

WPS GHA - MAC J8 MI PART B []
P.O. BOX 8939
MADISON, WI 53708
(866)234-7331

REMITTANCE
ADVICE

TIMOTHY J. TOBOLIC, MD, PLLC
7740 BYRON CENTER AVE SW
STE 202
BYRON CENTER, MI 493156929

NPI #: 1982923660
PAGE #: 1 of 1
DATE: 2025-05-09
NONPAY #: 393569020
TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME	KAMINSKI, JOSHUA P		HIC	8Q76MH3YU71	ACNT	6142LMD642				ICN	1825126624732	ASG Y MOA MA15
1013940584	0501	050125	11	1	3074F		0.00	0.00	0.00	0.00		0.00
						REM: N517 MA130						
1013940584	0501	050125	11	1	3079F		0.00	0.00	0.00	0.00		0.00
						REM: N517 MA130						
1013940584	0501	050125	11	1	1220F		0.00	0.00	0.00	0.00		0.00
						REM: N517 MA130						
PT RESP		0.00			CLAIM	TOTALS	0.00	0.00	0.00	0.00		0.00
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		0.00	NET 0.00
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	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES
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.
N517 Resubmit a new claim with the requested information.

