

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 3
DATE: 2025-03-27
EFT #: 25083B1000020761
TAX ID #: 272620668

REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME HALL, EARL			HIC 94774738300	ACNT	3325LMD642			ICN 434532197100	ASG Y MOA	
1306898036	1127 112724	-1	G0439		-361.00	0.00	0.00	0.00	CO-16	-361.00 0.00
				REM: M76						
1306898036	1127 112724	-1	99497 33		-132.00	0.00	0.00	0.00	CO-16	-132.00 0.00
				REM: M76						
1306898036	1127 112724	-1	99213 25		-175.02	-87.51	0.00	0.00	CO-45	-87.51 -85.76
									CO-253	-1.75
1306898036	1127 112724	-1	G2211		-25.00	0.00	0.00	0.00	CO-16	-25.00 0.00
				REM: M76						
1306898036	1127 112724	-1	81001		-43.05	0.00	0.00	0.00	OA-18	-43.05 0.00
1306898036	1127 112724	-1	G0442 XU		-43.00	-17.91	0.00	0.00	CO-45	-25.09 -17.55
									CO-253	-0.36
1306898036	1127 112724	-1	G0444 XU		-91.00	0.00	0.00	0.00	CO-16	-91.00 0.00
				REM: M76						
1306898036	1127 112724	-1	93000 26		-71.00	0.00	0.00	0.00	CO-4	-71.00 0.00
1306898036	1127 112724	-1	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	-1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	-1	3075F		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	-1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	-1	0513F		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	-1	3074F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS	-941.07	-105.42	0.00	0.00		-837.76 -103.31
ADJ TO TOTAL: PREV PD				INTEREST	0.00				0.00	NET -103.31
STATUS CODE 22: Reversal of Previous Payment										

NAME HALL, EARL			HIC 94774738300	ACNT	3325LMD642			ICN 435437873700	ASG Y MOA	
1306898036	1127 112724	1	G0439		361.00	125.39	0.00	0.00	CO-45	235.61 122.88
									CO-253	2.51
1306898036	1127 112724	1	99213 25		175.02	87.51	0.00	0.00	CO-45	87.51 85.76
									CO-253	1.75
1306898036	1127 112724	1	99497 33		132.00	79.92	0.00	0.00	CO-45	52.08 78.32
									CO-253	1.60
1306898036	1127 112724	1	G2211		25.00	16.01	0.00	0.00	CO-45	8.99 15.69
									CO-253	0.32
1306898036	1127 112724	1	81001		43.05	0.00	0.00	0.00	OA-18	43.05 0.00
1306898036	1127 112724	1	G0444 XU		91.00	17.91	0.00	0.00	CO-45	73.09 17.55
									CO-253	0.36
1306898036	1127 112724	1	G0442 XU		43.00	17.91	0.00	0.00	CO-45	25.09 17.55
									CO-253	0.36
1306898036	1127 112724	1	93000 26		71.00	0.00	0.00	0.00	CO-4	71.00 0.00
1306898036	1127 112724	1	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	1	3075F		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	1	0513F		0.00	0.00	0.00	0.00		0.00
1306898036	1127 112724	1	3074F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS	941.07	344.65	0.00	0.00		603.32 337.75
ADJ TO TOTAL: PREV PD				INTEREST	0.00				0.00	NET 337.75
STATUS CODE 1: Processed as Primary										



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DATE: 2025-03-27

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME HENDRICK, ESTHER			HIC	94821863900	ACNT	4740LMD642			ICN	434850144300	ASG Y	MOA
1306898036	0211	021125	-1	G0439			-361.00	0.00	0.00	0.00	CO-16	-361.00 0.00
REM: N769												
1306898036	0211	021125	-1	99397	52		-341.00	-61.95	0.00	0.00	CO-45	-279.05 -61.95
1306898036	0211	021125	-1	99497	33		-132.00	0.00	0.00	0.00	CO-97	-132.00 0.00
REM: N19												
1306898036	0211	021125	-1	G2211			-25.00	0.00	0.00	0.00	CO-97	-25.00 0.00
REM: N122												
1306898036	0211	021125	-1	G0442	XU		-43.00	-16.22	0.00	0.00	CO-45	-26.78 -15.90
CO-253 -0.32												
1306898036	0211	021125	-1	G0444	33		-91.00	-16.22	0.00	0.00	CO-45	-74.78 -15.90
CO-253 -0.32												
1306898036	0211	021125	-1	36415			-20.00	-9.09	0.00	0.00	CO-45	-10.91 -8.91
CO-253 -0.18												
1306898036	0211	021125	-1	3074F			0.00	0.00	0.00	0.00		0.00
1306898036	0211	021125	-1	3079F			0.00	0.00	0.00	0.00		0.00
1306898036	0211	021125	-1	G9622			0.00	0.00	0.00	0.00		0.00
1306898036	0211	021125	-1	G8427			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00				CLAIM TOTALS		-1013.00	-103.48	0.00	0.00		-910.34 -102.66
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET -102.66
STATUS CODE 22: Reversal of Previous Payment												

NAME HENDRICK, ESTHER			HIC	94821863900	ACNT	4740LMD642			ICN	435291593800	ASG Y	MOA
1306898036	0211	021125	1	G0439			361.00	121.85	0.00	0.00	CO-45	239.15 119.41
CO-253 2.44												
1306898036	0211	021125	1	99397	52		341.00	61.95	0.00	0.00	CO-45	279.05 61.95
1306898036	0211	021125	1	99497	33		132.00	0.00	0.00	0.00	CO-97	132.00 0.00
REM: N19												
1306898036	0211	021125	1	G2211			25.00	0.00	0.00	0.00	CO-97	25.00 0.00
REM: N122												
1306898036	0211	021125	1	G0442	XU		43.00	16.22	0.00	0.00	CO-45	26.78 15.90
CO-253 0.32												
1306898036	0211	021125	1	G0444	33		91.00	16.22	0.00	0.00	CO-45	74.78 15.90
CO-253 0.32												
1306898036	0211	021125	1	36415			20.00	9.09	0.00	0.00	CO-45	10.91 8.91
CO-253 0.18												
1306898036	0211	021125	1	3074F			0.00	0.00	0.00	0.00		0.00
1306898036	0211	021125	1	3079F			0.00	0.00	0.00	0.00		0.00
1306898036	0211	021125	1	G9622			0.00	0.00	0.00	0.00		0.00
1306898036	0211	021125	1	G8427			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00				CLAIM TOTALS		1013.00	225.33	0.00	0.00		790.93 222.07
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 222.07
STATUS CODE 1: Processed as Primary												

NAME ZOMERLEI, CARL			HIC	94789421300	ACNT	5394LMD642			ICN	436572816600	ASG Y	MOA
1306898036	0319	031925	1	99214	25		219.00	120.84	0.00	0.00	CO-45	98.16 118.42
CO-253 2.42												
1306898036	0319	031925	1	96127	XU		40.00	4.21	0.00	0.00	CO-45	35.79 4.13
CO-253 0.08												
1306898036	0319	031925	1	G0446			61.88	0.00	0.00	0.00	CO-97	61.88 0.00
REM: N19												
1306898036	0319	031925	1	G2211			25.00	15.26	0.00	0.00	CO-45	9.74 14.95
CO-253 0.31												
1306898036	0319	031925	1	3075F			0.00	0.00	0.00	0.00		0.00
1306898036	0319	031925	1	3078F			0.00	0.00	0.00	0.00		0.00
1306898036	0319	031925	1	G8510			0.00	0.00	0.00	0.00		0.00
1306898036	0319	031925	1	3075F			0.00	0.00	0.00	0.00		0.00
1306898036	0319	031925	1	3078F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00				CLAIM TOTALS		345.88	140.31	0.00	0.00		208.38 137.50
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 137.50
STATUS CODE 1: Processed as Primary												

NAME KUIPER, KENNETH			HIC	80021254100	ACNT	4687LMD642			ICN	434715860600	ASG Y	MOA
1013940584	1204	120424	-1	36415			-15.00	0.00	0.00	0.00	CO-16	-15.00 0.00
REM: M76												
PT RESP	0.00				CLAIM TOTALS		-15.00	0.00	0.00	0.00		-15.00 0.00
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 0.00
STATUS CODE 22: Reversal of Previous Payment												

NAME KUIPER, KENNETH			HIC	80021254100	ACNT	4687LMD642			ICN	435291592900	ASG Y	MOA
1013940584	1204	120424	1	36415			20.00	8.83	0.00	0.00	CO-45	11.17 8.65
CO-253 0.18												
PT RESP	0.00				CLAIM TOTALS		20.00	8.83	0.00	0.00		11.35 8.65
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 8.65
STATUS CODE 1: Processed as Primary												



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REMITTANCE
ADVICE
DATE: 2025-03-27

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME MARKOSKI, JAMES			HIC 94770993300	ACNT 4875LMD642				ICN 435210136600	ASG Y	MOA	
1013940584	1112	111224	-1	81001 QW		-43.05	0.00	0.00	0.00	CO-4	0.00
PT RESP				CLAIM TOTALS		-43.05	0.00	0.00	0.00		0.00
ADJ TO TOTAL: PREV PD				INTEREST		0.00		LATE FILING CHARGE		0.00	0.00
STATUS CODE 22: Reversal of Previous Payment											

NAME MARKOSKI, JAMES			HIC 94770993300	ACNT 4875LMD642				ICN 435437885500	ASG Y	MOA	
1013940584	1112	111224	1	81001		43.05	3.17	0.00	0.00	CO-45	0.00
PT RESP				CLAIM TOTALS		43.05	3.17	0.00	0.00	PR-3	0.00
ADJ TO TOTAL: PREV PD				INTEREST		0.00		LATE FILING CHARGE		0.00	0.00
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
	9	350.88	513.39	0.00	0.00	-149.12	500.00	0.00	500.00

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

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

CO-253 Sequestration - reduction in federal spending

CO-4 The procedure code is inconsistent with the modifier used or a required modifier is missing.

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

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

M76 Missing / incomplete / invalid diagnosis or condition.

N122 Add-on code cannot be billed by itself.

N19 Procedure code incidental to primary procedure.

N769 A lateral diagnosis is required.

OA-18 Duplicate claim / service.

PR-3 Co-payment Amount

