

BCBSM []
600 E LAFAYETTE
DETROIT, MI 482262998
(800)282-4548

REMITTANCE
ADVICE

TIMOTHY J TOBOLIC MD PLLC

BYRON CENTER, MI 493156928

NPI #: 1982923660
PAGE #: 1 of 3
DATE: 2025-03-12
EFT #: 741822211
TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME NOORMAN, VICKI L HIC DNW893893830 ACNT 5075LMD642 ICN 26250640406800710 ASG Y MOA													
INSURED NAME: NOORMAN, RANDALL J													
1306898036	0303	030325	10	1	98966		25.18	18.10	0.00	0.00	CO-144	1.36	16.74
												CO-45	7.08
PT RESP 0.00 CLAIM TOTALS												8.44	16.74
ADJ TO TOTAL: PREV PD INTEREST							0.00	18.10	0.00	0.00		NET	16.74
STATUS CODE 1: Processed as Primary													
NAME FULLER, ALEAH N HIC RMH893342977 ACNT 5028LMD642 ICN 27250620247200710 ASG Y MOA													
INSURED NAME: FULLER, KENNETH L													
1013940584	0227	022725	11	1	99214		219.00	143.12	0.00	0.00	CO-144	10.74	102.38
												CO-45	75.88
												PR-3	30.00
1013940584	0227	022725	11	1	3008F		0.00	0.00	0.00	0.00			0.00
1013940584	0227	022725	11	1	2001F		0.00	0.00	0.00	0.00			0.00
1013940584	0227	022725	11	1	2000F		0.00	0.00	0.00	0.00			0.00
1013940584	0227	022725	11	1	1000F		0.00	0.00	0.00	0.00			0.00
1013940584	0227	022725	11	1	1159F		0.00	0.00	0.00	0.00			0.00
1013940584	0227	022725	11	1	1160F		0.00	0.00	0.00	0.00			0.00
PT RESP 30.00 CLAIM TOTALS							219.00	143.12	0.00	0.00		116.62	102.38
ADJ TO TOTAL: PREV PD INTEREST							0.00	143.12	0.00	0.00		NET	102.38
STATUS CODE 1: Processed as Primary													
NAME FULLER, KENNETH L HIC RMH893342977 ACNT 5020LMD642 ICN 26250592490300710 ASG Y MOA													
1013940584	0115	011525	11	1	36415		15.00	5.00	0.00	0.00	CO-144	0.38	4.62
												CO-45	10.00
PT RESP 0.00 CLAIM TOTALS												10.38	4.62
ADJ TO TOTAL: PREV PD INTEREST							0.00	5.00	0.00	0.00		NET	4.62
STATUS CODE 1: Processed as Primary													
NAME FULLER, KENNETH L HIC RMH893342977 ACNT 5021LMD642 ICN 26250592496200710 ASG Y MOA													
1013940584	0226	022625	11	1	99214 25		219.00	143.12	0.00	0.00	CO-144	10.74	102.38
												CO-45	75.88
												PR-3	30.00
1013940584	0226	022625	11	1	20610		155.00	0.00	0.00	0.00	CO-4	155.00	0.00
1013940584	0226	022625	11	1	J1010 LT		1.50	0.06	0.00	0.00	CO-45	1.44	0.06
1013940584	0226	022625	11	1	3077F		0.00	0.00	0.00	0.00			0.00
1013940584	0226	022625	11	1	3080F		0.00	0.00	0.00	0.00			0.00
1013940584	0226	022625	11	1	3008F		0.00	0.00	0.00	0.00			0.00
1013940584	0226	022625	11	1	2001F		0.00	0.00	0.00	0.00			0.00
1013940584	0226	022625	11	1	2000F		0.00	0.00	0.00	0.00			0.00
1013940584	0226	022625	11	1	1000F		0.00	0.00	0.00	0.00			0.00
1013940584	0226	022625	11	1	1159F		0.00	0.00	0.00	0.00			0.00
1013940584	0226	022625	11	1	1160F		0.00	0.00	0.00	0.00			0.00
PT RESP 30.00 CLAIM TOTALS							375.50	143.18	0.00	0.00		273.06	102.44
ADJ TO TOTAL: PREV PD INTEREST							0.00	143.18	0.00	0.00		NET	102.44
STATUS CODE 1: Processed as Primary													



BCBSM													REMITTANCE
NPI #:	1982923660												ADVANCE
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REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME BUIST, ROBERT D														
						HIC	BUBM68818122	ACNT	4822LMD642		ICN	26250502227000710	ASG	Y MOA
1013940584	0217	021725	11	1	99386				388.00	199.26	0.00	0.00	CO-144	14.95 184.31
													CO-45	188.74
1013940584	0217	021725	11	1	99214	25			241.68	143.12	0.00	0.00	CO-144	5.36 46.20
													CO-45	98.56
													PI-204	71.56
													PR-3	20.00
1013940584	0217	021725	11	1	36415				20.00	5.00	0.00	0.00	CO-144	0.38 4.62
													CO-45	15.00
1013940584	0217	021725	11	1	G0442	XU			30.00	30.00	0.00	0.00	CO-144	2.25 27.75
1013940584	0217	021725	11	1	G0444	XU 33			29.45	0.00	0.00	0.00	PI-97	29.45 0.00
1013940584	0217	021725	11	1	3074F				0.00	0.00	0.00	0.00		0.00
1013940584	0217	021725	11	1	3078F				0.00	0.00	0.00	0.00		0.00
1013940584	0217	021725	11	1	G8510				0.00	0.00	0.00	0.00		0.00
1013940584	0217	021725	11	1	G9622				0.00	0.00	0.00	0.00		0.00
PT RESP	20.00					CLAIM TOTALS			709.13	377.38	0.00	0.00		
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	446.25 262.88
STATUS CODE 1: Processed as Primary														

NAME DAMOOSE, LYNDA L														
INSURED NAME: DAMOOSE, RYAN T														
						HIC	MZO893196534	ACNT	5024LMD642		ICN	26250590665800710	ASG	Y MOA
1306898036	0227	022725	11	1	85610				-21.00	0.00	0.00	0.00	PI-16	-21.00 0.00
							REM: N286							
PT RESP	0.00					CLAIM TOTALS			-21.00	0.00	0.00	0.00		-21.00 0.00
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	NET 0.00
STATUS CODE 22: Reversal of Previous Payment														

NAME DAMOOSE, LYNDA L														
INSURED NAME: DAMOOSE, RYAN T														
						HIC	MZO893196534	ACNT	5024LMD642		ICN	26250590665802710	ASG	Y MOA
1306898036	0227	022725	11	1	85610				21.00	4.29	0.00	0.00	CO-45	16.71 4.29
PT RESP	0.00					CLAIM TOTALS			21.00	4.29	0.00	0.00		16.71 4.29
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	NET 4.29
STATUS CODE 1: Processed as Primary														

NAME KASEN, JON														
						HIC	GMJ922978422	ACNT	4865LMD642		ICN	26250511221900710	ASG	Y MOA
1306898036	0219	021925	11	1	99396	25			-327.00	0.00	0.00	0.00	CO-144	-12.44 -153.31
													CO-45	-161.25
1306898036	0219	021925	11	1	36415				-20.00	0.00	0.00	0.00	CO-144	-0.38 -4.62
													CO-45	-15.00
1306898036	0219	021925	11	1	82043	QW			-14.70	0.00	0.00	0.00	PI-16	-14.70 0.00
							REM: N286							
1306898036	0219	021925	11	1	82570	QW			-17.85	0.00	0.00	0.00	PI-16	-17.85 0.00
							REM: N286							
1306898036	0219	021925	11	1	G0442	XU			-30.00	0.00	0.00	0.00	CO-144	-2.25 -27.75
1306898036	0219	021925	11	1	G0444	XU 33			-29.45	0.00	0.00	0.00	CO-234	-29.45 0.00
							REM: N20							
1306898036	0219	021925	11	1	3074F				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	3079F				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	3078F				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	G9622				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	G8510				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	3061F				0.00	0.00	0.00	0.00		0.00
PT RESP	0.00					CLAIM TOTALS			-439.00	0.00	0.00	0.00		-253.32 -185.68
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	NET -185.68
STATUS CODE 22: Reversal of Previous Payment														

NAME KASEN, JON														
						HIC	GMJ922978422	ACNT	4865LMD642		ICN	26250511221902710	ASG	Y MOA
1306898036	0219	021925	11	1	99396	25			327.00	165.75	0.00	0.00	CO-144	12.44 153.31
													CO-45	161.25
1306898036	0219	021925	11	1	36415				20.00	5.00	0.00	0.00	CO-144	0.38 4.62
													CO-45	15.00
1306898036	0219	021925	11	1	82043	QW			14.70	4.34	4.34	0.00	CO-45	10.36 0.00
1306898036	0219	021925	11	1	82570	QW			17.85	3.89	0.00	0.00	CO-45	13.96 3.89
1306898036	0219	021925	11	1	G0442	XU			30.00	30.00	0.00	0.00	CO-144	2.25 27.75
1306898036	0219	021925	11	1	G0444	XU 33			29.45	0.00	0.00	0.00	CO-234	29.45 0.00
							REM: N20							
1306898036	0219	021925	11	1	3074F				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	3079F				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	3078F				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	G9622				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	G8510				0.00	0.00	0.00	0.00		0.00
1306898036	0219	021925	11	1	3061F				0.00	0.00	0.00	0.00		0.00
PT RESP	4.34					CLAIM TOTALS			439.00	208.98	4.34	0.00		245.09 189.57
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	NET 189.57
STATUS CODE 1: Processed as Primary														



REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME MURPHY, BETH A				HIC	NSS891256376	ACNT	10LMD642	ICN 26250660371600710				ASG Y	MOA N152	
1013940584	0501	050124	11	1	99396	25		327.00	0.00	0.00	0.00	PI-16	327.00	0.00
				REM: N152										
1013940584	0501	050124	11	1	36415	59		15.00	0.00	0.00	0.00	PI-16	15.00	0.00
				REM: N152										
1013940584	0501	050124	11	2	96127	XU		75.00	0.00	0.00	0.00	PI-16	75.00	0.00
				REM: N152										
1013940584	0501	050124	11	1	96127	XU		248.84	0.00	0.00	0.00	PI-16	248.84	0.00
				REM: N152										
1013940584	0501	050124	11	2	1000F			0.00	0.00	0.00	0.00			0.00
1013940584	0501	050124	11	1	3078F			0.00	0.00	0.00	0.00			0.00
1013940584	0501	050124	11	1	3074F			0.00	0.00	0.00	0.00			0.00
1013940584	0501	050124	11	1	2001F			0.00	0.00	0.00	0.00			0.00
1013940584	0501	050124	11	1	1159F			0.00	0.00	0.00	0.00			0.00
1013940584	0501	050124	11	1	3008F			0.00	0.00	0.00	0.00			0.00
1013940584	0501	050124	11	1	2000F			0.00	0.00	0.00	0.00			0.00
1013940584	0501	050124	11	1	1160F			0.00	0.00	0.00	0.00			0.00
PT RESP	0.00				CLAIM TOTALS			665.84	0.00	0.00	0.00		665.84	0.00
ADJ TO TOTAL: PREV PD					INTEREST			0.00		LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 1: Processed as Primary														

NAME OESCH, LAURA E				HIC	MMJ928222687	ACNT	5068LMD642	ICN 26250640407200710				ASG Y	MOA	
1013940584	1210	121024	11	1	99213			146.00	98.69	98.69	0.00	CO-45	47.31	0.00
1013940584	1210	121024	11	1	3008F			0.00	0.00	0.00	0.00			0.00
1013940584	1210	121024	11	1	2001F			0.00	0.00	0.00	0.00			0.00
1013940584	1210	121024	11	1	2000F			0.00	0.00	0.00	0.00			0.00
1013940584	1210	121024	11	1	1000F			0.00	0.00	0.00	0.00			0.00
1013940584	1210	121024	11	1	1159F			0.00	0.00	0.00	0.00			0.00
1013940584	1210	121024	11	1	1160F			0.00	0.00	0.00	0.00			0.00
PT RESP	98.69				CLAIM TOTALS			146.00	98.69	98.69	0.00		47.31	0.00
ADJ TO TOTAL: PREV PD					INTEREST			0.00		LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 1: Processed as Primary														

NAME RODGERS, TIMOTHY L				HIC	JXT922729749	ACNT	5051LMD642	ICN 26250640411400710				ASG Y	MOA
INSURED NAME: ALLEN, KATHERINE M													
1306898036	0228	022825	11	1	99212		87.00	0.00	0.00	0.00	PR-27	87.00	0.00
1306898036	0228	022825	11	1	3008F		0.00	0.00	0.00	0.00			0.00
1306898036	0228	022825	11	1	2001F		0.00	0.00	0.00	0.00			0.00
1306898036	0228	022825	11	1	2000F		0.00	0.00	0.00	0.00			0.00
1306898036	0228	022825	11	1	1000F		0.00	0.00	0.00	0.00			0.00
1306898036	0228	022825	11	1	1159F		0.00	0.00	0.00	0.00			0.00
1306898036	0228	022825	11	1	1160F		0.00	0.00	0.00	0.00			0.00
1306898036	0228	022825	11	1	3074F		0.00	0.00	0.00	0.00			0.00
1306898036	0228	022825	11	1	3078F		0.00	0.00	0.00	0.00			0.00
PT RESP	87.00	CLAIM TOTALS					87.00	0.00	0.00	0.00		87.00	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 CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	12	2242.65	998.74	103.03	0.00	1642.38	497.24	0.00	497.24

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

CO-144 Incentive adjustment, e.g. preferred product / service.

CO-234 This procedure is not paid separately. Check Remittance Remark Codes for details.

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.

N152 Missing / incomplete / invalid replacement claim information.

N20 Service not payable with other service rendered on the same date.

N286 Missing / incomplete / invalid referring provider primary identifier.

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

PI-204 This service / equipment / drug is not covered under the patient's current benefit plan

PI-97 Payment adjusted because the benefit for this service is included in the payment / allowance for another service / procedure that has already been adjudicated

PR-1 Deductible Amount

PR-27 Expenses incurred after coverage terminated.

PR-3 Co-payment Amount

