

HUMANA INC. []  
P.O. BOX 14601  
LEXINGTON, KY 405124601  
(000)000-0000  
APPS.HUMANA.COM/MARKETING/DOCUMENTS.ASP?FILE=2859948

REMITTANCE  
ADVICE

BYRON CENTER FAMILY MEDICINE [941242]  
7740 BYRON CENTER AVE SW STE 2

BYRON CENTER, MI 49315

NPI #: 1982923660  
PAGE #: 1 of 1  
DATE: 2025-03-21  
EFT #: 155173441250322  
TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME DEWEY, CYNTHIA					HIC H79702621	ACNT 4471LMD642				ICN 820250380581215	ASG Y MOA	
1306898036	0129	012925	11	1	G9621		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	99497	33	132.00	0.00	0.00	0.00	CO-96	132.00
						REM: N180						
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	G2211		25.00	0.00	0.00	0.00	CO-B1	25.00
						REM: N20						
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	G0444	XU 33	29.45	0.00	0.00	0.00	CO-96	29.45
						REM: N180						
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	G0442	XU	30.00	0.00	0.00	0.00	CO-96	30.00
						REM: N180						
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	G8510		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	2000F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	G0439		361.00	121.85	0.00	0.00	CO-253 CO-45	2.44 239.15
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	99214	25	241.68	0.00	0.00	0.00	CO-236	241.68
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	2000F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	3074F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	3078F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	1000F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	3008F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	1160F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	2001F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
1306898036	0129	012925	11	1	1159F		0.00	0.00	0.00	0.00		0.00
						HCPI: RECONSIDERATION						
PT RESP	0.00				CLAIM TOTALS		819.13	121.85	0.00	0.00	699.72	119.41
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		0.00	NET 119.41
PLAN TYPE: MEDICARE ADVANTAGE PPO												
STATUS CODE 1: Processed as Primary												

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	819.13	121.85	0.00	0.00	699.72	119.41	0.00	119.41

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

- CO-236 This procedure or procedure / modifier combination is not compatible with another procedure or procedure / modifier combination provided on the same day according to the National Correct Coding Initiative.
- CO-253 Sequestration - reduction in federal spending
- CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
- CO-96 Non-covered charge(s).
- CO-B1 Non-covered visits.
- N180 This item or service does not meet the criteria for the category under which it was billed.
- N20 Service not payable with other service rendered on the same date.

