

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: 2025-06-05
 EFT #: 25145B1000338580
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME ABLES, SARAH			HIC 94851798401		ACNT 6538LMD642	ICN 445995043900			ASG Y	MOA	
1306898036	0520	052025	1	99214		219.00	152.63	0.00	0.00	CO-45	152.63
1306898036	0520	052025	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1	3008F		0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1	2001F		0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1	2000F		0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1	1000F		0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1	1159F		0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			219.00	152.63	0.00	0.00	66.37	152.63
ADJ TO TOTAL: PREV PD						0.00	LATE FILING CHARGE		0.00	NET	152.63
STATUS CODE 1: Processed as Primary											

TOTALS:	# OF	BILLED	ALLOWED	DEDUCT	COINS	TOTAL	PROV PD	PROV	CHECK
	CLAIMS	AMT	AMT	AMT	AMT	RC-AMT	AMT	ADJ AMT	AMT
	1	219.00	152.63	0.00	0.00	66.37	152.63	0.00	152.63

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

