TIMOTHY J. TOBOLIC, MD, PLLC 7740 BYRON CENTER AVE SW STE 202 BYRON CENTER, MI 493156929 NPI #: 1982923660
PAGE #: 1 of 3
DATE: 2025-04-22
NONPAY #: 393527347
TAX ID #: 272620668

REND PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT		PROV PD
NAME BOERSI	MA, SHARON M		HIC	5WR2M	19VR05 ACM	NT 5901LMD642		ICN 1	82510767881	2 ASG Y	MOA	MA15
1013940584	0415 041525	11	1	3074F		0.00	0.00	0.00	0.00			0.00
					REM: N517							
1013940584	0415 041525	11	1	3078F		0.00	0.00	0.00	0.00			0.00
			_		REM: N517							
1013940584	0415 041525	11	1	3008F		0.00	0.00	0.00	0.00			0.00
1013040504	0415 041505		-	2001 11	REM: N517		0 00	0 00	0.00			0 00
1013940584	0415 041525	TT	Т	2001F	REM: N517	0.00	0.00	0.00	0.00			0.00
1013940584	0415 041525	11	1	1000F	KEM: NOI/	0.00	0.00	0.00	0.00			0.00
1013940304	0415 041525		_	TOOOL	REM: N517		0.00	0.00	0.00			0.00
1013940584	0415 041525	11	1	1159F	KBM. NSI/	0.00	0.00	0.00	0.00			0.00
1010710001	0115 011525		_	11331	REM: N517		0.00	0.00	0.00			0.00
1013940584	0415 041525	11	1	1160F		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 TOTA	AL: PREV PD				INTEREST	0.00	LATE	FILING (	CHARGE	0.00	NET	0.00
STATUS CODE	E 1: Process	ed a	s Pri	mary								
	EWICZ, PHYLL			6Q57H	U8AT30 ACI	NT 5680LMD642			82509865549	2 ASG Y	MOA	
1013940584	0407 040725	11	1	3075F	DEM 11515	0.00	0.00	0.00	0.00			0.00
1013040504	0407 040725		-	3078F	REM: N517	0.00	0.00	0.00	0.00			0 00
1013940584	0407 040725	TT	Т	30/8F	REM: N517		0.00	0.00	0.00			0.00
1012040504	0407 040725	11	1	3008F	KEM: NOI/	0.00	0.00	0.00	0.00			0.00
1013940304	0407 040723		_	30001	REM: N517		0.00	0.00	0.00			0.00
1013940584	0407 040725	11	1	2001F	KIIII. NOI7	0.00	0.00	0.00	0.00			0.00
1010710001	0107 010723		_	20021	REM: N517		0.00	0.00	0.00			0.00
1013940584	0407 040725	11	1	1000F		0.00	0.00	0.00	0.00			0.00
					REM: N517	MA130						
1013940584	0407 040725	11	1	1159F		0.00	0.00	0.00	0.00			0.00
					REM: N517	MA130						
1013940584	0407 040725	11	1	1160F		0.00	0.00	0.00	0.00			0.00
					REM: N517							
PT RESP	0.00			CLAIM		0.00	0.00	0.00	0.00		0.00	0.00
	AL: PREV PD	_			INTEREST	0.00	LATE	FILING	CHARGE	0.00	NET	0.00
STATUS CODI	E 1: Process	ed a	s Pri	mary								
NAME WAY	T TAID A. C.		****	9KA7D	MCTATE CO. 3 CD	NT 5662LMD642		TON 1	82509865545	2 ASG Y	MOA	NA 1 E
NAME MAYS,	0404 040425	11		. 3KA/D 3075F	MOWIOS ACI	0.00	0.00	0.00	0.00	Z ASG I	MOA .	0.00
1300036030	0404 040423			3073E	REM: N517		0.00	0.00	0.00			0.00
1306898036	0404 040425	11	1	3078F	KDF1. NJI/	0.00	0.00	0.00	0.00			0.00
1550050050	0101 010123		_	20702	REM: N517		0.00	0.00	0.00			0.00
1306898036	0404 040425	11	1	3060F		0.00	0.00	0.00	0.00			0.00
			_		REM: N517							2.00
PT RESP	0.00			CLAIM	TOTALS	0.00	0.00	0.00	0.00		0.00	0.00
	0.00 AL: PREV PD			CLAIM	TOTALS INTEREST	0.00		0.00 FILING		0.00	0.00 NET	0.00



WPS GHA - MAC J8 MI PART B

NPI #: 1982923660

TIMOTHY J. TOBOLIC, MD, PLLC PAGE #: 2 of 3 NONPAY #: 393527347

END PROV	SERV DA	re pos	NOS P	ROC MOD	s	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-A	мт	PROV PD
AME MCIN	TYRE, FRE	DERICK C	HIC 9W	K4VY4FW83	ACNT	5885LMD64	2	ICN	18251076787			MA01 MA15
	5 0416 04		1 G04			361.00	0.00	0.00		CO-24	361.00	0.00
	6 0416 04		1 G01			34.80	0.00	0.00		CO-24	34.80	0.00
	6 0416 04:		1 993			341.00	0.00	0.00	0.00	PR-96	341.00	0.00
30003003	0 0410 04.	1023 11	1 993	REM:	NT1 2 A	341.00	0.00	0.00	0.00	FR-30	341.00	0.00
2050000	- 041- 04		1 004		NIJU					<b>~~ ~ . . .</b>	120.00	
	5 0416 04:		1 994			132.00	0.00	0.00	0.00	CO-24	132.00	0.00
	6 0416 04:		1 364			20.00	0.00	0.00		CO-24	20.00	0.00
30689803	5 0416 04:	L625 11	1 G22			25.00	0.00	0.00	0.00	CO-24	25.00	0.00
30689803	6 0416 043	1625 11	1 G04	44 XU		91.00	0.00	0.00	0.00	CO-24	91.00	0.00
30689803	6 0416 043	1625 11	1 G04	42 XU		43.00	0.00	0.00	0.00	CO-24	43.00	0.00
30689803	6 0416 043	1625 11	1 G04	46 XII		30.00	0.00	0.00	0.00	CO-24	30.00	0.00
30689803	6 0416 04	1625 11	1 051	3F		0.00	0.00	0.00	0.00			0.00
				REM:	N620							
20600002	6 0416 04:	160E 11	1 G96		11020	0.00	0.00	0.00	0.00			0.00
30669603	0 0416 04.	1625 11	1 696			0.00	0.00	0.00	0.00			0.00
				REM:	N620							
306898030	6 0416 04:	1625 11	1 200			0.00	0.00	0.00	0.00			0.00
				REM:	N620							
T RESP	341.00		CLA	IM TOTALS		1077.80	0.00	0.00	0.00		1077.80	0.00
OJ TO TO	TAL: PREV	PD		INTE	REST	0.00	LATE	FILING	CHARGE	0.00	NET	0.00
	DE 1: Pro		s Primar									
				•								
ME SELDI	ERS, JERI	LYN M	HIC 30	05T51CE72	ACNT	5701LMD64	2	JCN	1825098655	582 ASG	Y MOA	MA15
	5 0407 040		1 307			0.00	0.00	0.00				0.00
,000,000	0 0 1 0 7 0 1	3723 11	± 507		N517 M		0.00	0.00	0.00			0.00
20,00002	. 0407 04	777F 11	1 307		NOT/ E		0.00	0 00	0 00			0 00
00009003	5 0407 040	J/25 II	1 307			0.00	0.00	0.00	0.00			0.00
					N517 M							
0689803	5 0407 040	0725 11	1 300			0.00	0.00	0.00	0.00			0.00
				REM:	N517 M	IA130						
0689803	6 0407 040	725 11	1 200	1F		0.00	0.00	0.00	0.00			0.00
				REM:	N517 M	1A130						
10689803	6 0407 040	1725 11	1 100			0.00	0.00	0.00	0.00			0.00
,000,000	0 0 1 0 7 0 1	3723 11			N517 M		0.00	0.00	0.00			0.00
0,000000	. 0407 04	777F 11	1 115		NOT/ E		0 00	0 00	0 00			0 00
0009803	5 0407 040	J/25 II	1 115			0.00	0.00	0.00	0.00			0.00
					N517 M							
30689803	6 0407 040	0725 11	1 116			0.00	0.00	0.00	0.00			0.00
				REM:	N517 M	1A130						
r resp	0.00		CLA	IM TOTALS		0.00	0.00	0.00	0.00		0.00	0.00
J TO TO	TAL: PREV	PD		INTE	REST	0.00	LATE	FILING	CHARGE	0.00	NET	0.00
	DE 1: Pro		Primar									
	JL 1. 110.	Jebbeu u	, , , , , , , , , , , , , , , , , , , ,	ž								
ME THOD	NTON, MIT	מוסדד א	UTC 73	78FQ8RC66	λ C'NΤΠ	5578LMD64	2	TCN	18250916366	500 ASG	V MOA	MA01 MA15
					ACNI							
	5 0401 040		1 992			146.00	85.63	85.63		CO-45	60.37	0.00
	5 0401 040		1 G22			25.00	15.26	15.26	0.00	CO-45	9.74	0.00
0689803	5 0401 040	0125 11	1 200	0F		0.00	0.00	0.00	0.00			0.00
				REM:	N620							
RESP	100.89		CLA	IM TOTALS		171.00	100.89	100.89	0.00		70.11	0.00
от то то	TAL: PREV	PD		INTE	REST	0.00	LATE	FILING	CHARGE	0.00	NET	0.00
	DE 1: Pro		. Primar									
	JL 1. 110.	Jebbeu u	, , , , , , , , , , , , , , , , , , , ,	ž								
ME ZOMPI	ERG, BERN	Δ יידים Δ	нтс 4р	C2YA9GG85	ביאים	5806LMD64	2	TCN	18251056530	050 ASG	Y MOA	MA01 MA18
	4 0409 04		1 992		170141	146.00	85.63	85.63		CO-45	60.37	0.00
	4 0409 040	1942 II	1 G22			25.00	15.26	15.26	0.00	CO-45	9.74	0.00
RESP	100.89		CLA	IM TOTALS		171.00	100.89	100.89	0.00		70.11	0.00
J TO TO	TAL: PREV	PD		INTE	REST	0.00	LATE	FILING	CHARGE	0.00	NET	0.00
TATUS CO	DE 19: Pro	ocessed a	as Prima	ry, Forwa	rded t	o Addition	al Payer(	s)				
AIM INFO	ORMATION 1	FORWARDEI	TO: UN	ITEDHEALT	H GROU	JΡ						
TALS:	# OF	BILLEI	) A	LLOWED	DEL	UCT	COINS	TOTAL	PROV I	PD	PROV	CHECK
	CLAIMS	AMT		AMT	AM		AMT	RC-AMT			DJ AMT	AMT
	7	1419.8	30	201.78		11.78	0.00	1218.		.00	0.00	0.00
							0.00		·- 0.		J . U U	0.00

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

CO-24 Payment for charges adjusted. Charges are covered under a capitation agreement / managed care plan.

CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.

MA01 Alert: If you do not agree with what we approved for these services, you may appeal our decision. To make sure that we are fair to you, we require another individual that did not process your initial claim to conduct the appeal. However, in order to be eligible for an appeal, you must write to us within 120 days of the date you received this notice, unless you have a good reason for being late.

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.

Alert: The claim information is also being forwarded to the patient's supplemental insurer. Send any MA18 questions regarding supplemental benefits to them.

N130 Consult plan benefit documents / guidelines for information about restrictions for this service.

N517 Resubmit a new claim with the requested information.



REMITTANCE

DATE: 2025-04-22

ADVICE

NPI #: 1982923660 TIMOTHY J. TOBOLIC, MD, PLLC

NONPAY #: 393527347 PAGE #: 3 of 3
N620 Alert: This procedure code is for quality reporting / informational purposes only.

PR-1 Deductible Amount
PR-96 Non-covered charge(s). REMITTANCE ADVICE

DATE: 2025-04-22