York, Inc. in Liquidation
c/o New York Liquidation Bureau
180 Maiden Lane, 14th Floor
New York, NY 10038

Adrienne A. Harris, Superintendent of the
Department of Financial Services of the
State of New York as Liquidator of
Quality Health Plans of New York, Inc.

SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK

In the Matter of

Index No.:451399/20

Notice of Determination

the Liquidation of

of Allowance

QUALITY HEALTH PLANS OF NEW YORK, INC.

Adrienne A. Harris, Superintendent of Financial Services of the State of New York as Liquidator ("Liquidator") of QUALITY HEALTH PLANS OF NEW YORK, INC. hereby gives notice that the claim(s) set forth below has(have) been examined and she will recommend to the Court that the claim(s) be allowed as a Class 2 claim(s) in the amount set forth below. You will be entitled to share in the distributions of the assets, if any, pursuant to New York Insurance Law ("Insurance Law") Section 7434, to be made by the Liquidator based on the amount allowed.

If you accept the Liquidator's recommendation, you are required within 60 days of the date of the NOD to complete the attached ACKNOWLEDGEMENT OF RECEIPT and FORM W-9 and send them by email to ghpnny@nylb.org or by U.S. mail to the address provided below. However, if you fail to disclose, in writing, to the Liquidator any payment you receive on this(these) claim(s) from any other source, the NOD is voidable and the amount allowed may be adjusted at the Liquidator's discretion. The recommendation will be allowed in accordance with Article 74 of the Insurance Law, and will be fully and finally determined.

If you object to the Liquidator's recommendation, the Liquidator must receive your written objection(s) listing each specific claim(s) and all supporting documentation within 60 days after the date of mailing the NOD by email to ghpnny@nylb.org or by U.S. mail to the address below:

Quality Health Plans of New York, Inc. in Liquidation
c/o New York Liquidation Bureau
180 Maiden Lane, 14th Floor
New York, NY 10038

If you make a timely written objection, the Liquidator's staff will contact you. If the objection is resolved, the Liquidator will seek allowance of the agreed amount of the claim(s). If the objection cannot be resolved, and you request a hearing, the Liquidator will contact you and the court appointed referee to initiate a pre-hearing conference.

The Liquidator reserves the right to raise any other reasons in support of her denial of your claim(s) as further defenses arise during litigation.

Dated: 4/01/24
New York, New York.

Adrienne A. Harris
Superintendent of Financial Services
of the State of New York
as Liquidator of
QUALITY HEALTH PLANS OF NEW YORK, INC.

No. of Claims : 110
Amount Allowed: 26,154.51

CLAIMANT NAME: BROOKHAVEN CARDIAC LLC

TIN ENDING : 7862

Notice of Determination & Acknowledgement

ACKNOWLEDGEMENT OF RECEIPT

I hereby acknowledge receipt of the 4/01/24 Notice of Determination as a claimant. By signing this Acknowledgement of Receipt, I understand and AGREE to the content of the Notice of Determination.

I hereby acknowledge receipt of the 4/01/24 Notice of Determination as a claimant. By signing this Acknowledgement of Receipt, I understand and OBJECT to the content of the Notice of Determination. My reason for objection is _____

I request the Superintendent of Financial Services of State of New York as Liquidator of QUALITY HEALTH PLANS OF NEW YORK, INC. ("Liquidator") mail future correspondence to:

____ Same address as above

____ New address _____

Acknowledgement of Receipt must be completed, signed and returned to the Liquidator in order to be eligible for future distributions, if any, as directed by the Supervising Court.

Date _____

Claimant (Please Sign)_____
(Please Print Name)

DETAILS FOR - BROOKHAVEN CARDIAC LLC

PAGE 1

TIN ENDING - 7862

LIQ NO.	CLAIM NO	POLICY NO	CLAIMANT NAME	ALLOWED AMT	
QHP-CLM	-010866	PEA137334	MCR000480	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-010867	PEA137478	MCR000480	BROOKHAVEN CARDIAC L	184.46
QHP-CLM	-011286	PEA135800	MCR000514	BROOKHAVEN CARDIAC L	256.51
QHP-CLM	-011288	PEA135963	MCR000514	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-011291	PEA137770	MCR000514	BROOKHAVEN CARDIAC L	421.05
QHP-CLM	-011292	PEA137771	MCR000514	BROOKHAVEN CARDIAC L	83.16
QHP-CLM	-011294	PEA140026	MCR000514	BROOKHAVEN CARDIAC L	127.42
QHP-CLM	-011296	PEA146501	MCR000514	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-016065	PEA135750	MCR001111	BROOKHAVEN CARDIAC L	134.83
QHP-CLM	-016066	PEA137772	MCR001111	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-026954	PEA155173	MCR002235	BROOKHAVEN CARDIAC L	269.90
QHP-CLM	-027573	PEA133783	MCR002287	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-027575	PEA145256	MCR002287	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-027576	PEA151189	MCR002287	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-027579	PEA156283	MCR002287	BROOKHAVEN CARDIAC L	150.50
QHP-CLM	-030465	P00330493	MCR002602	BROOKHAVEN CARDIAC L	234.25
QHP-CLM	-030470	PEA139343	MCR002602	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-030471	PEA142341	MCR002602	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-030472	PEA143849	MCR002602	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-030474	PEA144527	MCR002602	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-030476	PEA145780	MCR002602	BROOKHAVEN CARDIAC L	190.68
QHP-CLM	-030477	PEA145781	MCR002602	BROOKHAVEN CARDIAC L	83.16
QHP-CLM	-030478	PEA146941	MCR002602	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-030479	PEA151447	MCR002602	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-030480	PEA152374	MCR002602	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-030481	PEA153205	MCR002602	BROOKHAVEN CARDIAC L	256.51
QHP-CLM	-030483	PEA154374	MCR002602	BROOKHAVEN CARDIAC L	337.94
QHP-CLM	-033960	PEA152757	MCR002947	BROOKHAVEN CARDIAC L	527.52
QHP-CLM	-033961	PEA152758	MCR002947	BROOKHAVEN CARDIAC L	83.16
QHP-CLM	-033962	PEA153343	MCR002947	BROOKHAVEN CARDIAC L	589.47
QHP-CLM	-033963	PEA154373	MCR002947	BROOKHAVEN CARDIAC L	84.21
QHP-CLM	-033966	PEA155077	MCR002947	BROOKHAVEN CARDIAC L	234.25
QHP-CLM	-036665	PEA154827	MCR003305	BROOKHAVEN CARDIAC L	761.77
QHP-CLM	-036666	PEA154828	MCR003305	BROOKHAVEN CARDIAC L	83.16
QHP-CLM	-036667	PEA155213	MCR003305	BROOKHAVEN CARDIAC L	340.72
QHP-CLM	-036668	PEA155214	MCR003305	BROOKHAVEN CARDIAC L	395.05
QHP-CLM	-037773	PEA133785	MCR003422	BROOKHAVEN CARDIAC L	152.31
QHP-CLM	-037775	PEA136463	MCR003422	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-037776	PEA137223	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037777	PEA140027	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037778	PEA142871	MCR003422	BROOKHAVEN CARDIAC L	152.31
QHP-CLM	-037779	PEA143343	MCR003422	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-037780	PEA145257	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037781	PEA145778	MCR003422	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-037782	PEA145779	MCR003422	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-037783	PEA145893	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037784	PEA146036	MCR003422	BROOKHAVEN CARDIAC L	727.61
QHP-CLM	-037785	PEA147194	MCR003422	BROOKHAVEN CARDIAC L	152.31
QHP-CLM	-037786	PEA148713	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037787	PEA149395	MCR003422	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-037788	PEA149503	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037789	PEA152114	MCR003422	BROOKHAVEN CARDIAC L	305.91
QHP-CLM	-037790	PEA153052	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037791	PEA153521	MCR003422	BROOKHAVEN CARDIAC L	154.79
QHP-CLM	-037792	PEA153557	MCR003422	BROOKHAVEN CARDIAC L	31.44
QHP-CLM	-037793	PEA154652	MCR003422	BROOKHAVEN CARDIAC L	32.10

DETAILS FOR - BROOKHAVEN CARDIAC LLC

PAGE 2

TIN ENDING - 7862

LIQ NO.	CLAIM NO	POLICY NO	CLAIMANT NAME	ALLOWED AMT	
QHP-CLM	-037794	PEA155078	MCR003422	BROOKHAVEN CARDIAC L	308.11
QHP-CLM	-038341	PEA134297	MCR003465	BROOKHAVEN CARDIAC L	127.42
QHP-CLM	-038350	PEA154651	MCR003465	BROOKHAVEN CARDIAC L	150.50
QHP-CLM	-040650	PEA135799	MCR003665	BROOKHAVEN CARDIAC L	165.44
QHP-CLM	-040651	PEA143005	MCR003665	BROOKHAVEN CARDIAC L	165.44
QHP-CLM	-040652	PEA148086	MCR003665	BROOKHAVEN CARDIAC L	165.44
QHP-CLM	-040653	PEA151554	MCR003665	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-045969	P00332024	MCR004067	BROOKHAVEN CARDIAC L	234.25
QHP-CLM	-047690	PEA153631	MCR004206	BROOKHAVEN CARDIAC L	150.50
QHP-CLM	-047691	PEA155172	MCR004206	BROOKHAVEN CARDIAC L	89.97
QHP-CLM	-048277	PEA133782	MCR004239	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-048278	PEA135751	MCR004239	BROOKHAVEN CARDIAC L	725.67
QHP-CLM	-048279	PEA136312	MCR004239	BROOKHAVEN CARDIAC L	127.42
QHP-CLM	-057863	P00330965	MCR005025	BROOKHAVEN CARDIAC L	234.25
QHP-CLM	-057866	PEA132907	MCR005025	BROOKHAVEN CARDIAC L	22.26
QHP-CLM	-057867	PEA141599	MCR005025	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-058902	PEA133784	MCR005110	BROOKHAVEN CARDIAC L	67.21
QHP-CLM	-060761	PEA140391	MCR005279	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-060762	PEA141598	MCR005279	BROOKHAVEN CARDIAC L	107.93
QHP-CLM	-060763	PEA147077	MCR005279	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-068628	PEA154979	MCR005813	BROOKHAVEN CARDIAC L	269.90
QHP-CLM	-068630	PEA155624	MCR005813	BROOKHAVEN CARDIAC L	728.57
QHP-CLM	-068631	PEA156818	MCR005813	BROOKHAVEN CARDIAC L	250.56
QHP-CLM	-068981	PEA133959	MCR005848	BROOKHAVEN CARDIAC L	263.72
QHP-CLM	-068983	PEA136465	MCR005848	BROOKHAVEN CARDIAC L	245.82
QHP-CLM	-068984	PEA139342	MCR005848	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-068985	PEA141266	MCR005848	BROOKHAVEN CARDIAC L	724.11
QHP-CLM	-068986	PEA143004	MCR005848	BROOKHAVEN CARDIAC L	127.42
QHP-CLM	-068991	PEA154177	MCR005848	BROOKHAVEN CARDIAC L	150.50
QHP-CLM	-069132	PEA156282	MCR005855	BROOKHAVEN CARDIAC L	269.90
QHP-CLM	-070565	PEA140031	MCR005970	BROOKHAVEN CARDIAC L	263.72
QHP-CLM	-070566	PEA143131	MCR005970	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-070567	PEA143848	MCR005970	BROOKHAVEN CARDIAC L	724.11
QHP-CLM	-070568	PEA144440	MCR005970	BROOKHAVEN CARDIAC L	898.49
QHP-CLM	-070570	PEA146035	MCR005970	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-074098	PEA144526	MCR006201	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-074099	PEA145777	MCR006201	BROOKHAVEN CARDIAC L	127.42
QHP-CLM	-074102	PEA153520	MCR006201	BROOKHAVEN CARDIAC L	150.50
QHP-CLM	-074979	PEA143847	MCR006243	BROOKHAVEN CARDIAC L	169.10
QHP-CLM	-074981	PEA146292	MCR006243	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-074982	PEA146293	MCR006243	BROOKHAVEN CARDIAC L	509.14
QHP-CLM	-074983	PEA146500	MCR006243	BROOKHAVEN CARDIAC L	589.47
QHP-CLM	-074984	PEA147487	MCR006243	BROOKHAVEN CARDIAC L	84.21
QHP-CLM	-074990	PEA151757	MCR006243	BROOKHAVEN CARDIAC L	424.93
QHP-CLM	-074991	PEA151758	MCR006243	BROOKHAVEN CARDIAC L	83.16
QHP-CLM	-074993	PEA152113	MCR006243	BROOKHAVEN CARDIAC L	252.63
QHP-CLM	-075235	PEA147367	MCR006255	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-075237	PEA149150	MCR006255	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-075434	PEA136464	MCR006271	BROOKHAVEN CARDIAC L	247.13
QHP-CLM	-075435	PEA139344	MCR006271	BROOKHAVEN CARDIAC L	147.94
QHP-CLM	-075436	PEA145604	MCR006271	BROOKHAVEN CARDIAC L	727.61
QHP-CLM	-077755	PEA156819	MCR006469	BROOKHAVEN CARDIAC L	84.09
QHP-CLM	-087092	P00329082	MCR007591	BROOKHAVEN CARDIAC L	234.25
QHP-CLM	-087274	PEA136311	MCR007610	BROOKHAVEN CARDIAC L	4.37

No. of Claims : 110
Amount Allowed: 26,154.51

Form W-9 (Rev. October 2018) Department of the Treasury Internal Revenue Service	Request for Taxpayer Identification Number and Certification ▶ Go to www.irs.gov/FormW9 for instructions and the latest information.	Give Form to the requester. Do not send to the IRS.
Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN) Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later. Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.	Social security number <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td></tr><tr><td colspan="4">-</td><td colspan="2">-</td><td colspan="4"></td></tr></table> or Employer identification number <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td><td style="width: 10%;"> </td></tr><tr><td colspan="4">-</td><td colspan="2"></td><td colspan="4"></td></tr></table>											-				-																-									
-				-																																					
-																																									

Part II Certification Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and 3. I am a U.S. citizen or other U.S. person (defined below); and 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.	Sign Here Signature of U.S. person ▶ Date ▶
---	--

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

EXHIBIT B

Quality Health Plans of NY, Inc.

Assets
As of September 30, 2024

Unrestricted Assets:	
Cash and Cash Equivalents	\$ 533,412
Bonds, at fair market value	247,617
Total Cash, Cash Equivalents, and Investments	781,029
Accrued Investment Income	2,829
Total Assets	\$ 783,858

Quality Health Plans of NY, Inc.

Liabilities
As of September 30, 2024

Secured Claims	\$ -
Class I - Administrative Claims	21,182
Class II – Claims and related Costs	38,062,743
Class III – Federal Government Claims	2,158,391
Class IV – Employee Claims	-
Class V – State and Local Government Claims	-
Class VI - General Creditor Claims	71,646
Class VII – Late Reported Claims	-
Class VIII – Section 1307 (Shareholder) Loans	
Class IX – Shareholder Claims	
Total Liabilities	40,313,962
(Deficit) Surplus	(39,530,104)
Total Liabilities and (Deficit) Surplus	\$ 783,858

Quality Health Plans of NY, Inc.

Receipts and Disbursements For The Period September 9, 2020, to September 30, 2024

Receipts:

Investment Income	50,248
Premiums Collected	36,464

Total Receipts

86,712

Operating Expenses:

Salaries	134,705
Rent and Related Expenses	199,529
Professional Fees	232,839
General and Administrative Expenses	100,169
Miscellaneous	1,291

Total Operating Expenses

668,533

(Disbursements) Over Receipts

(581,821)

Cash and Cash Equivalents; at Inception

1,363,221

Unrealized Gain on Investments

(371)

Cash and Cash Equivalents; End of Period

\$ 781,029

EXHIBIT 3

PRE	NO	CLMTNM	ADDR1	ADDR2	ADDR3	AMTALL
QHP-MST	1	SOUTH SHORE UNIVERSITY HOSPITAL	PO BOX 95000-7495	PHILADELPHIA, PA 19195-7495		\$3,387,560.91
QHP-MST	2	GOOD SAMARITAN HOSPITAL MEDICAL CENTER	1000 MONTAUK HIGHWAY	WEST ISLIP, NY 11795		\$2,135,994.59
QHP-MST	3	STONY BROOK UNIVERSITY HOSPITAL	PO BOX 29306	NEW YORK, NY 10087		\$2,052,351.33
QHP-MST	4	LONG ISLAND JEWISH MEDICAL CENTER	PO BOX 95000-7400	PHILADELPHIA, PA 19195		\$2,050,461.90
QHP-MST	5	NORTH SHORE UNIVERSITY HOSPITAL	PO BOX 95000-7420	PHILADELPHIA, PA 19195		\$2,009,846.32
QHP-MST	6	NORTH SHORE LIJ MEDICAL PC	PO BOX 71428	PHILADELPHIA, PA 19176-1428		\$1,883,166.54
QHP-MST	7	JOHN T. MATHER MEMORIAL HOSPITAL	PO BOX 95000-8673	PHILADELPHIA, PA 19195-0001		\$1,427,113.13
QHP-MST	8	LONG ISLAND COMMUNITY HOSPITAL AT NYU LANGONE HLTH	101 HOSPITAL RD	PATCHOGUE, NY 11772		\$1,244,505.36
QHP-MST	9	CENTRAL SUFFOLK HOSPITAL	PECONIC BAY MEDICAL CENTER	1 HEROES WAY	RIVERHEAD, NY 11901	\$1,170,821.07
QHP-MST	10	SOUTH NASSAU COMMUNITIES HOSPITAL	MOUNT SINAI SOUTH NASSAU	1 HEALTHY WAY	OCEANSIDE, NY 11572	\$1,060,134.17
QHP-MST	11	STATEN ISLAND UNIVERSITY HOSPITAL	LBX#822 PO BOX 95000	PHILADELPHIA, PA 19195-0001		\$849,890.33
QHP-MST	12	WINTHROP UNIVERSITY HOSPITAL	259 FIRST STREET	MINEOLA, NY 11501		\$803,581.80
QHP-MST	13	ST CATHERINE OF SIENA MEDICAL CENTER	50 ROUTE 25A	SMITHTOWN, NY 11787		\$772,929.68
QHP-MST	14	QUEST DIAGNOSTICS INC	500 PLAZA DRIVE	SECAUCUS, NJ 07094		\$734,080.27
QHP-MST	15	ST CHARLES HOSPITAL	200 BELLE TERRE ROAD	PORT JEFFERSON, NY 11777		\$502,877.05
QHP-MST	16	ST FRANCIS HOSPITAL	ST FRANCIS HOSPITAL & HEART CENTER	100 PORT WASHINGTON BLVD	ROSLYN, NY 11576	\$440,579.55
QHP-MST	17	NORTHERN VALLEY ANESTHESIOLOGY, P.A.	PO BOX 638087	CINCINNATI, OH 45263		\$436,752.83
QHP-MST	18	PLAINVIEW HOSPITAL	PO BOX 95000-7465	PHILADELPHIA, PA 19195		\$426,051.80
QHP-MST	19	NURSING SISTERS HOME CARE, INC.	CATHOLIC HOME CARE	110 BI-COUNTY BLVD. STE 114	FARMINGDALE, NY 11735	\$407,199.30
QHP-MST	20	HUNTINGTON HOSPITAL	PO BOX 95000-7450	PHILADELPHIA, PA 19195		\$354,038.44
QHP-MST	21	WESTCHESTER COUNTY HEALTH CARE CORP	WESTCHESTER MEDICAL CENTER	100 WOODS RD, TAYLOR PAVILION, ROOM M202	VALHALLA, NY 10595	\$336,779.76
QHP-MST	22	WSNCHS NORTH INC.	ST JOSEPH HOSPITAL	4295 HEMPSTEAD TPKE	BETHPAGE, NY 11714	\$327,525.37
QHP-MST	26	NASSAU UNIVERSITY MEDICAL CENTER	2201 HEMPSTEAD TPKE	EAST MEADOW, NY 11554		\$282,545.27
QHP-MST	23	ADVANTAGECARE PHYSICIANS PC	55 WATER ST	NEW YORK, NY 10041		\$268,044.70
QHP-MST	24	SUFFOLK HEART GROUP	260 MIDDLE COUNTRY RD SUITE 214	SMITHTOWN, NY 11787		\$262,878.51
QHP-MST	25	MERCY MEDICAL CENTER LB	1000 NORTH VILLAGE AVE	ROCKVILLE CENTRE, NY 11570		\$245,796.91
QHP-MST	29	NYU LANGONE HOSPITALS	550 FIRST AVENUE	NEW YORK, NY 10016		\$213,827.40
QHP-MST	27	NORTHWELL HEALTH SYSTEM LABORATORIES	PO BOX 415974	BOSTON, MA 02241		\$194,248.79
QHP-MST	28	SIGHT MEDICAL DOCTORS PLLC	125 KENNEDY DRIVE STE 400A	HAUPPAUGE, NY 11788		\$189,624.43
QHP-MST	30	OAKWOOD OPERATING CO LLC	305 LOCUST AVE	OAKDALE, NY 11769		\$165,972.78
QHP-MST	31	SOUTHWEST SUFFOLK MEDICAL PC	580 UNION BOULEVARD	WEST ISLIP, NY 11795		\$153,290.06
QHP-MST	32	JAMAICA HOSPITAL MEDICAL CENTER	8900 VAN WYCK EXPWY	JAMAICA, NY 11418		\$151,234.12
QHP-MST	33	THE NEW YORK AND PRESBYTERIAN HOSPITAL	525 EAST 68TH ST BOX 156	NEW YORK, NY 10065		\$148,192.84
QHP-MST	34	ISLAND PRIMARY MEDICAL CARE ASSOC PC	4625 MERRICK RD	MASSAPEQUA, NY 11758		\$136,419.60
QHP-MST	35	CHS PHYSCIANS PARTNERS PC	100 PORT WASHINGTON BLVD	ROSLYN, NY 11576		\$136,243.29
QHP-MST	36	OPTIMA CARE SMITHTOWN LLC	BROOKSIDE MULTICARE CENTER	7 RTE 25A	SMITHTOWN, NY 11787	\$129,859.82
QHP-MST	37	VASCULAR SURGERY ASSOC OF SUFFOLK COUNTY	33 MEDFORD AVE STE A	PATCHOGUE, NY 11772		\$122,651.52
QHP-MST	38	BROOKHAVEN HEART PLLC	325 EAST MAIN STREET STE 120	EAST PATCHOGUE, NY 11772		\$120,769.74
QHP-MST	39	SAMARITAN EMERGENCY MEDICAL SERVICES PC	1000 MONTAUK HIGHWAY	WEST ISLIP, NY 11795		\$118,999.88
QHP-MST	40	NEW YORK UNIVERSITY	NYU FACULTY GROUP PRACTICE	PO BOX 415662	BOSTON, MA 02241	\$115,918.58
QHP-MST	41	HUNTINGTON HILLS CENTER FOR HEALTH AND REHABILITAT	400 SOUTH SERVICE ROAD	MELVILLE, NY 11747		\$114,420.09
QHP-MST	42	COLD SPRING HILLS CENTER	378 SYOSSET WOODBURY RD	WOODBURY, NY 11797		\$111,240.20
QHP-MST	43	NEW YORK CITY HEALTH AND HOSPITALS CORPORATION	50 WATER ST FLOOR 3	NEW YORK, NY 10004		\$109,914.12
QHP-MST	44	GLEN COVE HOSPITAL	PO BOX 95000-7480	PHILADELPHIA, PA 19195		\$108,194.96
QHP-MST	45	SUNRISE MEDICAL LABORATORIES, INC.	250 MILLER PLACE	HICKSVILLE, NY 11801-1826		\$108,011.20
QHP-MST	59	VESTAL HEALTHCARE LLC	LONG ISLAND BAY SHORE DIALYSIS CENTER	PO BOX 848559	DALLAS, TX 75284	\$105,951.34

NYSCEF DOC. NO. 42			RECEIVED NYSCEF: 11/04/2024			
QHP-MST	46	THE LONG ISLAND HOME	SOUTH OAKS HOSPITAL	400 SUNRISE HWY	AMITYVILLE, NY 11701	\$95,560.82
QHP-MST	48	MONTEFIORE MEDICAL CENTER	111 EAST 210 ST	BRONX, NY 10467		\$92,430.50
QHP-MST	47	NORTH SHORE HEMATOLOGY ONCOLOGY ASSOCIATES PC	1 RESEARCH RD	RIDGE, NY 11961		\$92,174.84
QHP-MST	49	PECONIC BAY PRIMARY MEDICAL CARE, PC	185 OLD COUNTRY ROAD, STE 2	RIVERHEAD, NY 11901		\$91,100.39
QHP-MST	50	BERGEN COUNTY IMPROVEMENT AUTHORITY	BERGEN NEW BRIDGE MEDICAL CENTER	230 E RIDGEWOOD AVE	PARAMUS, NJ 07652	\$89,779.22
QHP-MST	51	SB INTERNISTS UFPC	PO BOX 419006	BOSTON, MA 02241		\$89,025.47
QHP-MST	52	SOUTH SHORE NEUROLOGIC ASSOCIATES P.C.	C/O VIVIENM BREIER ESQ.	3 DAKOTA DRIVE SUITE 300	LAKE SUCCESS, NY 11042	\$87,815.77
QHP-MST	53	SUFFOLK SURGERY CENTER	1500 WILLIAM FLOYD PKWY	SHIRLEY, NY 11967		\$86,605.29
QHP-MST	54	NORTH SHORE - LIJ HEALTHCARE INC	PO BOX 419129	BOSTON, MA 02241-9129		\$85,684.45
QHP-MST	55	CLOVE LAKES HEALTH CARE AND REHABILITATION CENTER,	25 FANNING STREET	STATEN ISLAND, NY 10314		\$84,711.91
QHP-MST	57	MEDICAL ARTS RADIOLOGICAL GROUP PC	345 WOODCLIFF DR STE 1	FAIRPOINT, NY 14450		\$83,503.18
QHP-MST	1480	HARBOR VIEW MEDICAL SERVICES, PC	PO BOX 95000-8728	PHILADELPHIA, PA 19195-0001		\$82,629.77
QHP-MST	60	RICHMOND UNIVERSITY MEDICAL CENTER	355 BARD AVE	STATEN ISLAND, NY 10310		\$76,066.00
QHP-MST	61	AMITYVILLE PULMONOLOGY PLLC	317 BROADWAY STE A	AMITYVILLE, NY 11701		\$75,370.66
QHP-MST	62	ADVANCED DERMATOLOGY PC	6 LOWELL AVE	NEW HYDE PARK, NY 11040		\$74,141.06
QHP-MST	63	ZWANGER & PESIRI RADIOLOGY GROUP, LLP	150 E SUNRISE HWY	LINDENHURST, NY 11757		\$73,972.13
QHP-MST	64	SUNRISE MANOR NURSING HOME	1325 BRENTWOOD RD	BAY SHORE, NY 11706		\$72,800.00
QHP-MST	65	SB RADIOLOGY	PO BOX 419035	BOSTON, MA 02241		\$72,694.58
QHP-MST	66	INTEGRATED MEDICAL PROFESSIONALS PLLC	1 HOLLOW LANE STE 206	LAKE SUCCESS, NY 11042		\$69,694.71
QHP-MST	67	NEW YORK DIALYSIS SERVICES INC	FMS-ALBANY REGIONAL KIDNEY CENTER	PO BOX 27731	NEW YORK, NY 10087-7731	\$67,837.43
QHP-MST	68	PHYSICIANS OF UNIVERSITY HOSPITAL, PC	1 EDGEWATER ST 6TH FL	STATEN ISLAND, NY 10305		\$66,889.10
QHP-MST	81	BADRI P NATH MD	LONG ISLAND SURGERY P.C.	4 PHYLLIS DRIVE STE B	PATCHOGUE, NY 11772	\$66,156.77
QHP-MST	70	NORTHWELL HEALTH STERN FAMILY CENTER FOR REHAB	330 COMMUNITY DRIVE	MANHASSET, NY 11030		\$65,735.30
QHP-MST	71	EAR NOSE AND THROAT ASSOCIATES OF NY	600 WHITE PLAINS RD STE 400	TARRYTOWN, NY 10591		\$65,709.81
QHP-MST	72	NEW WAVE IMAGING CORP	1237 MONTAUK HWY	OAKDALE, NY 11769		\$64,019.95
QHP-MST	73	NORTH SHORE LIJ CARDIOLOGY AT DEER PARK PC	972 BRUSH HOLLOW ROAD, 5TH FL	WESTBURY, NY 11590		\$63,928.41
QHP-MST	74	PROGRESSIVE EMERGENCY PHYSICIANS PLLC	1236 RXR PLAZA	UNIONDALE, NY 11556		\$61,042.76
QHP-MST	75	CITY MEDICAL OF UPPER EAST SIDE, PLLC	CITYMD	PO BOX 27757	BELFAST, ME 04915	\$60,730.41
QHP-MST	77	LONG ISLAND AMBULATORY SURGERY CENTER LLC	601 SUFFOLK AVENUE	BRENTWOOD, NY 11717		\$57,243.74
QHP-MST	78	LENOX HILL RADIOLOGY & MEDICAL ASSOCIATES, PC	345 WOODCLIFF DR STE 1	FAIRPOINT, NY 14450		\$55,662.18
QHP-MST	79	BIO-REFERENCE LABORATORIES, INC.	481 EDWARD H ROSS DR	ELMWOOD PARK, NJ 07407		\$55,050.23
QHP-MST	117	NY CARDIO CARE PC	MOHAMMAD HUSSEIN ZGHEIB	1112 SOUTH AVENUE	STATEN ISLAND, NY 10314	\$53,806.32
QHP-MST	80	ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI DBA MT SIN	PO BOX 28979	NEW YORK, NY 10087		\$52,477.00
QHP-MST	82	ST LUKES ROOSEVELT HOSPITAL CENTER	1111 AMSTERDAM AVENUE	NEW YORK, NY 10025		\$51,482.29
QHP-MST	84	JOSEPH M CAPO MD PC	EAR NOSE THROAT ASSOCIATES OF NASSAU COUNTY	2870 HEMPSTEAD TPKE STE 203	LEVITTOWN, NY 11756	\$50,573.78
QHP-MST	83	PARKVIEW CARE AND REHABILITATION CENTER, INC	5353 MERRICK RD	MASSAPEQUA, NY 11758		\$50,061.87
QHP-MST	85	PREFERRED PROFESSIONAL MEDICAL CARE, PC	3505 VETERANS MEMORIAL HWY STE C	RONKONKOMA, NY 11779		\$48,992.95
QHP-MST	102	DIMITRI N KESSARIS MD PC	PROGRESIVE UROLOGY	315 EAST SHORE RD	MANHASSET, NY 11030	\$48,848.70
QHP-MST	86	EASTERN LONG ISLAND HOSPITAL ASSOC	STONY BROOK EASTERN LONG ISLAND HOSPITAL	201 MANOR PLACE	GREENPORT, NY 11944	\$48,768.99
QHP-MST	87	CARIS MPI, INC.	CARIS LIFE SCIENCES	750 WEST JOHN CARPENTER FREEWAY, SUITE 800	IRVING, TX 75039	\$47,951.62
QHP-MST	88	NESCONSET ACQUISITION LLC	100 SOUTHERN BLVD	NESCONSET, NY 11767		\$47,700.00
QHP-MST	90	NEW YORK PAIN CONSULTANTS LLC	500 WEST MAIN ST STE 116	BABYLON, NY 11702		\$46,259.22
QHP-MST	91	MATHEW T CHENGOT MD PC	AMITYVILLE HEART CENTER	129 BROADWAY	AMITYVILLE, NY 11701	\$45,937.29
QHP-MST	92	BELAIR CARE CENTER	2478 JERUSALEM AVE	BELLMORE, NY 11710		\$45,605.26
QHP-MST	93	ROCKVILLE OPERATING LLC DBA THE GRAND PAVILION FOR	41 MAINE AVE	ROCKVILLE CENTRE, NY 11570		\$44,400.00
QHP-MST	94	NEW YORK PRESBYTERIAN QUEENS	56-45 MAIN ST	FLUSHING, NY 11355		\$42,872.22
QHP-MST	95	PHELPS MEMORIAL HOSPITAL	LB # 8268 PO BOX 95000	PHILADELPHIA, PA 19195-0001		\$41,462.97

QHP-MST	96	LONG ISLAND COMPREHENSIVE MEDICAL CARE PLLC	1231 DEER PARK AVE	NORTH BABYLON, NY 11703		\$40,934.08
QHP-MST	97	EPISCOPAL HEALTH SERVICES INC	377 OAK STREET SUITE 300	GARDEN CITY, NY 11530		\$40,836.18
QHP-MST	98	SAMARITAN MEDICAL SERVICES PC	1000 MONTAUK HIGHWAY	WEST ISLIP, NY 11795		\$40,820.23
QHP-MST	129	THE MOUNT SINAI HOSPITAL	1 GUSTAVE L LEVY PLACE	NEW YORK, NY 10029		\$40,807.05
QHP-MST	99	HEALTHCARE ASSOCIATES IN MEDICINE, PC	2535 ARTHUR KILL RD	STATEN ISLAND, NY 10309		\$40,583.07
QHP-MST	100	MASSAPEQUA CENTER REHABILITATION AND NURSING	101 LOUDEN AVE	AMITYVILLE, NY 11701		\$40,320.15
QHP-MST	101	WHITE OAKS REHABILITATION AND NURSING CENTER	8565 JERICHO TPKE	WOODBURY, NY 11797		\$40,072.86
QHP-MST	103	ISLAND SURGICAL & VASCULAR GROUP, P.C.	15 PARK AVE	BAY SHORE, NY 11706		\$39,255.96
QHP-MST	104	ALEKSANDER SHALSHIN MD	PO BOX 918	SYOSSET, NY 11791-0079		\$38,975.00
QHP-MST	106	VR LEDDY, MD PC	160 4TH ST	BRENTWOOD, NY 11717		\$38,507.39
QHP-MST	107	ISLAND ENDOSCOPY CENTER LLC	1175 MONTAUK HWY	WEST ISLIP, NY 11795		\$38,291.96
QHP-MST	108	MILLENNIUM MEDICAL PROFESSIONALS, PLLC	496 SMITHTOWN BYPASS STE 101	SMITHTOWN, NY 11787		\$38,068.44
QHP-MST	109	SUFFOLK PULMONARY ASSOCIATES LLP	5225 NESCONSET HIGHWAY UNIT 60	PORT JEFFERSON, NY 11776		\$37,540.65
QHP-MST	110	ALEXANDER SHUKIS	NORTH SHORE - LIJ ANESTHESIOLOGY, PC	145 COMMUNITY DRIVE	GREAT NECK, NY 11021	\$37,089.96
QHP-MST	111	MUHAMMAD N ALI MD	OCEAN PHYSICIANS PC	33 NORTH OCEAN AVENUE	FREEPORT, NY 11520	\$36,623.03
QHP-MST	113	MEMORIAL HOSPITAL - WEST VOLUSIA, INC.	ADVENTHEALTH DELAND	PO BOX 945385	ATLANTA, GA 30394-5385	\$36,611.45
QHP-MST	112	ALL FAMILY MEDICINE	365 BROADWAY STE 1	AMITYVILLE, NY 11701		\$35,835.85
QHP-MST	114	PREMIERE CARDIOLOGY PLLC	1916 UNION BLVD	BAY SHORE, NY 11706		\$35,094.32
QHP-MST	115	SAYVILLE NURSING AND REHABILITATION CENTER	300 BROADWAY AVE	SAYVILLE, NY 11782		\$33,630.64
QHP-MST	116	TRUE NORTH MEDICAL GROUP PC	ORLIN & COHEN MEDICAL SPECIALISTS GROUP	LB # 8542 PO BOX 95000	PHILADELPHIA, PA 19195-0001	\$32,841.50
QHP-MST	118	ELANT AT BRANDYWINE INC	BRIARCLIFF MANOR CENTER FOR REHABILITATION	46 HARRIMAN DR	GOSHEN, NY 10924	\$31,653.74
QHP-MST	119	SUFFOLK NEPHROLOGY ASSOCIATES PC	340 HOWELLS RD STE A	BAY SHORE, NY 11706		\$31,125.78
QHP-MST	120	ISLAND MEDICAL SPECIALISTS PLLC	2627C HYLAN BLVD STE 0	STATEN ISLAND, NY 10306-4353		\$30,777.28
QHP-MST	121	PAIN AND REHABILITATION MEDICAL SPECIALISTS, PC	73 GUY LOMBARDO AVE	FREEPORT, NY 11520		\$30,583.86
QHP-MST	126	AE & LY MEDICAL ASSOCIATES PLLC	1880 E JERICHO TURNPIKE	HUNTINGTON, NY 11743		\$29,666.16
QHP-MST	122	QUEST DIAGNOSTICS INC (DE)	500 PLAZA DRIVE	SECAUCUS, NJ 07094		\$28,394.06
QHP-MST	124	ZOLL SERVICES LLC	PO BOX 644321	PITTSBURGH, PA 15264		\$28,219.74
QHP-MST	125	ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI	FACULTY PRACTICE ASSOCIATES	PO BOX 28082	NEW YORK, NY 10087	\$27,923.63
QHP-MST	127	IGB BILLING	1500 ROUTE 112 BLDG 8 SUITE 8	PORT JEFFERSON STATION, NY 11776		\$27,025.46
QHP-MST	128	NASSAU-SUFFOLK RADIOLOGICAL ASSOCIATES	2780 MIDDLE COUNTRY RD STE 210	LAKE GROVE, NY 11755-2120		\$26,886.14
QHP-MST	130	BROOKHAVEN CARDIAC LLC	55 MEDFORD AVE STE D	PATCHOGUE, NY 11772		\$26,154.51
QHP-MST	131	BORIS ROSENFELD DO	R AND T MEDICAL PRIMARY CARE	285 SILLS ROAD BLDG 10 STE D	PATCHOGUE, NY 11772	\$25,913.03
QHP-MST	132	NEW YORK SPINE AND BRAIN SURGERY	PO BOX 417989	BOSTON, MA 02241		\$25,836.96
QHP-MST	134	MEDSTAR SURGICAL & BREATHING EQUIPMENT INC	ADAPTHEALTH NY	99 POWERHOUSE RD STE 205	ROSLYN HEIGHTS, NY 11577-2039	\$25,405.92
QHP-MST	135	LONG ISLAND VITREO RETINAL CONSULTANTS PC	200 MOTOR PARKWAY, SUITE A2	HAUPPAUGE, NY 11788		\$25,036.73
QHP-MST	56	INTERNAL MEDICINE ASSOCIATES, PC	214-22 73RD AVE	OAKLAND GARDENS, NY 11364		\$83,998.27
QHP-MST	69	CRESCENDO BIOSCIENCE, INC	PO BOX 645690	CINCINNATI, OH 45264		\$65,760.97
QHP-MST	76	FOCUS RX PHARMACY SERVICES INC	2805 VETERANS MEM HWY STE 19	RONKONKOMA, NY 11779		\$58,619.03
QHP-MST	133	KIMON BEKELIS MD	1175 MONTAUK HWY STE 6	WEST ISLIP, NY 11795		\$25,429.60