

Exhibit A
Satisfied Claims

————— **Objectionable Claims** —————

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
SINOPOLI, WALTER OBSTETRICS/GYNECOLOGY 1112 COMMONS WAY, BLDG F TOMS RIVER NJ 08755	1668	3/14/06	05-14945 (ASH)	- (S) - (A) - (P) \$90.00 (U) \$90.00 (T)	9-14
SINOPOLI, WALTER OBSTETRICS/GYNECOLOGY 1112 COMMONS WAY, BLDG F TOMS RIVER NJ 08755	928	2/24/06	05-14945 (ASH)	- (S) - (A) - (P) \$3,750.00 (U) \$3,750.00 (T)	9-14
SINOPOLI, WALTER OBSTETRICS/GYNECOLOGY 1112 COMMONS WAY, BLDG F TOMS RIVER NJ 08755	929	2/24/06	05-14945 (ASH)	- (S) - (A) - (P) \$75.00 (U) \$75.00 (T)	9-14
SINOPOLI, WALTER OBSTETRICS/GYNECOLOGY 1112 COMMONS WAY, BLDG F TOMS RIVER NJ 08755	930	2/24/06	05-14945 (ASH)	- (S) - (A) - (P) \$500.00 (U) \$500.00 (T)	9-14
SOUROUR, MAGDI CRITICAL CARE MEDICINE 2000 NORTH VILLAGE AVENUE, STE 208 ROCKVILLE CENTRE NY 11570	871	2/24/06	05-14945 (ASH)	- (S) - (A) - (P) \$36,863.46 (U) \$36,863.46 (T)	9-14
SOUTH JERSEY EYE PHYSICIANS 509 SOUTH LENOLA ROAD STE 11 MOORESTOWN NJ 08057	1934	3/20/06	05-14945 (ASH)	- (S) - (A) - (P) \$10,084.96 (U) \$10,084.96 (T)	9-14
SOUTHAMPTON HOSPITAL 240 MEETING HOUSE LN SOUTHAMPTON NY 11968	985	2/27/06	05-14945 (ASH)	- (S) - (A) - (P) \$475.12 (U) \$475.12 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
SPAGNUOLO, VINCENT CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2747	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$218.49 (U) \$218.49 (T)	9-14
SPAGNUOLO, VINCENT CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2750	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$9.58 (U) \$9.58 (T)	9-14
SPAGNUOLO, VINCENT CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2752	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$9.58 (U) \$9.58 (T)	9-14
SPAGNUOLO, VINCENT CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2754	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$88.56 (U) \$88.56 (T)	9-14
SPAGNUOLO, VINCENT CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2755	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$42.38 (U) \$42.38 (T)	9-14
STAND UP MRI OF DEER PARK, PC 1118 DEER PARK AVE NO BABYLON NY 11703	1428	3/7/06	05-14945 (ASH)	- (S) - (A) - (P) \$1,365.00 (U) \$1,365.00 (T)	9-14
STAND UP MRI OF DEER PARK, PC 1118 DEER PARK AVE NO BABYLON NY 11703	1429	3/7/06	05-14945 (ASH)	- (S) - (A) - (P) \$1,365.00 (U) \$1,365.00 (T)	9-14
STARPOLI, ANTHONY A., MD. 55 MONTOMERY ST POUGHKEEPSIE NY 12601	3260	3/23/07	05-14945 (ASH)	- (S) - (A) - (P) \$9,000.00 (U) \$9,000.00 (T)	9-14
STATE OF NY O/B/O STONY BROOK UNIVERSITY HOSPITAL NYS DEPARTMENT OF LAW 2100 MIDDLE COUNTRY ROAD CENTEREACH NY 11720	538	2/14/06	05-14945 (ASH)	- (S) - (A) - (P) \$268,374.00 (U) \$268,374.00 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
STERLACCI, SUSAN OBSTETRICS/GYNECOLOGY 118 NORTH COUNTRY ROAD PORT JEFFERSON NY 11777	2030	3/22/06	05-14945 (ASH)	- (S) - (A) - (P) \$4,415.00 (U) \$4,415.00 (T)	9-14
STODDARD, SEAN PODIATRY 1195 HIGHWAY 70 STE 12 LAKEWOOD NJ 08701	1120	3/2/06	05-14945 (ASH)	- (S) - (A) - (P) \$2,700.00 (U) \$2,700.00 (T)	9-14
STOLLER, GLENN MD 2000 N. VILLAGE AVENUE #402 ROCKVILLE CENTRE NY 11570	2977	3/29/06	05-14945 (ASH)	- (S) - (A) - (P) \$958.07 (U) \$958.07 (T)	9-14
STUDINT, ERIKA INTERNAL MEDICINE 375 EAST MCFARLAN STREET DOVER NJ 07801	2218	3/24/06	05-14945 (ASH)	- (S) - (A) - (P) \$500.00 (U) \$500.00 (T)	9-14
STURM, RICHARD T. 360 MERRICK RD LYNBROOK NY 11563	2529	3/29/06	05-14945 (ASH)	- (S) - (A) - (P) \$158.00 (U) \$158.00 (T)	9-14
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1757	3/16/06	05-14945 (ASH)	- (S) - (A) \$182.00 (P) - (U) \$182.00 (T)	9-14
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1764	3/16/06	05-14945 (ASH)	- (S) - (A) \$182.00 (P) - (U) \$182.00 (T)	9-14
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1765	3/16/06	05-14945 (ASH)	- (S) - (A) \$175.00 (P) - (U) \$175.00 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1766	3/16/06	05-14945 (ASH)	- (S) - (A) \$175.00 (P) - (U) \$175.00 (T)	9-14
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1767	3/16/06	05-14945 (ASH)	- (S) - (A) \$175.00 (P) - (U) \$175.00 (T)	9-14
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1768	3/16/06	05-14945 (ASH)	- (S) - (A) \$1,248.00 (P) - (U) \$1,248.00 (T)	9-14
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1769	3/16/06	05-14945 (ASH)	- (S) - (A) \$158.00 (P) - (U) \$158.00 (T)	9-14
SUMERSON, JEFFREY INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1770	3/16/06	05-14945 (ASH)	- (S) - (A) \$728.00 (P) - (U) \$728.00 (T)	9-14
SURGICAL CENTER AT SOUTH JERSEY EYE PHYSICIANS 509 S. LENOLA ROAD, BUILDING 11 MOORESTOWN NJ 08057	1937	3/20/06	05-14945 (ASH)	- (S) - (A) - (P) \$9,400.00 (U) \$9,400.00 (T)	9-14
SUSSMAN, JAY CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2746	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$267.27 (U) \$267.27 (T)	9-14
SUSSMAN, JAY CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2774	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$117.89 (U) \$117.89 (T)	9-14
SUSSMAN, JAY CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2776	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$117.89 (U) \$117.89 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
SWEINHART, MARTY FAMILY PRACTICE 375 EAST MCFARLAN STREET DOVER NJ 07801	1950	3/20/06	05-14945 (ASH)	- (S) - (A) - (P) \$1,005.00 (U) \$1,005.00 (T)	9-14
SWERDIN, MICHAEL, MD 65 ROOSEVELT AVE. VALLEY STREAM NY 11580	2532	3/29/06	05-14945 (ASH)	- (S) - (A) - (P) \$451.35 (U) \$451.35 (T)	9-14
TANKEL, MARVIN DERMATOLOGY 2270 KIMBALL AVENUE BROOKLYN NY 11234	2443	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$3,260.00 (U) \$3,260.00 (T)	9-14
TAYLOR, JEFF CARDIOLOGY 745 US HIGHWAY 202/206 STE 100 BRIDGEWATER NJ 088071758	1656	3/14/06	05-14945 (ASH)	- (S) - (A) - (P) \$215.00 (U) \$215.00 (T)	9-14
THERRIEN, PHILIP PEDIATRIC ORTHOPEDIC SURGERY 585 CRANBURY RD E BRUNSWICK NJ 08816	1604	3/13/06	05-14945 (ASH)	- (S) - (A) - (P) \$870.00 (U) \$870.00 (T)	9-14
THOMAS J FORLENZA MD 102 HART BLVD STATEN ISLAND NY 10301	893	2/24/06	05-14945 (ASH)	- (S) - (A) - (P) \$7,800.00 (U) \$7,800.00 (T)	9-14
TOPIEL, MARTIN, M.D. INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1758	3/16/06	05-14945 (ASH)	- (S) - (A) \$182.00 (P) - (U) \$182.00 (T)	9-14
TOPIEL, MARTIN, M.D. INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1759	3/16/06	05-14945 (ASH)	- (S) - (A) \$364.00 (P) - (U) \$364.00 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
UMDNJ MATERNAL FETAL MEDICINE PO BOX 635 BELLMAWAR NJ 08099-0635	2358	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$375.00 (U) \$375.00 (T)	9-14
UMDNJ OBGYN PO BOX 635 BELLMAWAR NJ 08099-0635	2359	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$930.00 (U) \$930.00 (T)	9-14
UMDNJ DEPT OF RHEUMATOLOGY PO BOX 635 BELLMAWAR NJ 08099-0635	2360	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$430.00 (U) \$430.00 (T)	9-14
UMDNJ DEPT OF SURGERY PO BOX 635 BELLMAWAR NJ 08099-0635	2361	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$1,341.00 (U) \$1,341.00 (T)	9-14
UMDNJ PEDIATRICS PO BOX 635 BELLMAWAR NJ 08099-0635	2362	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$246.00 (U) \$246.00 (T)	9-14
UMDNJ PEDIATRICS PO BOX 635 BELLMAWAR NJ 08099-0635	2363	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$420.00 (U) \$420.00 (T)	9-14
UMDNJ FAMILY MED PO BOX 635 BELLMAWAR NJ 08099-0635	2364	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$4,195.00 (U) \$4,195.00 (T)	9-14
UMDNJ DEPT OF GERIATRICS PO BOX 635 BELLMAWAR NJ 08099-0635	2365	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$240.00 (U) \$240.00 (T)	9-14
UMDNJ VASCULAR LAB PO BOX 635 BELLMAWAR NJ 08099-0635	2366	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$4,289.00 (U) \$4,289.00 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
UMDNJ PHYSICAL MEDICINE PO BOX 635 BELLMAWAR NJ 08099-0635	2367	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$1,358.00 (U) \$1,358.00 (T)	9-14
UMDNJ GEN INT MED PO BOX 635 BELLMAWAR NJ 08099-0635	2368	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$11,504.00 (U) \$11,504.00 (T)	9-14
UMDNJ DEPT OF PATHOLOGY PO BOX 635 BELLMAWAR NJ 08099-0635	2369	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$340.00 (U) \$340.00 (T)	9-14
UMDNJ DEPT OF WELLNESS PO BOX 635 BELLMAWAR NJ 08099-0635	2370	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$849.00 (U) \$849.00 (T)	9-14
UNG, KENNETH OBSTETRICS/GYNECOLOGY 2 PRINCESS RD LAWRENCEVILLE NJ 08648	1098	3/2/06	05-14945 (ASH)	- (S) - (A) - (P) \$145.00 (U) \$145.00 (T)	9-14
VACANTI, RENEE CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2775	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$117.89 (U) \$117.89 (T)	9-14
VENTRELLA, SAMUEL CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2743	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$456.59 (U) \$456.59 (T)	9-14
VENTRELLA, SAMUEL CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2744	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$145.56 (U) \$145.56 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
VENTRELLA, SAMUEL CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2745	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$76.56 (U) \$76.56 (T)	9-14
VENTRELLA, SAMUEL CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2751	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$9.58 (U) \$9.58 (T)	9-14
VENTRELLA, SAMUEL CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2771	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$480.11 (U) \$480.11 (T)	9-14
VENTRELLA, SAMUEL CARDIOLOGY 2051 BRIGGS ROAD MOUNT LAUREL NJ 08054	2772	3/30/06	05-14945 (ASH)	- (S) - (A) - (P) \$480.11 (U) \$480.11 (T)	9-14
VIRGINIA COMMONWEALTH UNIV HEALTH SYSTEM AUTHORITY DBA MCV ATTORNEY GENERAL OF VA-DDC-JASMA ADKIN 900 E MAIN ST - 4TH FL RICHMOND VA 2321	543	2/14/06	05-14945 (ASH)	- (S) - (A) - (P) \$195,780.41 (U) \$195,780.41 (T)	9-14
VIRTUA HEALTH INC 401 ROUTE 73 N 403 MARLTIN NJ 080533425	1347	3/6/06	05-14945 (ASH)	- (S) - (A) \$1,157,000.00 (P) - (U) \$1,157,000.00 (T)	9-14
VIRTUA HOME CARE-COMMUNITY NURSING 401 ROUTE 73 N 403 MARLTON NJ 08053	2458	3/28/06	05-14945 (ASH)	Unspecified*	9-14
WALGREN, ASHLEY ROSE KING ARROW RD APT D49 BUDD LAKE NJ 07828	835	2/23/06	05-14945 (ASH)	- (S) - (A) - (P) \$1,128.00 (U) \$1,128.00 (T)	9-14
WATCHUNG PEDIATRICS 76 STIRLING RD SUITE WARREN NJ 07059	2386	3/28/06	05-14945 (ASH)	- (S) - (A) - (P) \$410.00 (U) \$410.00 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
WEIAND, RAYMOND ORTHOPEDIC SURGERY 547 NEW RD SOMERS POINT NJ 08244	1138	3/2/06	05-14945 (ASH)	- (S) - (A) - (P) \$58.00 (U) \$58.00 (T)	9-14
WILDES, SIMONE, M.D. INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1760	3/16/06	05-14945 (ASH)	- (S) - (A) \$182.00 (P) - (U) \$182.00 (T)	9-14
WILDES, SIMONE, M.D. INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1761	3/16/06	05-14945 (ASH)	- (S) - (A) \$132.00 (P) - (U) \$132.00 (T)	9-14
WILDES, SIMONE, M.D. INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1762	3/16/06	05-14945 (ASH)	- (S) - (A) \$132.00 (P) - (U) \$132.00 (T)	9-14
WILDES, SIMONE, M.D. INFECTIOUS DISEASE 1001 BRIGGS ROAD, STE 250 MOUNT LAUREL NJ 08054	1763	3/16/06	05-14945 (ASH)	- (S) - (A) \$910.00 (P) - (U) \$910.00 (T)	9-14
WINTHROP UNIVERSITY HOSPITAL PO BOX 9562 UNIODALE NY 11555-9562	1221	3/2/06	05-14945 (ASH)	- (S) - (A) - (P) \$105,855.28 (U) \$105,855.28 (T)	9-14
WINTHROP UNIVERSITY HOSPITAL PO BOX 9562 UNIODALE NY 11555-9562	1592	3/13/06	05-14945 (ASH)	Unspecified*	9-14
WISLER, BARRY PODIATRY 1773 KUSER RD HAMILTON NJ 08690	1378	3/7/06	05-14945 (ASH)	- (S) - (A) - (P) \$5,000.00 (U) \$5,000.00 (T)	9-14
WITTPENN, JOHN OPHTHALMOLOGY 2500 ROUTE 347, BLDG 24 STONY BROOK NY 11790	2528	3/29/06	05-14945 (ASH)	- (S) - (A) - (P) \$225.00 (U) \$225.00 (T)	9-14

Objectionable Claims

Name/Address of Claimant	Claim Number	Date Filed	Case Number	Total Amount Claimed	Paragraph(s) no. reference in Application
WULFSBERG, BRUCE ORTHOPEDIC SURGERY 2103 BURLINGTON MOUNT HOLLY RD BURLINGTON NJ 08016	968	2/27/06	05-14945 (ASH)	- (S) - (A) - (P) \$1,826.00 (U) \$1,826.00 (T)	9-14
ZAGELBAUM, BRUCE OPHTHALMOLOGY 360 S OYSTER BAY RD HICKSVILLE NY 11801	1380	3/7/06	05-14945 (ASH)	- (S) - (A) \$1,044.65 (P) - (U) \$1,044.65 (T)	9-14
ZECHOWY, ALLEN NEUROLOGY 1415 EAST RTE 70 STE 204 CHERRY HILL NJ 08034	1183	3/2/06	05-14945 (ASH)	- (S) - (A) - (P) \$432.52 (U) \$432.52 (T)	9-14
ZIPPIN, ALLEN NEUROSURGERY 309 MIDDLE COUNTRY ROAD SMITHTOWN NY 11787	587	2/21/06	05-14945 (ASH)	- (S) - (A) - (P) \$625.00 (U) \$625.00 (T)	9-14
ZODIATIS, DEMETRIUS INTERNAL MEDICINE 1388 STONY BROOK ROAD STONY BROOK NY 11790	797	2/23/06	05-14945 (ASH)	- (S) - (A) \$1,281.14 (P) \$1,281.14 (U) \$1,281.14 (T)	9-14

Totals:	81 Claims	- (S) - (A) \$1,164,250.79 (P) \$705,596.35 (U) \$1,868,566.00 (T)
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(S) - Secured
(A) - Administrative
(P) - Priority
(U) - Unsecured
(T) - Total Claimed