PRIORITY HEALTH []
1231 E. BELTLINE NE
GRAND RAPIDS, MI 49525
(000)000-0000

TIMOTHY J TOBOLIC MD PLLC [900068405]

7740 BYRON CENTER AVE SW

BYRON CENTER, MI 49315

NPI #: 1982923660 PAGE #: 1 of 1 DATE: 2025-04-10

NONPAY #: 25096B1000320628 TAX ID #: 272620668

REND PROV	/ SERV DAT	re pos	NOS PROC	MODS		BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-	AMT	PROV PD
NAME LANDIS, CHRISTOPHER HIC 94958102700 ACNI INSURED NAME: LANDIS, CHRIS						4315LMD64	12	ICN 4	1275693140	00 AS	G Y MOA	
	36 1231 123	•	-1 36415			-15.00	0.00	0.00	0.00	CO-16	-15.00	0.00
				REM: M76								
PT RESP	0.00		CLAIM	TOTALS		-15.00	0.00	0.00	0.00		-15.00	0.00
ADJ TO TO	TAL: PREV	INTEREST			0.00	LATE	FILING	CHARGE	0.00	NET	0.00	
STATUS CO	DDE 22: Rev	versal of	Previous	Payment								
	DIS, CHRIST		HIC 94958	102700	ACNT	4315LMD64	12	ICN 4	1341908782	00 AS	G Y MOA	
	NAME: LAND					20.00	0 00	0 00	0 00	go 16	20.00	0 00
130009803	36 1231 123	124	1 36415		_	20.00	0.00	0.00	0.00	CO-16	20.00	0.00
				REM: M7	6							
PT RESP	0.00		CLAIM			20.00	0.00	0.00	0.00		20.00	0.00
ADJ TO TO	TAL: PREV	INTEREST			0.00 LATE		FILING	CHARGE	0.00	NET	0.00	
STATUS CO	DDE 1: Prod	cessed as	Primary									
TOTALS:	# OF	BILLED	ALLO	WED	DEDU	CT	COINS	TOTAL	PROV	 PD	PROV	CHECK
	CLAIMS	AMT	AM	T	AMT		AMT	RC-AMT	AMT		ADJ AMT	AMT
	2	5.0	0	0.00	0	.00	0.00	5.0	0 0	.00	0.00	0.00

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

CO-16 Claim / service lacks information which is needed for adjudication. Check Remittance Remark Codes for

details.

M76 Missing / incomplete / invalid diagnosis or condition.