

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: 2025-05-29
EFT #: 25145B1000435741
TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME FLIPPIN, FLOYD			HIC 0039899040	ACNT 6009LMD642		ICN 444575069600	ASG Y	MOA			
1306898036	0423	042325	-1 99214 25			-219.00	-82.43	0.00	0.00	CO-45	-136.57 -82.43
1306898036	0423	042325	-1 83036 QW			-60.90	0.00	0.00	0.00	CO-16	-60.90 0.00
REM: M76											
1306898036	0423	042325	-1 3075F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 3078F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 1036F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 3052F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 3008F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 2001F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 2000F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 1000F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 1159F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	-1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			-279.90	-82.43	0.00	0.00		-197.47 -82.43
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET -82.43
STATUS CODE 22: Reversal of Previous Payment											

NAME FLIPPIN, FLOYD			HIC 0039899040	ACNT 6009LMD642		ICN 444962799700	ASG Y	MOA			
1306898036	0423	042325	1 99214 25			219.00	82.43	0.00	0.00	CO-45	136.57 82.43
1306898036	0423	042325	1 83036 QW			60.90	8.04	0.00	0.00	CO-45	52.86 8.04
1306898036	0423	042325	1 3075F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 3078F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 1036F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 3052F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 3008F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 2001F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 2000F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 1000F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 1159F			0.00	0.00	0.00	0.00		0.00
1306898036	0423	042325	1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			279.90	90.47	0.00	0.00		189.43 90.47
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET 90.47
STATUS CODE 1: Processed as Primary											

NAME HOFFER, THOMAS			HIC 0040531784	ACNT 6545LMD642		ICN 445995044100	ASG Y	MOA			
1306898036	0520	052025	1 99386 25			388.00	117.10	0.00	0.00	CO-45	270.90 117.10
1306898036	0520	052025	1 G0136 33			34.80	12.14	0.00	0.00	CO-45	22.66 12.14
1306898036	0520	052025	1 G0442 XU			30.00	0.00	0.00	0.00	CO-16	30.00 0.00
REM: M51											
1306898036	0520	052025	1 G0444 XU			29.45	0.00	0.00	0.00	CO-16	29.45 0.00
REM: M51											
1306898036	0520	052025	1 36415			20.00	7.53	0.00	0.00	CO-45	12.47 7.53
1306898036	0520	052025	3 99417			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 3075F			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 3078F			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 G9622			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 G8510			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 3008F			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 2001F			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 2000F			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 1000F			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 1159F			0.00	0.00	0.00	0.00		0.00
1306898036	0520	052025	1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			502.25	136.77	0.00	0.00		365.48 136.77
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET 136.77
STATUS CODE 1: Processed as Primary											



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REMITTANCE
ADVICE
DATE: 2025-05-29

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME RILEY, KEAGEN			HIC	0022201897	ACNT	6501LMD642		ICN	445959629000	ASG Y	MOA
1306898036	0519	051925	1	99214	25	219.00	110.16	0.00	0.00	CO-45	110.16
1306898036	0519	051925	1	G0447	XU	65.00	0.00	0.00	0.00	CO-96	0.00
REM: N174											
1306898036	0519	051925	1	99401	25	65.00	24.50	0.00	0.00	CO-45	24.50
1306898036	0519	051925	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	1	3008F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	1	2001F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	1	2000F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	1	1000F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	1	1159F		0.00	0.00	0.00	0.00		0.00
1306898036	0519	051925	1	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS		349.00	134.66	0.00	0.00		134.66
ADJ TO TOTAL: PREV PD						0.00	LATE FILING CHARGE		0.00	NET	134.66
STATUS CODE 1: Processed as Primary											

NAME TIMMER, SUZANNE			HIC	0032230696	ACNT	5696LMD642		ICN	437399102400	ASG Y	MOA
1306898036	0407	040725	-1	99214		-219.00	0.00	0.00	0.00	CO-97	0.00
REM: M15											
1306898036	0407	040725	-1	96127	XU	-40.00	-2.98	0.00	0.00	CO-45	-2.98
1306898036	0407	040725	-1	82043	QW	-14.70	-4.78	0.00	0.00	CO-45	-4.78
1306898036	0407	040725	-1	82570	QW	-17.85	-4.29	0.00	0.00	CO-45	-4.29
1306898036	0407	040725	-1	G0446	XU	-61.88	0.00	0.00	0.00	CO-96	0.00
REM: N174											
1306898036	0407	040725	-1	G0447	XU	-65.00	0.00	0.00	0.00	CO-96	0.00
REM: N174											
1306898036	0407	040725	-1	99401	33	-65.00	-24.50	0.00	0.00	CO-45	-24.50
1306898036	0407	040725	-1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	-1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	-1	1036F		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	-1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	-1	3060F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS		-483.43	-36.55	0.00	0.00		-36.55
ADJ TO TOTAL: PREV PD						0.00	LATE FILING CHARGE		0.00	NET	-36.55
STATUS CODE 22: Reversal of Previous Payment											

NAME TIMMER, SUZANNE			HIC	0032230696	ACNT	5696LMD642		ICN	444291682900	ASG Y	MOA
1306898036	0407	040725	1	99214	25	219.00	0.00	0.00	0.00	PR-27	0.00
REM: N650											
1306898036	0407	040725	1	96127	XU	40.00	0.00	0.00	0.00	PR-27	0.00
REM: N650											
1306898036	0407	040725	1	82043	QW	14.70	0.00	0.00	0.00	PR-27	0.00
REM: N650											
1306898036	0407	040725	1	82570	QW	17.85	0.00	0.00	0.00	PR-27	0.00
REM: N650											
1306898036	0407	040725	1	G0446	XU	61.88	0.00	0.00	0.00	PR-27	0.00
REM: N650											
1306898036	0407	040725	1	G0447	XU	65.00	0.00	0.00	0.00	PR-27	0.00
REM: N650											
1306898036	0407	040725	1	99401	33	65.00	0.00	0.00	0.00	PR-27	0.00
REM: N650											
1306898036	0407	040725	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	1	1036F		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	1	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0407	040725	1	3060F		0.00	0.00	0.00	0.00		0.00
PT RESP	483.43			CLAIM TOTALS		483.43	0.00	0.00	0.00		0.00
ADJ TO TOTAL: PREV PD						0.00	LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 1: Processed as Primary											

NAME CHACHULSKI, REBECCA			HIC	0059961701	ACNT	6519LMD642		ICN	445959615000	ASG Y	MOA
1013940584	0414	041425	1	98966		25.00	0.00	0.00	0.00	CO-96	0.00
REM: N59											
PT RESP	0.00			CLAIM TOTALS		25.00	0.00	0.00	0.00		0.00
ADJ TO TOTAL: PREV PD						0.00	LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 1: Processed as Primary											

NAME CHACHULSKI, REBECCA			HIC	0059961701	ACNT	6518LMD642		ICN	445959615800	ASG Y	MOA
1013940584	0428	042825	1	98966		25.00	0.00	0.00	0.00	CO-96	0.00
REM: N59											
PT RESP	0.00			CLAIM TOTALS		25.00	0.00	0.00	0.00		0.00
ADJ TO TOTAL: PREV PD						0.00	LATE FILING CHARGE		0.00	NET	0.00
STATUS CODE 1: Processed as Primary											



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PAGE #: 3 of 3

REMITTANCE
ADVICE
DATE: 2025-05-29

REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME	SCHUMAKER, WILLIAM			HIC	0010329532	ACNT	5974LMD642			ICN	445051510000	ASG Y	MOA	
1013940584	0421	042125		1	99214	25		219.00	0.00	0.00	0.00	CO-16	219.00	0.00
							REM: N769							
1013940584	0421	042125		1	G2211			25.00	0.00	0.00	0.00	CO-16	25.00	0.00
							REM: N769							
1013940584	0421	042125		1	36415			20.00	7.53	0.00	0.00	CO-45	12.47	7.53
1013940584	0421	042125		1	G0446	XU		61.88	0.00	0.00	0.00	CO-96	61.88	0.00
							REM: N174							
1013940584	0421	042125		1	82570	QW		17.85	4.29	0.00	0.00	CO-45	13.56	4.29
1013940584	0421	042125		1	82043	QW		14.70	4.78	0.00	0.00	CO-45	9.92	4.78
1013940584	0421	042125		1	3074F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	3078F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	2028F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	2010F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	3008F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	2001F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	1159F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	2000F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	1160F			0.00	0.00	0.00	0.00			0.00
1013940584	0421	042125		1	3061F			0.00	0.00	0.00	0.00			0.00
PT RESP		0.00				CLAIM TOTALS		358.43	16.60	0.00	0.00		341.83	16.60
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING CHARGE		0.00	NET	16.60
STATUS CODE 1: Processed as Primary														

NAME	WILLIAMSON, BOBBY			HIC	0037709141	ACNT	6195LMD642			ICN	445164236700	ASG Y	MOA	
1013940584	0501	050125		1	99499			0.01	0.00	0.00	0.00	CO-252	0.01	0.00
							REM: M29							
PT RESP		0.00				CLAIM TOTALS		0.01	0.00	0.00	0.00		0.01	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
	10	1259.69	259.52	0.00	0.00	1000.17	259.52	0.00	259.52

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-252	An attachment / other documentation is required to adjudicate this claim / service. Check Remittance Remark Codes for details.
CO-45	Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
CO-96	Non-covered charge(s).
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
M15	Separately billed services / tests have been bundled as they are considered components of the same procedure. Separate payment is not allowed.
M29	Missing operative note / report.
M51	Missing / incomplete / invalid procedure code(s).
M76	Missing / incomplete / invalid diagnosis or condition.
N174	This is not a covered service / procedure/ equipment / bed, however patient liability is limited to amounts shown in the adjustments under group 'PR'.
N59	Please refer to your provider manual for additional program and provider information.
N650	This policy was not in effect for this date of loss. No coverage is available.
N769	A lateral diagnosis is required.
PR-27	Expenses incurred after coverage terminated.

