

MUTUAL OF OMAHA COMPANIES CLAIMS DEPARTMENT []
3300 MUTUAL OF OMAHA PLZ
OMAHA, NE 681751004
(000)000-0000

REMITTANCE
ADVICE

TIMOTHY J TOBOLIC MD PL [0006598733]
STE 202
7740 BYRON CENTER AVE
BYRON CENTER, MI 49315

NPI #: 1982923660
PAGE #: 1 of 1
DATE: 2025-06-06
EFT #: 684258514
TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD	MOA
NAME	MENACHER, JAMES B			HIC 78395892M	ACNT 6377LMD642				ICN 586310138500-005/20250530MIBA1130	ASG Y		
1013940584	0514	051425	11	99214	25	241.68	24.17	0.00	0.00	OA-23	217.51	24.17
1013940584	0514	051425	11	J1010	RT	60.00	1.32	0.00	0.00	OA-23	58.68	1.32
1013940584	0514	051425	11	20610	RT	155.00	12.23	0.00	0.00	OA-23	142.77	12.23
1013940584	0514	051425	11	G0446	XU	65.00	0.00	0.00	0.00	OA-23	65.00	0.00
1013940584	0514	051425	11	G8476		0.00	0.00	0.00	0.00			0.00
1013940584	0514	051425	11	G8420		0.00	0.00	0.00	0.00			0.00
1013940584	0514	051425	11	G8427		0.00	0.00	0.00	0.00			0.00
1013940584	0514	051425	11	2000F		0.00	0.00	0.00	0.00			0.00
PT RESP	0.00			CLAIM TOTALS		521.68	37.72	0.00	0.00		483.96	37.72
ADJ TO TOTAL: PREV PD				INTEREST		0.00		LATE FILING CHARGE		0.00	NET	37.72
STATUS CODE 2: Processed as Secondary												

PROVIDER ADJ DETAILS:	PLB REASON CODE	FCN/OTHER IDENTIFIER	HIC	AMOUNT
	Adjustment (CS)	ZELIS	TRANSACTION FEE	0.93

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	521.68	37.72	0.00	0.00	483.96	36.79	0.93	36.79

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES
OA-23 Payment adjusted due to the impact of prior payer(s) adjudication including payments and / or adjustments

