

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 2  
DATE: 2025-03-27  
EFT #: 25082B1000420058  
TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME CHACHULSKI, REBECCA			HIC 0059961701	ACNT 5383LMD642		ICN 436535456000	ASG Y	MOA			
1013940584	0319	031925	1 99214			219.00	0.00	0.00	0.00	CO-16	219.00 0.00
REM: N769											
1013940584	0319	031925	1 3075F			0.00	0.00	0.00	0.00		0.00
1013940584	0319	031925	1 3079F			0.00	0.00	0.00	0.00		0.00
1013940584	0319	031925	1 3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0319	031925	1 2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0319	031925	1 2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0319	031925	1 1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0319	031925	1 1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0319	031925	1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			219.00	0.00	0.00	0.00		219.00 0.00
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE	0.00	NET	0.00
STATUS CODE 1: Processed as Primary											

NAME HOGAN, TIMOTHY			HIC 1265441437	ACNT 4899LMD642		ICN 435234829000	ASG Y	MOA			
1013940584	0220	022025	-1 99386			-388.00	0.00	0.00	0.00	CO-B16	-388.00 0.00
1013940584	0220	022025	-1 99214 25			-241.68	-82.01	0.00	0.00	CO-45	-159.67 -82.01
1013940584	0220	022025	-1 81001 QW			-43.05	-2.62	0.00	0.00	CO-45	-40.43 -2.62
1013940584	0220	022025	-1 36415			-20.00	-7.31	0.00	0.00	CO-45	-12.69 -7.31
1013940584	0220	022025	-1 97802			-40.00	0.00	0.00	0.00	CO-97	-40.00 0.00
REM: M15											
1013940584	0220	022025	-1 G0442 XU			-30.00	0.00	0.00	0.00	CO-16	-30.00 0.00
REM: M51											
1013940584	0220	022025	-1 G0444 33			-29.45	0.00	0.00	0.00	CO-16	-29.45 0.00
REM: M51											
1013940584	0220	022025	-1 0513F			0.00	0.00	0.00	0.00		0.00
1013940584	0220	022025	-1 G9621			0.00	0.00	0.00	0.00		0.00
1013940584	0220	022025	-1 G8510			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			-792.18	-91.94	0.00	0.00		-700.24 -91.94
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE	0.00	NET	-91.94
STATUS CODE 22: Reversal of Previous Payment											

NAME HOGAN, TIMOTHY			HIC 1265441437	ACNT 4899LMD642		ICN 435769264100	ASG Y	MOA			
1013940584	0220	022025	1 99396			0.00	0.00	0.00	0.00		0.00
1013940584	0220	022025	1 99214 25			241.68	82.43	0.00	0.00	CO-45	159.25 82.43
1013940584	0220	022025	1 81001 QW			43.05	2.62	0.00	0.00	CO-45	40.43 2.62
1013940584	0220	022025	1 36415			20.00	7.53	0.00	0.00	CO-45	12.47 7.53
1013940584	0220	022025	1 97802			40.00	0.00	0.00	0.00	CO-97	40.00 0.00
REM: M15											
1013940584	0220	022025	1 G0442 XU			30.00	0.00	0.00	0.00	CO-16	30.00 0.00
REM: M51											
1013940584	0220	022025	1 G0444 33			29.45	0.00	0.00	0.00	CO-16	29.45 0.00
REM: M51											
1013940584	0220	022025	1 0513F			0.00	0.00	0.00	0.00		0.00
1013940584	0220	022025	1 G9621			0.00	0.00	0.00	0.00		0.00
1013940584	0220	022025	1 G8510			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00		CLAIM TOTALS			404.18	92.58	0.00	0.00		311.60 92.58
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE	0.00	NET	92.58
STATUS CODE 1: Processed as Primary											

NAME MINAKER, CARTER			HIC 0014624208	ACNT 5306LMD642		ICN 436369412400	ASG Y	MOA			
1013940584	0317	031725	1 99391			239.00	65.83	0.00	0.00	CO-45	173.17 65.83
PT RESP	0.00		CLAIM TOTALS			239.00	65.83	0.00	0.00		173.17 65.83
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE	0.00	NET	65.83
STATUS CODE 1: Processed as Primary											



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TIMOTHY J TOBOLIC MD PLLC [900068405]  
PAGE #: 2 of 2

REMITTANCE  
ADVICE  
DATE: 2025-03-27

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME	VANDERWALL, KEVIN		HIC	0094933502	ACNT	5299LMD642		ICN	436490813300	ASG Y MOA	
1013940584	0312	031225	1	99214	25	219.00	82.43	0.00	0.00	CO-45	136.57 82.43
1013940584	0312	031225	1	99401	33	0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	1	G0447	XU	0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	1	3074F		0.00	0.00	0.00	0.00		0.00
1013940584	0312	031225	1	3078F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS		219.00	82.43	0.00	0.00	136.57	82.43
ADJ TO TOTAL: PREV PD				INTEREST		0.00		LATE FILING CHARGE		0.00	NET 82.43
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
	5	289.00	148.90	0.00	0.00	140.10	148.90	0.00	148.90

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-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
- 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
- CO-B16 Payment adjusted because 'New Patient' qualifications were not met.
- M15 Separately billed services / tests have been bundled as they are considered components of the same procedure. Separate payment is not allowed.
- M51 Missing / incomplete / invalid procedure code(s).
- N769 A lateral diagnosis is required.

