

UNITED HEALTHCARE INSURANCE COMPANY []  
 9900 BREN ROAD  
 MINNETONKA, MN 553439664  
 (877)842-3210

REMITTANCE  
 ADVICE

BYRON CENTER FAMILY MEDICINE  
 7740 BYRON CENTER AVE SUITE 202  
 BYRON CENTER, MI 49315

NPI #: 1982923660  
 PAGE #: 1 of 1  
 DATE: 2025-07-15  
 EFT #: T5884357  
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME VANDEWEGE, KAREN B			HIC 952614645	ACNT 7070LMD642					ICN KEN7355650500	ASG Y	MOA
1013940584	0611	061125	11	1	36415	20.00	9.09	0.00	0.00	CO-45	10.91
										CO-253	0.18
PT RESP	0.00			CLAIM TOTALS		20.00	9.09	0.00	0.00		11.09
ADJ TO TOTAL: PREV PD				INTEREST		0.00		LATE FILING CHARGE		0.00	NET
PLAN TYPE: B & C HEALTH PLAN											8.91
STATUS CODE 1: Processed as Primary											
TOTALS:	# OF	BILLED	ALLOWED	DEDUCT	COINS	TOTAL	PROV PD	PROV	CHECK		
	CLAIMS	AMT	AMT	AMT	AMT	RC-AMT	AMT	ADJ AMT	AMT		
	1	20.00	9.09	0.00	0.00	11.09	8.91	0.00	8.91		

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES  
 CO-253 Sequestration - reduction in federal spending  
 CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.

