

UMR []
P.O. Box 30541
Salt Lake City, UT 84130
(000)000-0000

REMITTANCE
ADVICE

TIMOTHY J. TOBOLIC, MD, PLLC
STE 202
7740 BYRON CENTER AVE SW
BYRON CENTER, MI 49315

NPI #: 1982923660
PAGE #: 1 of 1
DATE: 2025-03-26
NONPAY #: CN50321110543835080519240
TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME	BRANDES, KEVIN			HIC 47220771		ACNT 5218LMD642		ICN 25072585888		ASG Y MOA	
1013940584	0312	031225	11	99214		219.00	102.87	102.87	0.00	CO-45	116.13 0.00
1013940584	0312	031225	11	3074F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	11	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	11	3008F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	11	2001F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	11	2000F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	11	1000F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	11	1159F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	11	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP	102.87			CLAIM TOTALS		219.00	102.87	102.87	0.00		116.13 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	BILLED	ALLOWED	DEDUCT	COINS	TOTAL	PROV PD	PROV	CHECK
	CLAIMS	AMT	AMT	AMT	AMT	RC-AMT	AMT	ADJ AMT	AMT
	1	219.00	102.87	102.87	0.00	116.13	0.00	0.00	0.00

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

