

PRIORITY HEALTH []
 1231 E. BELTLINE NE
 GRAND RAPIDS, MI 49525
 (000)000-0000

REMITTANCE
 ADVICE

TIMOTHY J TOBOLIC MD PLLC [900068405]
 7740 BYRON CENTER AVE SW

BYRON CENTER, MI 49315

NPI #: 1982923660
 PAGE #: 1 of 1
 DATE: 2025-04-03
 EFT #: 25089B1000352184
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME GESINK, DANIEL			HIC 94761653800	ACNT	3930LMD642			ICN 426728210300	ASG Y	MOA	
1013940584	0514	051424	-1 73562			-86.90	0.00	0.00	0.00	CO-4	-86.90 0.00
PT RESP	0.00		CLAIM TOTALS			-86.90	0.00	0.00	0.00		-86.90 0.00
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 22: Reversal of Previous Payment											
NAME GESINK, DANIEL			HIC 94761653800	ACNT	3930LMD642			ICN 427602976400	ASG Y	MOA	
1013940584	0514	051424	-1 73562			-86.90	0.00	0.00	0.00	CO-4	-86.90 0.00
PT RESP	0.00		CLAIM TOTALS			-86.90	0.00	0.00	0.00		-86.90 0.00
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 22: Reversal of Previous Payment											
NAME GESINK, DANIEL			HIC 94761653800	ACNT	3930LMD642			ICN 435210136200	ASG Y	MOA	
1013940584	0514	051424	1 73562 LT			86.90	65.67	0.00	0.00	CO-45	21.23 65.67
PT RESP	0.00		CLAIM TOTALS			86.90	65.67	0.00	0.00		21.23 65.67
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING CHARGE		0.00	NET	65.67
STATUS CODE 1: Processed as Primary											
TOTALS:	# OF	BILLED	ALLOWED	DEDUCT	COINS	TOTAL	PROV PD	PROV	CHECK		
	CLAIMS	AMT	AMT	AMT	AMT	RC-AMT	AMT	ADJ AMT	AMT		
	3	-86.90	65.67	0.00	0.00	-152.57	65.67	0.00	65.67		

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES

CO-4 The procedure code is inconsistent with the modifier used or a required modifier is missing.
 CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.

