



## Quality Incentive Payment Allocations

PAYOR List	CATEGORY List
Aetna	Aetna Incentive
Aetna Medicare	Aetna Medicare PCIP
BCBS	BCBS PRP BCBS PGIP BCBS PAYG BCBS COMPLETE (Medicaid) BCBS PEC Advantasure
BCBS Medicare	BCBS Medicare Incentive
BCN	BCN Incentives BCN Incentives PRP BCN Million Hearts BCN Risk Settlement
BCN Medicare	BCN Advant Incentives BCN Advant Incent PRP BCN Advant Gap Closure BCN Advant PAYG
Humana	Humana Rewards Model Practice
Humana Medicare	Humana MA Incentives Humana Medicare PCIP
Medicaid (straight)	Medicaid ACA
Medicare (straight)	Medicare HPSA Medicare Quality Report Medicare Railroad Incentives
Meridian Medicaid	Meridian ACA Meridian CHCS Meridian Incentive
Molina	P4P Bonus
Priority Health	Reconciliation PH AHA PH ACA PH CMF PH Gain Share PH Healthy By Choice PH Incentive PH PIP
PH Medicaid	PH Medicaid ACA PH CSHCS Medicaid PH Medicaid PIP
Trinity	Gain Share Trinity NextGen ACO
United Health Care	UHC Medicare UHC HPSA UHC PQRS UHC MIPS

INCENTIVE YEAR <small>Year the incentive was for:</small>	2024	
PAYMENT YEAR <small>Year the check arrived</small>	2025	
QUARTER <small>Latter of check arrived / deposited</small>	3rd	
Date Received	8/4/25	
Date Deposit	8/4/25	
Payor / Insurance Co.	BCBS	
Category	PR P24 MAPPO	
Pay Source <small>(Who wrote the ck)</small>	BCBS	
Ck / EFT Date	7/31/25	
Check/EFT #	0001064521	
Total	7470.00	%
Tobolic Allocation	4695.00	
Duemler Allocation	2775.00	
Uncategorized Allocation <small>Must Contact Source ASAP for Allocation</small>		

Comment:

Date Completed:

8/4/25

Completed By:

SSU

Date Reviewed and Reconciled:

Reviewed and Reconciled by:

No.1064521

BLUE CROSS AND BLUE SHIELD OF MICHIGAN P.O. BOX 366, DETROIT, MICH 48231-0366  
 Blue Cross Blue Shield of Michigan is an Independent licensee of the Blue Cross and Blue Shield Association

INVOICE NUMBER	AMOUNT	DISCOUNT	NET AMOUNT
PRP24MAPPO986	7,470.00	0	7,470.00
TOTALS	7,470.00	0.00	7,470.00



OFBCBPO250730100001510010031G00

PLEASE DETACH BEFORE DEPOSITING

THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATER MARK. VIEW BY HOLDING AT AN ANGLE.



Blue Cross  
Blue Shield  
of Michigan

A nonprofit corporation and independent licensee  
of the Blue Cross and Blue Shield Association

600 Lafayette East, MC 0808, Detroit, Michigan 48226-2998

PAY TO THE ORDER OF 000151  
 TIMOTHY J TOBOLIC MD PLLC  
 7740 BYRON CENTER AVE SW  
 BYRON CENTER, MI 49315



ACCOUNTS PAYABLE COMERICA BANK

0001064521

74-478  
724

DATE 07/31/25

SSORTAXID#

DOLLARS \$\*\*\*\*\*7,470.00

NOT VALID AFTER ONE HUNDRED EIGHTY DAYS

\*\*\*\*\*  
 EVEN THOUSAND FOUR HUNDRED SEVENTY AND 00/100 DOLLARS

0001064521 10776067821 2172951781



August 12, 2025

# Here's your check for the Medicare Plus Blue<sup>SM</sup> 2024 Performance Recognition Program.



Dear Provider,

Congratulations and thank you for your efforts to enhance our members' health. Enclosed you'll find your Medicare Plus Blue 2024 Performance Recognition Program incentive payment and payment report.

The payment rewards your efforts in these areas:

Medicare Plus Blue PRP Quality Measures
Breast Cancer Screening
Colorectal Cancer Screening
Comprehensive Diabetes Care: Eye Examination
Diabetes Care-Glycemic Status Assessment <= 9%
Diabetes Care – Kidney Health Evaluation
Controlling High Blood Pressure
Follow-Up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions
Medicare Wellness Visits
Medication Reconciliation Post-Discharge
Patient Engagement
Medication Adherence Cholesterol
Medication Adherence Diabetes
Medication Adherence Hypertension
Statin Therapy for Patients with Cardiovascular Disease – Received Therapy
Statin Use in Persons with Diabetes

These health measures enhance the quality of our members' health care and are an important part of our HEDIS<sup>®</sup> scores.\*

If you have questions about your payment, contact your provider consultant. Follow these steps to find contact information:

- Go to **bcbsm.com/providers**.
- Click on *Contact Us* at the bottom of the page.
- Click *Providers* under Contact Center.
- Choose *Blue Cross Blue Shield of Michigan* or *Blue Care Network* from the *Select a plan type* drop-down menu.
- Click the + sign next to *For professional providers* and select your region. Providers in the east, mid and southeast regions should send an email to **petcontactus@bcbsm.com** as noted for those regions.

We appreciate the care and service you and your staff provide to our members. We look forward to working more closely with you to enhance our program.

Sincerely,



Karen Kopytek  
Director, Performance Recognition Program

*Enclosure: Check and report*

\*HEDIS®, which stands for Healthcare Effectiveness Data Set, is a registered trademark of the National Committee for Quality Assurance.



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## 2024 MA PPO PRP Payment Report

NPI	PCP Last Name	PCP First Name	Payment Breast Cancer	Payment Colorectal Cancer	Payment Eye Exam	Payment HbA1c	Payment Wellness Visit	Payment High Blood Pressure	Payment Statin CVD	Payment Kidney Health	Payment Med Adhere Diabetes	Payment Med Adhere Cholesterol	Payment Med Adhere Hypertension	Payment Statin Diabetes	Payment Follow up chronic	Payment Post-Discharge	Payment TRC Engagement	Total PRP Payment	PAYTO TIN	PAYTO TIN NAME	Invoice ID
1306898036	Duemler	Scott	\$ -	\$ 350.00	\$ 340.00	\$ -	\$ 700.00	\$ 375.00	\$ 50.00	\$ 240.00	\$ 120.00	\$ 330.00	\$ 120.00	\$ 100.00	\$ -	\$ -	\$ 50.00	\$ 2,775.00	272620668	TIMOTHY J TOBOLIC MD PLLC	PRP24MAPPO986
1013940584	Tobolic	Timothy	\$ 150.00	\$ 475.00	\$ 425.00	\$ 375.00	\$ 1,075.00	\$ 800.00	\$ 50.00	\$ -	\$ 30.00	\$ -	\$ 360.00	\$ 100.00	\$ 455.00	\$ 150.00	\$ 250.00	\$ 4,695.00	272620668	TIMOTHY J TOBOLIC MD PLLC	PRP24MAPPO986
			\$ 150.00	\$ 825.00	\$ 765.00	\$ 375.00	\$ 1,775.00	\$ 1,175.00	\$ 100.00	\$ 240.00	\$ 150.00	\$ 330.00	\$ 480.00	\$ 200.00	\$ 455.00	\$ 150.00	\$ 300.00	\$ 7,470.00	272620668	Total	