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

(000)000-0000

NPI #: 1982923660 PAGE #: 1 of 1 DATE: 2025-05-30

NONPAY #: CG93827114473075147576288

TAX ID #: 272620668

REND PROV	SERV DATE	POS	NOS	PROC	MOD	3	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT		PROV PD
NAME HEYS,	MICHELLE		HIC	21920	784	ACNT	6343LMD64	2	ICN 25	135147238	ASG Y	MOA	
1013940584	0415 041525	11		99213			146.00	74.71	74.71	0.00	CO-45	71.29	0.00
1013940584	0415 041525	11		3008F			0.00	0.00	0.00	0.00			0.00
1013940584	0415 041525	11		2001F			0.00	0.00	0.00	0.00			0.00
1013940584	0415 041525	11		2000F			0.00	0.00	0.00	0.00			0.00
1013940584	0415 041525	11		1000F			0.00	0.00	0.00	0.00			0.00
1013940584	0415 041525	11		1159F			0.00	0.00	0.00	0.00			0.00
1013940584	0415 041525	11		1160F			0.00	0.00	0.00	0.00			0.00
PT RESP	74.71			CLAIM	TOTALS		146.00	74.71	74.71	0.00		71.29	0.00
ADJ TO TOTAL: PREV PD					INTE	REST	0.00	LATE	FILING C	HARGE	0.00	NET	0.00
STATUS CODE 1: Processed as Primary													

TOTALS: DEDUCT COINS CHECK # OF BILLED ALLOWED TOTAL PROV PD PROV CLAIMS AMT AMT AMT AMT RC-AMT AMT ADJ AMT AMT 0.00 0.00 146.00 74.71 74.71 71.29 0.00 0.00

GLOSSARY: GROUP, REASON, MOA, REMARK AND REASON CODES
CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
PR-1 Deductible Amount