TIMOTHY TOBOLIC MD PLLC 7740 BYRON CENTER AVE SUITE 202

BYRON CENTER, MI 49315

(000)000-0000

NPI #: 1982923660
PAGE #: 1 of 1
DATE: 2025-04-28
EFT #: 659894119
TAX ID #: 272620668

| REND PROV | SERV | DATE | POS | NOS | PROC | MODS | | BILLED | ALLOWED | DEDUCT | COINS | GRP/RC-AMT | | PROV PD |
|---------------------|--------|--------|-----|-------------|---------|--------|-----------------|--------|-----------------|--------|-----------|------------|--------|---------|
| NAME ENDRES, NATHAN | | | | HIC 0265310 | | ACNT | ACNT 5325LMD642 | | ICN 25267788-01 | | ASG Y MOA | | | |
| 1306898036 | 0317 | 031725 | 11 | | 99395 | 25 | | 297.00 | 153.20 | 0.00 | 0.00 | CO-45 | 143.80 | 153.20 |
| 1306898036 | 0317 | 031725 | 11 | | G0136 | 33 | | 34.80 | 25.59 | 0.00 | 0.00 | CO-45 | 9.21 | 25.59 |
| 1306898036 | 0317 | 031725 | 11 | | 36415 | | | 20.00 | 15.09 | 15.09 | 0.00 | CO-45 | 4.91 | 0.00 |
| 1306898036 | 0317 | 031725 | 11 | | 96127 | Œ | | 40.00 | 9.34 | 0.00 | 0.00 | CO-45 | 30.66 | 9.34 |
| 1306898036 | 0317 | 031725 | 11 | | 96160 2 | Œ | | 5.30 | 5.30 | 5.30 | 0.00 | | | 0.00 |
| 1306898036 | 0317 | 031725 | 11 | | 3074F | | | 0.00 | 0.00 | 0.00 | 0.00 | | | 0.00 |
| 1306898036 | 0317 | 031725 | 11 | | 3078F | | | 0.00 | 0.00 | 0.00 | 0.00 | | | 0.00 |
| 1306898036 | 0317 | 031725 | 11 | | G8510 | | | 0.00 | 0.00 | 0.00 | 0.00 | | | 0.00 |
| 1306898036 | 0317 | 031725 | 11 | | G9622 | | | 0.00 | 0.00 | 0.00 | 0.00 | | | 0.00 |
| PT RESP | 20. | 39 | | | CLAIM : | COTALS | | 397.10 | 208.52 | 20.39 | 0.00 | | 188.58 | 188.13 |
| ADJ TO TOTA | AL: PI | REV PD | | | | INTER | EST | 0.00 | LATE | FILING | CHARGE | 0.00 | NET | 188.13 |

STATUS CODE 1: Processed as Primary

PROVIDER ADJ DETAILS: PLB REASON CODE FCN/OTHER IDENTIFIER HIC AMOUNT
Adjustment (CS) ZELIS TRANSACTION 4.65

Adjustment (CS) ZELIS TRANSACTION FEE

TOTALS: BILLED ALLOWED DEDUCT PROV PD CHECK # OF COINS TOTAL PROV CLAIMS AMT AMT AMT AMT RC-AMT AMT ADJ AMT AMT 208.52 20.39 183.48 397.10 0.00 188.58 183.48 1 4.65

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

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

PR-1 Deductible Amount