

HUMANA INC. []  
P.O. BOX 14601  
LEXINGTON, KY 405124601  
(000)000-0000  
APPS.HUMANA.COM/MARKETING/DOCUMENTS.ASP?FILE=2859948

REMITTANCE  
ADVICE

BYRON CENTER FAMILY MEDICINE [941242]  
7740 BYRON CENTER AVE SW STE 2  
  
BYRON CENTER, MI 49315

NPI #: 1982923660  
PAGE #: 1 of 1  
DATE: 2025-03-02  
EFT #: 153765416250303  
TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME PRENTISS, PHYLLIS					HIC H78824854	ACNT 4985LMD642				ICN 820250570811215	ASG Y	MOA	
1306898036	0224	022425	11	1	71046		68.20	30.57	0.00	0.00	CO-253	0.61	29.96
											CO-45	37.63	
HCPI: RECONSIDERATION													
PT RESP		0.00			CLAIM TOTALS		68.20	30.57	0.00	0.00		38.24	29.96
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		0.00	NET	29.96
PLAN TYPE: MEDICARE ADVANTAGE PPO													
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	68.20			30.57	0.00	0.00	38.24	29.96	0.00	29.96		

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.

