TIMOTHY J. TOBOLIC, MD, PLLC 7740 BYRON CENTER AVE SW STE 202 BYRON CENTER, MI 493156929 NPI #: 1982923660 PAGE #: 1 of 1 DATE: 2025-03-18 NONPAY #: 393452736 TAX ID #: 272620668

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3 146.00 85.63 85.63 0.00 60.37 0.00 GLOSSARY: GROUP, REASON, MOA, REMARK AND REASON CODES

AMT

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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.

AMT

RC-AMT

AMT

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.

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

N517 Resubmit a new claim with the requested information.

N620 Alert: This procedure code is for quality reporting / informational purposes only.

PR-1 Deductible Amount

CLAIMS

AMT



ADJ AMT

0.00

AMT

0.00