

BCBSM []
600 E LAFAYETTE
DETROIT, MI 482262998
(800)282-4548

REMITTANCE
ADVICE

TIMOTHY J TOBOLIC MD PLLC

BYRON CENTER, MI 493156928

NPI #: 1982923660
PAGE #: 1 of 6
DATE: 2025-08-20
EFT #: 510030932
TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME EDWARDS, DAWN R			HIC MIG893735672		ACNT 7897LMD642				ICN 26252236466400710		ASG Y	MOA
INSURED NAME: EDWARDS, JAMES L												
1013940584	0523	052325	11	1	99214	25	219.00	143.12	0.00	0.00	CO-144	112.38
											10.74	
											75.88	
											20.00	
1013940584	0523	052325	11	1	G0446	XU	65.00	40.48	0.00	0.00	CO-144	37.44
											3.04	
											24.52	
1013940584	0523	052325	11	1	36415		20.00	5.00	0.00	0.00	CO-144	4.62
											0.38	
											15.00	
1013940584	0523	052325	11	1	3075F		0.00	0.00	0.00	0.00		0.00
1013940584	0523	052325	11	1	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0523	052325	11	1	3008F		0.00	0.00	0.00	0.00		0.00
1013940584	0523	052325	11	1	2001F		0.00	0.00	0.00	0.00		0.00
1013940584	0523	052325	11	1	2000F		0.00	0.00	0.00	0.00		0.00
1013940584	0523	052325	11	1	1000F		0.00	0.00	0.00	0.00		0.00
1013940584	0523	052325	11	1	1159F		0.00	0.00	0.00	0.00		0.00
1013940584	0523	052325	11	1	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP	20.00	CLAIM TOTALS					304.00	188.60	0.00	0.00		154.44
ADJ TO TOTAL: PREV PD							0.00	LATE FILING CHARGE		0.00	NET	154.44
STATUS CODE 1: Processed as Primary												
NAME EDWARDS, DAWN R			HIC MIG893735672		ACNT 7898LMD642				ICN 26252236466800710		ASG Y	MOA
INSURED NAME: EDWARDS, JAMES L												
1013940584	0220	022025	11	1	36415		20.00	5.00	0.00	0.00	CO-144	4.62
											0.38	
											15.00	
PT RESP	0.00	CLAIM TOTALS					20.00	5.00	0.00	0.00		4.62
ADJ TO TOTAL: PREV PD							0.00	LATE FILING CHARGE		0.00	NET	4.62
STATUS CODE 1: Processed as Primary												
NAME FRANKLIN, VICKY K			HIC XYQ893188749		ACNT 7958LMD642				ICN 26252258618900710		ASG Y	MOA
1306898036	0811	081125	11	1	99396	25	327.00	167.10	0.00	0.00	CO-144	154.57
											12.53	
											159.90	
1306898036	0811	081125	11	1	G0446	XU	65.00	52.19	0.00	0.00	CO-144	48.28
											3.91	
											12.81	
1306898036	0811	081125	11	1	G0442	XU	30.00	28.23	0.00	0.00	CO-144	26.12
											2.11	
											1.77	
1306898036	0811	081125	11	1	G0444	XU	29.45	0.00	0.00	0.00	CO-234	0.00
											29.45	
REM: N20												
1306898036	0811	081125	11	1	G0136	33	65.00	30.36	30.36	0.00	CO-45	0.00
1306898036	0811	081125	11	1	3075F		0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	11	1	3079F		0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	11	1	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	11	1	G8510		0.00	0.00	0.00	0.00		0.00
PT RESP	30.36	CLAIM TOTALS					516.45	277.88	30.36	0.00		228.97
ADJ TO TOTAL: PREV PD							0.00	LATE FILING CHARGE		0.00	NET	228.97
STATUS CODE 1: Processed as Primary												



BCBSM			REMITTANCE
NPI #:	1982923660	TIMOTHY J TOBOLIC MD PLLC	ADVICE
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REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME LALONE, MARK A						HIC BEC891075098 ACNT	7770LMD642			ICN 26252196904400710	ASG Y	MOA		
1306898036	0801	080125	11	1	99396	25		-327.00	0.00	0.00	0.00	CO-9	-327.00	0.00
1306898036	0801	080125	11	1	G0136	33		-65.00	0.00	0.00	-6.07	CO-144	-2.27	-22.02
												CO-45	-34.64	
1306898036	0801	080125	11	1	36415			-20.00	0.00	0.00	0.00	CO-144	-0.51	-6.24
												CO-45	-13.25	
1306898036	0801	080125	11	2	96127	XU		-80.00	0.00	0.00	0.00	CO-144	-0.55	-6.91
												CO-45	-72.54	
1306898036	0801	080125	11	1	G9622			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	0513F			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	G8427			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	3077F			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	3079F			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	G8510			0.00	0.00	0.00	0.00			0.00
PT RESP	0.00					CLAIM TOTALS		-492.00	0.00	0.00	-6.07		-450.76	-35.17
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING CHARGE		0.00	NET	-35.17
STATUS CODE 22: Reversal of Previous Payment														

NAME LALONE, MARK A						HIC BEC891075098 ACNT	7770LMD642			ICN 26252196904402710	ASG Y	MOA		
1306898036	0801	080125	11	1	99396	25		327.00	167.10	0.00	0.00	CO-144	12.53	154.57
												CO-45	159.90	
1306898036	0801	080125	11	1	G0136	33		65.00	30.36	0.00	6.07	CO-144	2.27	22.02
												CO-45	34.64	
1306898036	0801	080125	11	1	36415			20.00	6.75	0.00	0.00	CO-144	0.51	6.24
												CO-45	13.25	
1306898036	0801	080125	11	2	96127	XU		80.00	7.46	0.00	0.00	CO-144	0.55	6.91
												CO-45	72.54	
1306898036	0801	080125	11	1	G0447	XU		65.00	52.19	0.00	0.00	CO-144	3.91	48.28
												CO-45	12.81	
1306898036	0801	080125	11	1	G9622			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	0513F			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	G8427			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	3077F			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	3079F			0.00	0.00	0.00	0.00			0.00
1306898036	0801	080125	11	1	G8510			0.00	0.00	0.00	0.00			0.00
PT RESP	6.07					CLAIM TOTALS		557.00	263.86	0.00	6.07		312.91	238.02
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING CHARGE		0.00	NET	238.02
STATUS CODE 1: Processed as Primary														

NAME SCHWARTZKOPF, ASHLEY B HIC OQQ910416552 ACNT 7880LMD642										ICN 26252206188800710		ASG Y	MOA	
INSURED NAME: SCHWARTZKOPF, TODD E														
1306898036	0806	080625	11	1	99395	25		297.00	157.26	0.00	0.00	CO-144	11.79	145.47
												CO-45	139.74	
1306898036	0806	080625	11	2	96127	XU		80.00	7.46	0.00	0.00	CO-144	0.55	6.91
												CO-45	72.54	
1306898036	0806	080625	11	1	G0136	33		65.00	30.36	30.36	0.00	CO-45	34.64	0.00
1306898036	0806	080625	11	1	36415			20.00	6.75	0.00	0.00	CO-144	0.51	6.24
												CO-45	13.25	
1306898036	0806	080625	11	1	90715			87.00	48.75	0.00	0.00	CO-45	38.25	48.75
1306898036	0806	080625	11	1	90471			41.00	33.29	0.00	0.00	CO-144	2.49	30.80
												CO-45	7.71	
1306898036	0806	080625	11	1	G8420			0.00	0.00	0.00	0.00			0.00
1306898036	0806	080625	11	1	3074F			0.00	0.00	0.00	0.00			0.00
1306898036	0806	080625	11	1	3078F			0.00	0.00	0.00	0.00			0.00
1306898036	0806	080625	11	1	G8510			0.00	0.00	0.00	0.00			0.00
1306898036	0806	080625	11	1	G9622			0.00	0.00	0.00	0.00			0.00
PT RESP	30.36					CLAIM TOTALS		590.00	283.87	30.36	0.00		321.47	238.17
ADJ TO TOTAL: PREV PD								INTEREST	0.00	LATE FILING CHARGE		0.00	NET	238.17
STATUS CODE 1: Processed as Primary														



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NPI #:	1982923660	TIMOTHY J TOBOLIC MD PLLC		ADVICE
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REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME KOLK, JEFFREY L HIC EJN974A23008 ACNT 7853LMD642 ICN 26252199870300710 ASG Y MOA												
1306898036	0805	080525	11	1	99396	25	327.00	167.10	0.00	0.00	CO-144	154.57
											12.53	
											159.90	
1306898036	0805	080525	11	1	G0444	XU	91.00	0.00	0.00	0.00	CO-234	0.00
						REM: N20					91.00	
1306898036	0805	080525	11	1	G0442	XU	43.00	28.23	0.00	0.00	CO-144	26.12
											2.11	
											14.77	
1306898036	0805	080525	11	1	G2211		25.00	0.00	0.00	0.00	CO-97	0.00
											25.00	
1306898036	0805	080525	11	1	36415		20.00	6.75	0.00	0.00	CO-144	6.24
											0.51	
											13.25	
1306898036	0805	080525	11	1	82043	QW	14.70	4.34	0.00	0.86	CO-45	3.48
											10.36	
1306898036	0805	080525	11	1	82570	QW	17.85	3.89	0.00	0.77	CO-45	3.12
											13.96	
1306898036	0805	080525	11	1	G0446	XU	65.00	52.19	0.00	0.00	CO-144	48.28
											3.91	
											12.81	
1306898036	0805	080525	11	1	G0447	XU	65.00	52.19	0.00	0.00	CO-144	48.28
											3.91	
											12.81	
1306898036	0805	080525	11	1	G0136	33	65.00	30.36	0.00	6.07	CO-144	22.02
											2.27	
											34.64	
1306898036	0805	080525	11	1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	0513F		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	G8417		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	G8427		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	4004F		0.00	0.00	0.00	0.00		0.00
1306898036	0805	080525	11	1	3060F		0.00	0.00	0.00	0.00		0.00
PT RESP	7.70				CLAIM TOTALS		733.55	345.05	0.00	7.70		312.11
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		413.74	312.11
STATUS CODE 1: Processed as Primary											0.00	NET

NAME LOWRY, WENDY M HIC YVA250037777 ACNT 7827LMD642 ICN 26252187390600710 ASG Y MOA												
1013940584	0718	071825	11	1	81003		33.60	2.25	0.00	0.45	CO-45	1.80
PT RESP	0.45				CLAIM TOTALS		33.60	2.25	0.00	0.45		1.80
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		31.35	1.80
STATUS CODE 1: Processed as Primary											0.00	NET

NAME ROTTMAN, BRIAN J HIC JZH124692056001 ACNT 7664LMD642 ICN 27252121822800710 ASG Y MOA												
1013940584	0725	072525	11	1	99214	25	219.00	143.12	0.00	0.00	CO-144	132.39
											10.73	
											75.88	
1013940584	0725	072525	11	1	71046		61.14	53.79	0.00	0.00	CO-144	49.75
											4.04	
											7.35	
1013940584	0725	072525	11	1	3074F		0.00	0.00	0.00	0.00		0.00
1013940584	0725	072525	11	1	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0725	072525	11	1	3008F		0.00	0.00	0.00	0.00		0.00
1013940584	0725	072525	11	1	2001F		0.00	0.00	0.00	0.00		0.00
1013940584	0725	072525	11	1	2000F		0.00	0.00	0.00	0.00		0.00
1013940584	0725	072525	11	1	1000F		0.00	0.00	0.00	0.00		0.00
1013940584	0725	072525	11	1	1159F		0.00	0.00	0.00	0.00		0.00
1013940584	0725	072525	11	1	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00				CLAIM TOTALS		280.14	196.91	0.00	0.00		182.14
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		98.00	182.14
STATUS CODE 1: Processed as Primary											0.00	NET

NAME SINCLAIR, KENT A HIC ETK706W16083 ACNT 7892LMD642 ICN 27252200062800710 ASG Y MOA												
1013940584	0806	080625	11	1	99213	25	146.00	98.69	0.00	9.87	CO-144	35.78
						REM: N172					3.70	
											49.34	
											47.31	
1013940584	0806	080625	11	1	G0447	XU	65.00	52.19	0.00	0.00	CO-144	48.28
											3.91	
											12.81	
1013940584	0806	080625	11	1	99401	25	65.00	61.25	0.00	0.00	CO-144	56.66
											4.59	
											3.75	
1013940584	0806	080625	11	1	G0446	XU	65.00	52.19	0.00	0.00	CO-144	48.28
											3.91	
											12.81	
1013940584	0806	080625	11	1	3074F		0.00	0.00	0.00	0.00		0.00
1013940584	0806	080625	11	1	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0806	080625	11	1	3008F		0.00	0.00	0.00	0.00		0.00
1013940584	0806	080625	11	1	2001F		0.00	0.00	0.00	0.00		0.00
1013940584	0806	080625	11	1	2000F		0.00	0.00	0.00	0.00		0.00
1013940584	0806	080625	11	1	1000F		0.00	0.00	0.00	0.00		0.00
1013940584	0806	080625	11	1	1159F		0.00	0.00	0.00	0.00		0.00
1013940584	0806	080625	11	1	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP	9.87				CLAIM TOTALS		341.00	264.32	0.00	9.87		189.00
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		142.13	189.00
STATUS CODE 1: Processed as Primary											0.00	NET



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REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME VANTUINEN, ELOISE						HIC KPV588341252	ACNT	7834LMD642			ICN 26252187391400710	ASG Y	MOA	
1013940584	0523	052325	11	1	99393			270.00	139.39	0.00	0.00	CO-144	10.45	128.94
												CO-45	130.61	
1013940584	0523	052325	11	1	G8427			0.00	0.00	0.00	0.00			0.00
1013940584	0523	052325	11	1	G8476			0.00	0.00	0.00	0.00			0.00
1013940584	0523	052325	11	1	G8420			0.00	0.00	0.00	0.00			0.00
1013940584	0523	052325	11	1	3074F			0.00	0.00	0.00	0.00			0.00
1013940584	0523	052325	11	1	3078F			0.00	0.00	0.00	0.00			0.00
PT RESP	0.00				CLAIM TOTALS			270.00	139.39	0.00	0.00		141.06	128.94
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING CHARGE		0.00	NET	128.94
STATUS CODE 1: Processed as Primary														

NAME VANTUINEN, ELOISE						HIC KPV588341252	ACNT	7833LMD642			ICN 26252187398600710	ASG Y	MOA	
1013940584	0425	042525	11	1	99214 25			74.80	74.80	0.00	0.00	CO-144	5.61	44.19
												PR-3	25.00	
1013940584	0425	042525	11	1	73080			74.80	52.73	0.00	0.00	CO-144	3.95	48.78
												CO-45	22.07	
PT RESP	25.00				CLAIM TOTALS			149.60	127.53	0.00	0.00		56.63	92.97
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING CHARGE		0.00	NET	92.97
STATUS CODE 1: Processed as Primary														

NAME OLNEY, KENNETH						HIC 890844943	ACNT	7583LMD642			ICN 27252235317300710	ASG Y	MOA	
1306898036	0722	072225	11	1	G0439			361.00	0.00	0.00	0.00	OA-23	361.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	99497 33			132.00	0.00	0.00	0.00	OA-23	132.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	99214 25			241.68	120.84	0.00	0.00	OA-23	217.51	4.17
												PR-3	20.00	
1306898036	0722	072225	11	1	G2211			25.00	0.00	0.00	0.00	OA-136	25.00	0.00
1306898036	0722	072225	11	1	G0444 XU			91.00	0.00	0.00	0.00	OA-23	91.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	G0442 XU			43.00	0.00	0.00	0.00	OA-23	43.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	82043 QW			14.70	0.00	0.00	0.00	OA-23	14.70	0.00
					REM: N19									
1306898036	0722	072225	11	1	82570 QW			17.85	0.00	0.00	0.00	OA-23	17.85	0.00
					REM: N19									
1306898036	0722	072225	11	1	36415			20.00	0.00	0.00	0.00	OA-23	20.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	G0446 XU			65.00	0.00	0.00	0.00	OA-23	65.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	G0447 XU			65.00	0.00	0.00	0.00	OA-23	65.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	99401 25			65.00	0.00	0.00	0.00	PR-204	65.00	0.00
1306898036	0722	072225	11	1	G0136 33			65.00	0.00	0.00	0.00	OA-23	65.00	0.00
					REM: N19									
1306898036	0722	072225	11	1	G8510			0.00	0.00	0.00	0.00			0.00
1306898036	0722	072225	11	1	G8476			0.00	0.00	0.00	0.00			0.00
1306898036	0722	072225	11	1	G8417			0.00	0.00	0.00	0.00			0.00
1306898036	0722	072225	11	1	G2211			25.00	0.00	0.00	0.00	CO-97	3.05	0.00
												OA-23	21.95	
1306898036	0722	072225	11	1	G9622			0.00	0.00	0.00	0.00			0.00
1306898036	0722	072225	11	1	G8427			0.00	0.00	0.00	0.00			0.00
1306898036	0722	072225	11	1	1036F			0.00	0.00	0.00	0.00			0.00
PT RESP	85.00				CLAIM TOTALS			1231.23	120.84	0.00	0.00		1227.06	4.17
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING CHARGE		0.00	NET	4.17
STATUS CODE 2: Processed as Secondary														

NAME LOWERY, DONALD W						HIC SWU052W06785	ACNT	7312LMD642			ICN 26251927642100710	ASG Y	MOA	
INSURED NAME: LOWERY, CHRISTEN W														
1306898036	0708	070825	11	1	99213			146.00	0.00	0.00	0.00	PR-204	146.00	0.00
1306898036	0708	070825	11	1	G8420			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	3074F			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	3078F			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	3008F			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	2001F			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	2000F			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	1000F			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	1159F			0.00	0.00	0.00	0.00			0.00
1306898036	0708	070825	11	1	1160F			0.00	0.00	0.00	0.00			0.00
PT RESP	146.00				CLAIM TOTALS			146.00	0.00	0.00	0.00		146.00	0.00
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 1: Processed as Primary														



REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME MUSHONGA, LEVIE					HIC	AQT60310185802	ACNT	6682LMD642		ICN	26252199865900710	ASG Y	MOA	N152
1013940584	0529	052925	11	1	99397	25		341.00	0.00	0.00	0.00	PI-16	341.00	0.00
					REM: N152									
1013940584	0529	052925	11	1	G0136	33		65.00	0.00	0.00	0.00	PI-16	65.00	0.00
					REM: N152									
1013940584	0529	052925	11	1	36415			20.00	0.00	0.00	0.00	PI-16	20.00	0.00
					REM: N152									
1013940584	0529	052925	11	1	G0442	XU		40.00	0.00	0.00	0.00	PI-16	40.00	0.00
					REM: N152									
1013940584	0529	052925	11	1	G0444	XU		29.45	0.00	0.00	0.00	PI-16	29.45	0.00
					REM: N152									
1013940584	0529	052925	11	1	G8510			0.00	0.00	0.00	0.00			0.00
1013940584	0529	052925	11	1	3074F			0.00	0.00	0.00	0.00			0.00
1013940584	0529	052925	11	1	3078F			0.00	0.00	0.00	0.00			0.00
1013940584	0529	052925	11	1	G9622			0.00	0.00	0.00	0.00			0.00
1013940584	0529	052925	11	1	1036F			0.00	0.00	0.00	0.00			0.00
1013940584	0529	052925	11	1	0513F			0.00	0.00	0.00	0.00			0.00
1013940584	0529	052925	11	1	G8417			0.00	0.00	0.00	0.00			0.00
1013940584	0529	052925	11	1	G8427			0.00	0.00	0.00	0.00			0.00
PT RESP		0.00		CLAIM		TOTALS		495.45	0.00	0.00	0.00		495.45	0.00
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE			0.00	NET	0.00
STATUS CODE 1: Processed as Primary														

NAME VANHAITSMA, WILLIAM S															HIC	C6H6150692AB			ACNT	7717LMD642			ICN 27252120508200710			ASG	Y	MOA	
1013940584				0715		071525		11	1	36415			20.00			6.75		6.75		0.00		CO-45		13.25		0.00			
PT RESP				6.75					CLAIM TOTALS			20.00			6.75		6.75		0.00				13.25		0.00				
ADJ TO TOTAL: PREV PD									INTEREST				0.00			LATE FILING CHARGE			0.00			NET		0.00					
STATUS CODE 1: Processed as Primary																													

NAME VANHAITSMA, WILLIAM S				HIC	C6H6150692AB	ACNT	7732LMD642	ICN 27252132316700710				ASG	Y	MOA	
1013940584	0730	073025	11	1	99214	25		219.00	143.12	143.12	0.00	CO-45		75.88	0.00
1013940584	0730	073025	11	1	82043	QW		14.70	4.34	4.34	0.00	CO-45		10.36	0.00
1013940584	0730	073025	11	1	82570	QW		17.85	3.89	3.89	0.00	CO-45		13.96	0.00
1013940584	0730	073025	11	1	3075F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	3078F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	3060F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	3008F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	2001F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	2000F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	1000F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	1159F			0.00	0.00	0.00	0.00				0.00
1013940584	0730	073025	11	1	1160F			0.00	0.00	0.00	0.00				0.00
PT RESP	151.35				CLAIM	TOTALS		251.55	151.35	151.35	0.00			100.20	0.00
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE			0.00	NET		0.00
STATUS CODE 1: Processed as Primary															

NAME SCHIERBEEK, LUANNE				HIC	MSR916515303	ACNT	8045LMD642	ICN 26252278583200710		ASG	Y	MOA	
1013940584	0721	072125	11	1	99213		146.00	98.69	98.69	0.00	CO-45	47.31	0.00
1013940584	0721	072125	11	1	G8510		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	G8476		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	G8420		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	G8427		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	3008F		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	2001F		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	2000F		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	1000F		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	1159F		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	1160F		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	3074F		0.00	0.00	0.00	0.00			0.00
1013940584	0721	072125	11	1	3079F		0.00	0.00	0.00	0.00			0.00
PT RESP	98.69				CLAIM TOTALS		146.00	98.69	98.69	0.00		47.31	0.00
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE		0.00	NET	0.00
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
	18	5593.57	2472.29	317.51	18.02	3517.86	1740.18	0.00	1740.18

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

CO-144 Incentive adjustment, e.g. preferred product / service.

CO-203 Discontinued or reduced service.

CO-234 This procedure is not paid separately. Check Remittance Remark Codes for details.

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

CO-9 The diagnosis is inconsistent with the patient's age.

CO-97 Payment adjusted because the benefit for this service is included in the payment / allowance for another service / procedure that has already been adjudicated



BCBSM			REMITTANCE
NPI #:	1982923660	TIMOTHY J TOBOLIC MD PLLC	ADVICE
EFT #:	510030932	PAGE #: 6 of 6	DATE: 2025-08-20
N152	Missing/incomplete/invalid replacement claim information.		
N172	The patient is not liable for the denied/adjusted charge(s) for receiving any updated service/item.		
N19	Procedure code incidental to primary procedure.		
N20	Service not payable with other service rendered on the same date.		
OA-136	Claim adjusted based on failure to follow prior payer's coverage rules. (Use Group Code OA).		
OA-23	Payment adjusted due to the impact of prior payer(s) adjudication including payments and / or adjustments		
PI-16	Claim / service lacks information which is needed for adjudication. Check Remittance Remark Codes for details.		
PR-1	Deductible Amount		
PR-2	Coinsurance Amount		
PR-204	This service / equipment / drug is not covered under the patient's current benefit plan		
PR-3	Co-payment Amount		

