

PRIORITY HEALTH []  
 1231 E. BELTLINE NE  
 GRAND RAPIDS, MI 49525  
 (000)000-0000

REMITTANCE  
 ADVICE

TIMOTHY J TOBOLIC MD PLLC [900068405]  
 7740 BYRON CENTER AVE SW  
 BYRON CENTER, MI 49315

NPI #: 1982923660  
 PAGE #: 1 of 1  
 DATE: 2025-05-01  
 EFT #: 25110B1000399221  
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME AINSWORTH, CORY			HIC 94702402410	ACNT	5816LMD642			ICN 437658939300		ASG Y MOA	
1013940584	0411	041125	1 99212			87.00	67.39	0.00	0.00	CO-45 PR-3	19.61 25.00 42.39
1013940584	0411	041125	1 3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0411	041125	1 2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0411	041125	1 2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0411	041125	1 1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0411	041125	1 1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0411	041125	1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	25.00		CLAIM TOTALS			87.00	67.39	0.00	0.00		44.61 42.39
ADJ TO TOTAL: PREV PD			INTEREST			0.00		LATE FILING CHARGE		0.00 NET	42.39
STATUS CODE 1: Processed as Primary											

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	87.00	67.39	0.00	0.00	44.61	42.39	0.00	42.39

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES  
 CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.  
 PR-3 Co-payment Amount

