

UMR []
 115 W Wausau Ave
 Wausau, WI 54401
 (000)000-0000

REMITTANCE
 ADVICE

TIMOTHY J. TOBOLIC, MD, PLLC
 STE 202
 7740 BYRON CENTER AVE SW
 BYRON CENTER, MI 49315

NPI #: 1982923660
 PAGE #: 1 of 1
 DATE: 2025-05-28
 EFT #: 676669393
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME LIJEWSKI, GARY			HIC 361100024614		ACNT 6207LMD642	ICN 25128609754			ASG Y	MOA	
INSURED NAME: LIJEWSKI, DIANE											
1306898036	0506	050625	11	99396	25	327.00	130.20	0.00	0.00	CO-45	130.20
1306898036	0506	050625	11	2001F		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	2000F		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	1000F		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	1159F		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	1160F		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	G0136	33	65.00	20.27	0.00	0.00	CO-45	20.27
1306898036	0506	050625	11	G0442	XU	30.00	19.02	0.00	0.00	CO-45	19.02
1306898036	0506	050625	11	G0444	XU	29.45	19.02	0.00	0.00	CO-45	19.02
1306898036	0506	050625	11	36415		20.00	1.80	0.00	0.00	CO-45	1.80
1306898036	0506	050625	11	G8420		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	0506	050625	11	3008F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS		471.45	190.31	0.00	0.00		190.31
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET 190.31
STATUS CODE 1: Processed as Primary											

PROVIDER ADJ DETAILS:	PLB REASON CODE	FCN/OTHER IDENTIFIER	HIC	AMOUNT
Adjustment (CS)	ZELIS		TRANSACTION FEE	4.70

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	471.45	190.31	0.00	0.00	281.14	185.61	4.70	185.61

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES
 CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.

