

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 1  
 DATE: 2025-05-29  
 EFT #: 25138B1000373114  
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME	SCHRAGER, PATRICK		HIC 94999278200	ACNT 6312LMD642		ICN 445515158300	ASG Y	MOA			
1013940584	0512 051225	1 99213 25			146.00	103.06	103.06	0.00	CO-45	42.94	0.00
1013940584	0512 051225	1 G0447 XU			65.00	31.26	0.00	0.00	CO-45	33.74	31.26
1013940584	0512 051225	1 99401 25			65.00	52.09	0.00	0.00	CO-45	12.91	52.09
1013940584	0512 051225	1 3074F			0.00	0.00	0.00	0.00			0.00
1013940584	0512 051225	1 3078F			0.00	0.00	0.00	0.00			0.00
1013940584	0512 051225	1 3008F			0.00	0.00	0.00	0.00			0.00
1013940584	0512 051225	1 2001F			0.00	0.00	0.00	0.00			0.00
1013940584	0512 051225	1 2000F			0.00	0.00	0.00	0.00			0.00
1013940584	0512 051225	1 1000F			0.00	0.00	0.00	0.00			0.00
1013940584	0512 051225	1 1159F			0.00	0.00	0.00	0.00			0.00
1013940584	0512 051225	1 1160F			0.00	0.00	0.00	0.00			0.00
PT RESP	103.06		CLAIM TOTALS		276.00	186.41	103.06	0.00		89.59	83.35
ADJ TO TOTAL: PREV PD			INTEREST		0.00		LATE FILING CHARGE		0.00	NET	83.35
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	276.00	186.41	103.06	0.00	89.59	83.35	0.00	83.35

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

