

UNITED HEALTHCARE INSURANCE COMPANY []  
 4 RESEARCH DRIVE  
 SHELTON, CT 064846282  
 (877)842-3210

REMITTANCE  
 ADVICE

TIMOTHY J TOBOLIC MD PLLC  
 7740 BYRON CENTER AVE STE 202  
 BYRON CENTER, MI 49315

NPI #: 1982923660  
 PAGE #: 1 of 1  
 DATE: 2025-08-20  
 NONPAY #: 43052454  
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME LIERMAN, GARY			HIC 26079823301		ACNT 8015LMD642	ICN FF68811529			ASG Y	MOA	
1013940584	0812	081225	11	0	99499	0.01	0.00	0.00	0.00	CO-45	0.01 0.00
PT RESP	0.00	CLAIM TOTALS				0.01	0.00	0.00	0.00		0.01 0.00
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE	0.00	NET	0.00
PLAN TYPE: CHOICE EPO											
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	0.01	0.00	0.00	0.00	0.01	0.00	0.00	0.00

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

