

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: 2025-08-21
 EFT #: 25222B1000344001
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME CURTIS, KRISTEN			HIC	94865647500	ACNT	7762LMD642		ICN	456597584500	ASG Y	MOA
1306898036	0801	080125	1	99396	25	327.00	172.48	0.00	0.00	CO-45	154.52 172.48
1306898036	0801	080125	1	83036	QW	60.90	10.23	0.00	0.00	CO-45	50.67 10.23
1306898036	0801	080125	1	G0447	XU	65.00	31.26	0.00	0.00	CO-45	33.74 31.26
1306898036	0801	080125	1	G0136	33	65.00	27.10	0.00	0.00	CO-45	37.90 27.10
1306898036	0801	080125	2	96127	XU	80.00	18.85	0.00	0.00	CO-45	61.15 18.85
1306898036	0801	080125	1	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0801	080125	1	3078F		0.00	0.00	0.00	0.00		0.00
1306898036	0801	080125	1	G8476		0.00	0.00	0.00	0.00		0.00
1306898036	0801	080125	1	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	0801	080125	1	G8427		0.00	0.00	0.00	0.00		0.00
1306898036	0801	080125	1	1036F		0.00	0.00	0.00	0.00		0.00
1306898036	0801	080125	1	3044F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS		597.90	259.92	0.00	0.00		337.98 259.92
ADJ TO TOTAL: PREV PD				INTEREST		0.00		LATE FILING CHARGE		0.00	NET 259.92
STATUS CODE 1: Processed as Primary											

PROVIDER ADJ DETAILS: PLB REASON CODE FCN/OTHER IDENTIFIER HIC AMOUNT
 Unspecified Recovery (WU) 6181LMD642 8.07

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	597.90	259.92	0.00	0.00	337.98	251.85	8.07	251.85

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

