

Cigna Supplemental Benefits []
P.O. BOX 5710
Scranton, PA 18505
(000)000-0000

REMITTANCE
ADVICE

TIMOTHY J TOBOLIC MD PLLC
7740 BYRON CENTER AVE SW

BYRON CENTER, MI 49315

NPI #: 1013940584
PAGE #: 1 of 1
DATE: 2025-04-24
EFT #: 658792123
TAX ID #: 272620668

REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME VANDERVEEN, ROBERT E		HIC 80F0056327	ACNT 5543LMD642					ICN C14524916122	ASG Y MOA	
272620668	0328 032825	1 99213			146.00	17.13	0.00	0.00	OA-253 1.37	17.13
	(11)								OA-23 127.50	
272620668	0328 032825	1 G0446			61.88	0.00	0.00	0.00	OA-253 0.62	0.00
	(11)								OA-23 61.26	
PT RESP	0.00		CLAIM TOTALS		207.88	17.13	0.00	0.00	190.75	17.13
ADJ TO TOTAL: PREV PD			INTEREST		0.00		LATE FILING CHARGE		0.00 NET	17.13
STATUS CODE 2: Processed as Secondary										

PROVIDER ADJ DETAILS:	PLB REASON CODE	FCN/OTHER IDENTIFIER	HIC	AMOUNT
	Adjustment (CS)	ZELIS	TRANSACTION FEE	0.42

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	207.88	17.13	0.00	0.00	190.75	16.71	0.42	16.71

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
OA-253 Sequestration - reduction in federal spending

