

BLUE CROSS BLUE SHIELD OF MICH []
P.O. BOX 553912
DETROIT, MI 482553912
(000)000-0000

REMITTANCE
ADVISE

TIMOTHY J TOBOLIC MD PLLC
7740 BYRON CENTER AVE
BYRON CENTER, MI 49315

NPI #: 1982923660
PAGE #: 1 of 1
DATE: 2025-06-03
EFT #: 604130584
TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME CERNIA, MARY S					HIC XYL991237948 ACNT	6504LMD642				ICN 250521928628	ASG Y MOA	
1306898036	0519	051925	11	1	99214 25		241.68	120.84	0.00	0.00	CO-45 120.84	118.42
1306898036	0519	051925	11	1	G0442 XU		43.00	0.00	0.00	0.00	CO-253 2.42	0.00
					REM: N435						CO-96 43.00	
1306898036	0519	051925	11	1	2001F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	11	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	11	1	G0439		361.00	121.85	0.00	0.00	CO-45 239.15	119.41
1306898036	0519	051925	11	1	G2211		25.00	15.26	0.00	0.00	CO-253 2.44	
1306898036	0519	051925	11	1	36415		20.00	9.09	0.00	0.00	CO-45 9.74	14.95
1306898036	0519	051925	11	1	G0136 XU		65.00	17.40	0.00	0.00	CO-253 0.31	
1306898036	0519	051925	11	1	G8420		0.00	0.00	0.00	0.00	CO-45 10.91	8.91
1306898036	0519	051925	11	1	1160F		0.00	0.00	0.00	0.00	CO-253 0.18	
1306898036	0519	051925	11	1	1159F		0.00	0.00	0.00	0.00	CO-45 47.60	17.05
1306898036	0519	051925	11	1	2000F		0.00	0.00	0.00	0.00	CO-253 0.35	
1306898036	0519	051925	11	1	3008F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	11	1	2010F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	11	1	1158F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	11	1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	11	1	G0556		65.00	14.74	0.00	0.00	CO-45 50.26	14.45
1306898036	0519	051925	11	1	G0444 XU		91.00	0.00	0.00	0.00	CO-253 0.29	
					REM: N435						CO-96 91.00	0.00
1306898036	0519	051925	11	1	99497 33		132.00	77.66	0.00	0.00	CO-45 54.34	76.11
											CO-253 1.55	
PT RESP	0.00				CLAIM TOTALS		1043.68	376.84	0.00	0.00	674.38	369.30
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		0.00	369.30
STATUS CODE 1: Processed as Primary												

NAME SOBESKY, ADRIAN J					HIC XYL991486949 ACNT	6442LMD642				ICN 250521928724	ASG Y MOA	
1306898036	0516	051625	11	1	G2211		25.00	0.00	0.00	0.00	CO-16 25.00	0.00
					REM: M76							
1306898036	0516	051625	11	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0516	051625	11	1	1036F		0.00	0.00	0.00	0.00		0.00
1306898036	0516	051625	11	1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0516	051625	11	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0516	051625	11	1	99213		146.00	0.00	0.00	0.00	CO-16 146.00	0.00
					REM: M76							
PT RESP	0.00				CLAIM TOTALS		171.00	0.00	0.00	0.00	171.00	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
	2	1214.68	376.84	0.00	0.00	845.38	369.30	0.00	369.30

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-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
CO-96 Non-covered charge(s).
M76 Missing / incomplete / invalid diagnosis or condition.
N435 Exceeds number / frequency approved /allowed within time period without support documentation.

