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TIMOTHY J. TOBOLIC, MD, PLLC                        NPI #:      1982923660
7740 BYRON CENTER AVE SW                            PAGE #:     1 of 1
STE 202                                             DATE:       2025-05-07
BYRON CENTER, MI 493156929                          NONPAY #:   393563189
                                                    TAX ID #:   272620668
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REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT		PROV PD
NAME BULTENA, JULIE		HIC 4A86W44KP70	ACNT 3204LMD642				ICN 1925118016412	ASG Y	MOA MA15		
1306898036	1120 112024	11	1 3074F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1306898036	1120 112024	11	1 3078F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1306898036	1120 112024	11	1 1158F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
PT RESP 0.00		CLAIM TOTALS			0.00	0.00	0.00	0.00		0.00	0.00
ADJ TO TOTAL: PREV PD			INTEREST	0.00	LATE FILING CHARGE			0.00	NET	0.00	
STATUS CODE 1: Processed as Primary											

REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT		PROV PD
NAME GENTHER, WILLIAM R		HIC 4WT6J11UA53	ACNT 6084LMD642				ICN 1825122674202	ASG Y	MOA MA15		
1013940584	0428 042825	11	1 1158F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0428 042825	11	1 1160F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0428 042825	11	1 1159F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0428 042825	11	1 2001F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0428 042825	11	1 3008F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0428 042825	11	1 2010F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0428 042825	11	1 3074F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0428 042825	11	1 3078F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
PT RESP 0.00		CLAIM TOTALS			0.00	0.00	0.00	0.00		0.00	0.00
ADJ TO TOTAL: PREV PD			INTEREST	0.00	LATE FILING CHARGE			0.00	NET	0.00	
STATUS CODE 1: Processed as Primary											

REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT		PROV PD
NAME RIDER, GARY L		HIC 5MM6V81HF72	ACNT 6117LMD642				ICN 1825122674232	ASG Y	MOA MA15		
1013940584	0430 043025	11	1 1158F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0430 043025	11	1 1160F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0430 043025	11	1 1159F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0430 043025	11	1 2001F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0430 043025	11	1 3008F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0430 043025	11	1 2010F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0430 043025	11	1 3078F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
1013940584	0430 043025	11	1 3075F		0.00	0.00	0.00	0.00			0.00
			REM: N517 MA130								
PT RESP 0.00		CLAIM TOTALS			0.00	0.00	0.00	0.00		0.00	0.00
ADJ TO TOTAL: PREV PD			INTEREST	0.00	LATE FILING CHARGE			0.00	NET	0.00	
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
	3	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES
MA130   Your claim contains incomplete and / or invalid information, and no appeal rights are afforded because
          the claim is unprocessable. Please submit a new claim with the complete / correct information.
MA15   Alert: Your claim has been separated to expedite handling. You will receive a separate notice for the
          other services reported.
N517   Resubmit a new claim with the requested information.

CLAIM·MD