0.00

0.00

TIMOTHY J TOBOLIC MD PLLC 7740 BYRON CENTER AVE SUITE 202

BYRON CENTER, MI 49315

NPI #: 1013940584 PAGE #: 1 of 1 DATE: 2025-05-15 NONPAY #: 673647600 TAX ID #: 272620668

29.82

0.00

REND PROV	SERV D	ATE POS	NOS	PROC	MODS	BIL	LED	ALLOWED	DEDUCT	COINS	GRP/RC-AM	r	PROV PD
NAME NINE	KRIS		HIC	971000	06551 ACI	NT 576	2LMD64	2	ICN 2	20250411031	7 ASG	Y MOA	
272620668	0407 04	40725		93000		7	1.00	41.18	41.18	0.00	CO-45	29.82	0.00
PT RESP	41.18			CLAIM TO	OTALS	7	1.00	41.18	41.18	0.00		29.82	0.00
ADJ TO TOTAL: PREV PD				INTEREST			0.00 I		LATE FILING	CHARGE	0.00	0.00 NET	0.00
STATUS CODE 1: Processed as Primary													
TOTALS:	# OF CLAIMS	BILLE	:D	ALLOW		EDUCT	(	COINS AMT	TOTAL RC-AMT	PROV P		ROV J AMT	CHECK AMT

0.00

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

71.00

Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement. Deductible Amount CO-45

41.18

41.18

PR-1