

Insight Benefit Administrators LLC []
 3033 Orchard Vista Dr. S.E.
 Grand Rapids, MI 49546
 (000)000-0000

REMITTANCE
 ADVICE

TIMOTHY J TOBOLIC MD PLLC
 7740 BYRON CENTER AVE
 SUITE 202
 BYRON CENTER, MI 49315

NPI #: 1013940584
 PAGE #: 1 of 1
 DATE: 2025-07-14
 CHECK #: 1343647658
 TAX ID #: 272620668

REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME NINK, KRIS		HIC 97100006551	ACNT 6290LMD642				ICN 202505150229	ASG Y	MOA	
272620668	0509 050925	99214 25			219.00	127.02	0.00	0.00	CO-45	97.02
									PR-3	30.00
272620668	0509 050925	99406 33			27.06	15.69	0.00	0.00	CO-45	15.69
272620668	0509 050925	G2211			30.52	17.70	0.00	0.00	CO-45	17.70
272620668	0509 050925	3075F			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	3078F			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	G8420			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	2010F			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	3008F			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	2001F			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	1159F			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	2000F			0.00	0.00	0.00	0.00		0.00
272620668	0509 050925	1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	30.00	CLAIM TOTALS			276.58	160.41	0.00	0.00		130.41
ADJ TO TOTAL: PREV PD		INTEREST			0.00		LATE FILING CHARGE		0.00	NET 130.41
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	
	1	276.58	160.41	0.00	0.00	146.17	130.41	0.00	130.41	

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES
 CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
 PR-3 Co-payment Amount

