

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 6  
DATE: 2025-08-21  
EFT #: 25229B1000088855  
TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME HUVAERE, JEFFREY			HIC 94723214400	ACNT 8013LMD642		ICN 457020601200	ASG Y	MOA			
1306898036	0813	081325	1 99212 25			87.00	67.39	0.00	0.00	CO-45	37.39
										PR-3	19.61
										CO-45	30.00
1306898036	0813	081325	1 82043 QW			14.70	6.00	0.00	0.00	CO-45	8.70
1306898036	0813	081325	1 82570 QW			17.85	5.65	0.00	0.00	CO-45	12.20
1306898036	0813	081325	1 83036 QW			60.90	10.23	0.00	0.00	CO-45	50.67
1306898036	0813	081325	1 G8476			0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1 G8420			0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1 G8427			0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1 3074F			0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1 3078F			0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1 4004F			0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1 3046F			0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1 3060F			0.00	0.00	0.00	0.00		0.00
PT RESP	30.00		CLAIM TOTALS			180.45	89.27	0.00	0.00		59.27
ADJ TO TOTAL: PREV PD			INTEREST			0.00				121.18	59.27
PLAN TYPE: COREWELL HEALTH EMP GRP							LATE FILING CHARGE		0.00	NET	
STATUS CODE 1: Processed as Primary											

NAME JONES, ADAM			HIC 94936014900	ACNT 7961LMD642		ICN 456956167000	ASG Y	MOA			
1306898036	0811	081125	1 99395 25			297.00	162.24	0.00	0.00	CO-45	162.24
1306898036	0811	081125	1 G0136 33			34.80	27.10	0.00	0.00	CO-45	27.10
1306898036	0811	081125	1 96127 XU			40.00	9.42	0.00	0.00	CO-45	9.42
1306898036	0811	081125	1 96127 XU			40.00	9.42	0.00	0.00	CO-45	9.42
1306898036	0811	081125	1 36415			20.00	15.22	0.00	0.00	CO-45	15.22
1306898036	0811	081125	1 G8510			0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	1 G8476			0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	1 G8417			0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	1 3074F			0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	1 3078F			0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	1 G9621			0.00	0.00	0.00	0.00		0.00
1306898036	0811	081125	1 1036F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			431.80	223.40	0.00	0.00		223.40
ADJ TO TOTAL: PREV PD			INTEREST			0.00				208.40	223.40
PLAN TYPE: COREWELL HEALTH EMP GRP							LATE FILING CHARGE		0.00	NET	
STATUS CODE 1: Processed as Primary											

NAME KUIPER, JOSHUA			HIC 94965949100	ACNT 7355LMD642		ICN 455146017400	ASG Y	MOA			
1306898036	0709	070925	-3 95117			-111.00	0.00	0.00	0.00	CO-16	0.00
			REM: M76								
PT RESP	0.00		CLAIM TOTALS			-111.00	0.00	0.00	0.00		0.00
ADJ TO TOTAL: PREV PD			INTEREST			0.00				-111.00	0.00
PLAN TYPE: COREWELL HEALTH EMP GRP							LATE FILING CHARGE		0.00	NET	
STATUS CODE 22: Reversal of Previous Payment											

NAME KUIPER, JOSHUA			HIC 94965949100	ACNT 7355LMD642		ICN 455497537100	ASG Y	MOA			
1306898036	0709	070925	3 95117			111.00	0.00	0.00	0.00	CO-16	0.00
			REM: M79								
PT RESP	0.00		CLAIM TOTALS			111.00	0.00	0.00	0.00		0.00
ADJ TO TOTAL: PREV PD			INTEREST			0.00				111.00	0.00
PLAN TYPE: COREWELL HEALTH EMP GRP							LATE FILING CHARGE		0.00	NET	
STATUS CODE 1: Processed as Primary											

NAME KUIPER, JOSHUA			HIC 94965949100	ACNT 7355LMD642		ICN 455813839200	ASG Y	MOA			
1306898036	0709	070925	3 95117			111.00	17.65	17.65	0.00	CO-96	0.00
			REM: N640							CO-45	19.35
PT RESP	17.65		CLAIM TOTALS			111.00	17.65	17.65	0.00		0.00
ADJ TO TOTAL: PREV PD			INTEREST			0.00				93.35	0.00
PLAN TYPE: COREWELL HEALTH EMP GRP							LATE FILING CHARGE		0.00	NET	
STATUS CODE 1: Processed as Primary											



## PRIORITY HEALTH

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TIMOTHY J TOBOLIC MD PLLC [900068405]  
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REMITTANCE  
ADVICE  
DATE: 2025-08-21

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME RADLER, ANDREW			HIC	94953467700	ACNT	8016LMD642		ICN	457020601900	ASG Y	MOA
1306898036	0813	081325	1	99213		146.00	108.22	0.00	0.00	CO-45 PR-3	37.78 20.00
1306898036	0813	081325	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1	3008F		0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1	2001F		0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1	2000F		0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1	1000F		0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1	1159F		0.00	0.00	0.00	0.00		0.00
1306898036	0813	081325	1	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP 20.00			CLAIM TOTALS			146.00	108.22	0.00	0.00		57.78
ADJ TO TOTAL: PREV PD			INTEREST			0.00		LATE FILING CHARGE		0.00	88.22
STATUS CODE 1: Processed as Primary										NET	88.22

NAME ROBBINS, MARK			HIC	94945832400	ACNT	7918LMD642		ICN	456956175600	ASG Y	MOA
1306898036	0808	080825	1	99396 25		327.00	172.48	0.00	0.00	CO-45	154.52
1306898036	0808	080825	1	G0442 XU		43.00	0.00	0.00	0.00	CO-16	43.00
			REM: M51								
1306898036	0808	080825	1	G0444 XU		91.00	0.00	0.00	0.00	CO-16	91.00
			REM: M51								
1306898036	0808	080825	1	G0446 XU		65.00	31.26	0.00	0.00	CO-45	33.74
1306898036	0808	080825	1	36415		20.00	15.22	0.00	0.00	CO-45	4.78
1306898036	0808	080825	1	82043 QW		14.70	6.00	6.00	0.00	CO-45	8.70
1306898036	0808	080825	1	82570 QW		17.85	5.65	5.65	0.00	CO-45	12.20
1306898036	0808	080825	1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	G8476		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	G8417		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	G8427		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	3075F		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	3079F		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	G9621		0.00	0.00	0.00	0.00		0.00
1306898036	0808	080825	1	3061F		0.00	0.00	0.00	0.00		0.00
PT RESP 11.65			CLAIM TOTALS			578.55	230.61	11.65	0.00		347.94
ADJ TO TOTAL: PREV PD			INTEREST			0.00		LATE FILING CHARGE		0.00	218.96
STATUS CODE 1: Processed as Primary										NET	218.96

NAME BURGESS, TAYLOR			HIC	94842893900	ACNT	8066LMD642		ICN	457128185500	ASG Y	MOA
1013940584	0814	081425	1	99395 25		297.00	162.24	0.00	0.00	CO-45	134.76
1013940584	0814	081425	1	36415		20.00	15.22	0.00	0.00	CO-45	4.78
1013940584	0814	081425	1	G0136 33		65.00	27.10	0.00	0.00	CO-45	37.90
1013940584	0814	081425	1	99408		61.00	48.52	0.00	0.00	CO-45	12.48
1013940584	0814	081425	2	96127 XU		80.00	18.85	0.00	0.00	CO-45	61.15
1013940584	0814	081425	1	G8420		0.00	0.00	0.00	0.00		0.00
1013940584	0814	081425	1	3074F		0.00	0.00	0.00	0.00		0.00
1013940584	0814	081425	1	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0814	081425	1	G9621		0.00	0.00	0.00	0.00		0.00
1013940584	0814	081425	1	1036F		0.00	0.00	0.00	0.00		0.00
1013940584	0814	081425	1	G8510		0.00	0.00	0.00	0.00		0.00
PT RESP 0.00			CLAIM TOTALS			523.00	271.93	0.00	0.00		251.07
ADJ TO TOTAL: PREV PD			INTEREST			0.00		LATE FILING CHARGE		0.00	271.93
STATUS CODE 1: Processed as Primary										NET	271.93

NAME CHAFFIN, WILLIAM			HIC	94953220401	ACNT	8040LMD642		ICN	457077493900	ASG Y	MOA
1013940584	0814	081425	1	36415		20.00	15.22	0.00	0.00	CO-45	4.78
1013940584	0814	081425	1	85610		21.00	4.59	0.00	0.00	CO-45	16.41
PT RESP 0.00			CLAIM TOTALS			41.00	19.81	0.00	0.00		21.19
ADJ TO TOTAL: PREV PD			INTEREST			0.00		LATE FILING CHARGE		0.00	19.81
PLAN TYPE: COREWELL HLTH WMI NTWK										NET	19.81
STATUS CODE 1: Processed as Primary											



## PRIORITY HEALTH

NPI #: 1982923660  
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ADVICE  
DATE: 2025-08-21

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME DEWEERD, RONALD			HIC	94912016400	ACNT	8006LMD642	ICN 457020595400		ASG Y	MOA		
1013940584	0812	081225	1	99214	25		219.00	0.00	0.00	0.00	CO-11	219.00 0.00
REM: M76												
1013940584	0812	081225	1	G0447	XU		65.00	31.26	0.00	0.00	CO-45	33.74 31.26
1013940584	0812	081225	1	99401	25		65.00	54.70	0.00	0.00	CO-45	10.30 54.70
1013940584	0812	081225	1	36415			20.00	15.22	0.00	0.00	CO-45	4.78 15.22
1013940584	0812	081225	1	G8476			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00				CLAIM TOTALS		369.00	101.18	0.00	0.00		267.82 101.18
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 101.18
PLAN TYPE: WEST MI PARTNERS												
STATUS CODE 1: Processed as Primary												

NAME EDWARDS, ROBERT			HIC	94958771700	ACNT	7900LMD642	ICN 457020591500		ASG Y	MOA		
1013940584	0807	080725	1	99396	25		327.00	172.48	0.00	0.00	CO-45	154.52 172.48
1013940584	0807	080725	1	G0136	33		65.00	27.10	0.00	0.00	CO-45	37.90 27.10
1013940584	0807	080725	2	96127	XU		80.00	18.85	0.00	0.00	CO-45	61.15 18.85
1013940584	0807	080725	1	83036	QW		60.90	10.23	0.00	2.05	CO-45	50.67 8.18
1013940584	0807	080725	1	82043	QW		14.70	6.00	6.00	0.00	CO-45	8.70 0.00
1013940584	0807	080725	1	82570	QW		17.85	5.65	5.65	0.00	CO-45	12.20 0.00
1013940584	0807	080725	1	G9622			0.00	0.00	0.00	0.00		0.00
1013940584	0807	080725	1	G8510			0.00	0.00	0.00	0.00		0.00
1013940584	0807	080725	1	1036F			0.00	0.00	0.00	0.00		0.00
1013940584	0807	080725	1	0513F			0.00	0.00	0.00	0.00		0.00
1013940584	0807	080725	1	3061F			0.00	0.00	0.00	0.00		0.00
1013940584	0807	080725	1	3044F			0.00	0.00	0.00	0.00		0.00
PT RESP	13.70				CLAIM TOTALS		565.45	240.31	11.65	2.05		325.14 226.61
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 226.61
PLAN TYPE: COREWELL HLTH WMI NTWK												
STATUS CODE 1: Processed as Primary												

NAME JAGER, EVAN			HIC	94935034500	ACNT	8087LMD642	ICN 457128191700		ASG Y	MOA		
1013940584	0815	081525	1	99395	25		297.00	162.24	0.00	0.00	CO-45	134.76 162.24
1013940584	0815	081525	1	36415			20.00	15.22	0.00	0.00	CO-45	4.78 15.22
1013940584	0815	081525	1	99401	25		65.00	0.00	0.00	0.00	CO-97	65.00 0.00
REM: N119												
1013940584	0815	081525	1	G0447	XU		65.00	31.26	0.00	0.00	CO-45	33.74 31.26
1013940584	0815	081525	1	G0136	33		65.00	27.10	0.00	0.00	CO-45	37.90 27.10
1013940584	0815	081525	2	96127	XU		80.00	18.85	0.00	0.00	CO-45	61.15 18.85
1013940584	0815	081525	1	G9622			0.00	0.00	0.00	0.00		0.00
1013940584	0815	081525	1	G8510			0.00	0.00	0.00	0.00		0.00
1013940584	0815	081525	1	1036F			0.00	0.00	0.00	0.00		0.00
1013940584	0815	081525	1	3075F			0.00	0.00	0.00	0.00		0.00
1013940584	0815	081525	1	3079F			0.00	0.00	0.00	0.00		0.00
1013940584	0815	081525	1	3078F			0.00	0.00	0.00	0.00		0.00
1013940584	0815	081525	1	G8427			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00				CLAIM TOTALS		592.00	254.67	0.00	0.00		337.33 254.67
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 254.67
STATUS CODE 1: Processed as Primary												

NAME JONES, MICHAEL			HIC	94981895200	ACNT	5428LMD642	ICN 456850514200		ASG Y	MOA		
1013940584	0324	032425	1	99214	25		241.68	151.33	0.00	0.00	CO-45	90.35 121.33
PR-3 30.00												
1013940584	0324	032425	1	90471			41.00	28.11	0.00	0.00	CO-45	12.89 28.11
1013940584	0324	032425	1	90715			87.00	53.60	0.00	0.00	CO-45	33.40 53.60
1013940584	0324	032425	1	12011			289.30	160.39	160.39	0.00	CO-45	128.91 0.00
1013940584	0324	032425	1	3079F			0.00	0.00	0.00	0.00		0.00
1013940584	0324	032425	1	3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0324	032425	1	3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0324	032425	1	2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0324	032425	1	2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0324	032425	1	1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0324	032425	1	1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0324	032425	1	1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	190.39				CLAIM TOTALS		658.98	393.43	160.39	0.00		295.55 203.04
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 203.04
PLAN TYPE: MY PRIORITY HMO												
STATUS CODE 1: Processed as Primary												



## PRIORITY HEALTH

NPI #: 1982923660  
EFT #: 25229B1000088855TIMOTHY J TOBOLIC MD PLLC [900068405]  
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ADVICE  
DATE: 2025-08-21

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME KITLER, BRADLEY			HIC 94961558800	ACNT 7916LMD642		ICN 456956168100	ASG Y	MOA			
1013940584	0609	060925	1 99213			171.26	108.22	0.00	0.00	CO-45 PR-3	63.04 70.00 38.22
1013940584	0609	060925	1 G8427			0.00	0.00	0.00	0.00		0.00
1013940584	0609	060925	1 3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0609	060925	1 3078F			0.00	0.00	0.00	0.00		0.00
PT RESP	70.00		CLAIM TOTALS			171.26	108.22	0.00	0.00		133.04 38.22
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING	CHARGE		0.00	NET 38.22
PLAN TYPE: COREWELL HLTH WMI NTWK											
STATUS CODE 1: Processed as Primary											

NAME RUSSO, MAYLEE			HIC 94858860002	ACNT 7945LMD642		ICN 456956174300	ASG Y	MOA			
1013940584	0808	080825	1 99392 25			256.00	166.09	0.00	0.00	CO-45 PR-3	89.91 20.00 146.09
1013940584	0808	080825	1 G0136 33			65.00	27.10	0.00	0.00	CO-45	37.90 27.10
1013940584	0808	080825	1 G8476			0.00	0.00	0.00	0.00		0.00
1013940584	0808	080825	1 G8427			0.00	0.00	0.00	0.00		0.00
1013940584	0808	080825	1 90716			220.00	208.48	0.00	0.00	CO-45	11.52 208.48
1013940584	0808	080825	1 90707			120.00	108.10	0.00	0.00	CO-45	11.90 108.10
1013940584	0808	080825	1 90696			105.00	71.05	0.00	0.00	CO-45	33.95 71.05
1013940584	0808	080825	3 90460			123.00	85.07	0.00	0.00	CO-45	37.93 85.07
1013940584	0808	080825	5 90461			100.00	62.28	0.00	0.00	CO-45	37.72 62.28
PT RESP	20.00		CLAIM TOTALS			989.00	728.17	0.00	0.00		280.83 708.17
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING	CHARGE		0.00	NET 708.17
STATUS CODE 1: Processed as Primary											

NAME RUSSO, MEILANI			HIC 94858860001	ACNT 7944LMD642		ICN 456956173900	ASG Y	MOA			
1013940584	0808	080825	1 99393 25			270.00	145.05	0.00	0.00	CO-45 PR-3	124.95 20.00 125.05
1013940584	0808	080825	1 G0136 33			34.80	27.10	0.00	0.00	CO-45	7.70 27.10
1013940584	0808	080825	1 G8476			0.00	0.00	0.00	0.00		0.00
1013940584	0808	080825	1 G8420			0.00	0.00	0.00	0.00		0.00
1013940584	0808	080825	1 G8427			0.00	0.00	0.00	0.00		0.00
PT RESP	20.00		CLAIM TOTALS			304.80	172.15	0.00	0.00		152.65 152.15
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING	CHARGE		0.00	NET 152.15
STATUS CODE 1: Processed as Primary											

NAME SCHAENDORF, JERRY			HIC 94756504200	ACNT 7719LMD642		ICN 456255142300	ASG Y	MOA			
1013940584	0307	030725	1 99499			0.01	0.01	0.00	0.00		0.01
PT RESP	0.00		CLAIM TOTALS			0.01	0.01	0.00	0.00		0.01
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING	CHARGE		0.00	NET 0.01
STATUS CODE 1: Processed as Primary											

NAME SHRONTZ, DAMIEN			HIC 94890595801	ACNT 7954LMD642		ICN 456956161800	ASG Y	MOA			
1013940584	0530	053025	1 99213			171.26	108.22	0.00	0.00	CO-45 PR-3	63.04 20.00 88.22
1013940584	0530	053025	1 G8476			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 3078F			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0530	053025	1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	20.00		CLAIM TOTALS			171.26	108.22	0.00	0.00		83.04 88.22
ADJ TO TOTAL: PREV PD			INTEREST			0.00	LATE FILING	CHARGE		0.00	NET 88.22
PLAN TYPE: WEST MI PARTNERS											
STATUS CODE 1: Processed as Primary											



## PRIORITY HEALTH

NPI #: 1982923660  
EFT #: 25229B1000088855TIMOTHY J TOBOLIC MD PLLC [900068405]  
PAGE #: 5 of 6REMITTANCE  
ADVICE  
DATE: 2025-08-21

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME SHRONTZ, NATHAN			HIC	94890595800	ACNT	8037LMD642	ICN 457077490300		ASG Y	MOA		
1013940584	0813	081325	1	99214	25		219.00	152.63	0.00	0.00	CO-45	132.63
PR-3 20.00												
1013940584	0813	081325	1	71046			68.20	54.95	0.00	0.00	CO-45	54.95
1013940584	0813	081325	1	G0447	XU		65.00	31.26	0.00	0.00	CO-45	31.26
1013940584	0813	081325	1	99401	25		65.00	54.70	0.00	0.00	CO-45	54.70
1013940584	0813	081325	1	3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0813	081325	1	2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0813	081325	1	2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0813	081325	1	1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0813	081325	1	1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0813	081325	1	1160F			0.00	0.00	0.00	0.00		0.00
1013940584	0813	081325	1	3075F			0.00	0.00	0.00	0.00		0.00
1013940584	0813	081325	1	3079F			0.00	0.00	0.00	0.00		0.00
PT RESP	20.00				CLAIM TOTALS		417.20	293.54	0.00	0.00		273.54
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING	CHARGE	0.00	273.54
PLAN TYPE: WEST MI PARTNERS												
STATUS CODE 1: Processed as Primary												

NAME SIX, TROY			HIC	94886557500	ACNT	7953LMD642	ICN 456956161300		ASG Y	MOA		
1013940584	0528	052825	1	99214	25		219.00	152.63	0.00	0.00	CO-45	107.63
PR-3 45.00												
1013940584	0528	052825	6	J3301			72.00	0.00	0.00	0.00	CO-16	0.00
REM: M76												
1013940584	0528	052825	1	96372			45.00	20.61	0.00	0.00	CO-45	20.61
1013940584	0528	052825	1	3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	3078F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	1036F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0528	052825	1	1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	45.00				CLAIM TOTALS		336.00	173.24	0.00	0.00		128.24
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING	CHARGE	0.00	128.24
PLAN TYPE: WEST MI PARTNERS												
STATUS CODE 1: Processed as Primary												

NAME SIX, TROY			HIC	94886557500	ACNT	7976LMD642	ICN 456956169900		ASG Y	MOA		
1013940584	0811	081125	1	99214	25		219.00	152.63	0.00	0.00	CO-45	107.63
PR-3 45.00												
1013940584	0811	081125	1	96372			45.00	20.61	0.00	0.00	CO-45	20.61
1013940584	0811	081125	6	J3301			72.00	5.34	0.00	0.00	CO-45	5.34
1013940584	0811	081125	1	G8476			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	G8420			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	G8427			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	3077F			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	3078F			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0811	081125	1	1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	45.00				CLAIM TOTALS		336.00	178.58	0.00	0.00		133.58
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING	CHARGE	0.00	133.58
PLAN TYPE: WEST MI PARTNERS												
STATUS CODE 1: Processed as Primary												

NAME VANBUREN, JON			HIC	95008794601	ACNT	7978LMD642	ICN 456956170900		ASG Y	MOA		
INSURED NAME: VAN BUREN, JOHN												
1013940584	0812	081225	1	99396	25		327.00	172.48	0.00	0.00	CO-45	172.48
1013940584	0812	081225	1	G0136	33		65.00	27.10	0.00	0.00	CO-45	27.10
1013940584	0812	081225	2	96127	XU		80.00	18.85	0.00	0.00	CO-45	18.85
1013940584	0812	081225	1	36415			20.00	15.22	0.00	0.00	CO-45	15.22
1013940584	0812	081225	1	G9622			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	G8510			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	1036F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	0513F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	3075F			0.00	0.00	0.00	0.00		0.00
1013940584	0812	081225	1	3078F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00				CLAIM TOTALS		492.00	233.65	0.00	0.00		233.65
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING	CHARGE	0.00	233.65
PLAN TYPE: COREWELL HLTH WMI NTWK												
STATUS CODE 1: Processed as Primary												



## PRIORITY HEALTH

NPI #: 1982923660  
EFT #: 25229B1000088855TIMOTHY J TOBOLIC MD PLLC [900068405]  
PAGE #: 6 of 6REMITTANCE  
ADVICE  
DATE: 2025-08-21

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	22	7414.76	3946.26	201.34	2.05	3788.50	3422.87	0.00	3422.87

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

CO-11 The diagnosis is inconsistent with the procedure.

CO-16 Claim / service lacks information which is needed for adjudication. Check Remittance Remark Codes for details.

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

CO-96 Non-covered charge(s).

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

M51 Missing/incomplete/invalid procedure code(s).

M76 Missing/incomplete/invalid diagnosis or condition.

M79 Missing/incomplete/invalid charge.

N119 This service is not paid if billed once every 28 days, and the patient has spent 5 or more consecutive days in any inpatient or Skilled /nursing Facility (SNF) within those 28 days.

N640 Exceeds number/frequency approved/allowed within time period.

PR-1 Deductible Amount

PR-2 Coinsurance Amount

PR-3 Co-payment Amount

