FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CH	HANGES	IN BEN	NEFICIAL	OWNERS	HIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Andreano Dominic J</u>					2. Issuer Name and Ticker or Trading Symbol Pediatrix Medical Group, Inc. [MD]							(Che	ck all app Direct	ionship of Reportin all applicable) Director Officer (give title		son(s) to Is 10% O Other (s	vner		
(Last) 1301 CO	(Fir	,	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 09/26/2022						X	below			below)			
(Street) SUNRIS (City)			3323 Zip)		4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Inc Line)	Form Form	lual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and Securi Benefi		ies cially Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
									Code	v	Amount	(A) or (D) Pr		rice	Transa	ransaction(s) nstr. 3 and 4)			(111341.4)
Common	ommon Stock 09/26/2		022		F		4,267(1)	Г) !	16.81	. 18	189,440		D					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code (8)		of	r osed (1. 3, 4	6. Date Expirati (Month/	ion Da Day/Y		7. Titl Amou Secur Unde Deriv Secur 3 and	int of rities rlying ative rity (In	str. D Si (li	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ E	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Represents shares withheld for the payment of taxes upon the vesting of shares of restricted stock previously reported.

Remarks:

/s/ Dominic J. Andreano 09/28/2022

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.