

BLUE CARE NETWORK OF MICHIGAN - SELF-FUNDED []
 441 E. JEFFERSON
 DETROIT, MI 48226
 (000)000-0000

REMITTANCE
 ADVICE

BYRON CENTER FAMILY MEDICINE [0D10420 G9999D]
 7740 BYRON CENTER AVE
 BYRON CENTER, MI 49315

NPI #: 1982923660
 PAGE #: 1 of 1
 DATE: 2025-04-04
 EFT #: 25090B1000265947065036001
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME	MARTIN, HARPER L				HIC	XYS917823220	ACNT	5399LMD642		ICN	E18103563300	ASG Y MOA
INSURED NAME:	MARTIN, LOGAN T											
1013940584	1217	121724	11	1	99393			270.00	0.00	0.00	0.00	CO-97 270.00 0.00
						REM: N1						
1013940584	1217	121724	11	1	90651			311.00	304.50	0.00	0.00	CO-45 6.50 304.50
1013940584	1217	121724	11	1	90461			20.00	0.00	0.00	0.00	CO-107 20.00 0.00
						REM: N1						
1013940584	1217	121724	11	1	97802			69.42	0.00	0.00	0.00	CO-97 69.42 0.00
						REM: N19 N1						
1013940584	1217	121724	11	1	3074F			0.00	0.00	0.00	0.00	0.00
1013940584	1217	121724	11	1	3079F			0.00	0.00	0.00	0.00	0.00
PT RESP	0.00				CLAIM	TOTALS		670.42	304.50	0.00	0.00	365.92 304.50
ADJ TO TOTAL:	PREV PD				INTEREST			0.00	LATE FILING CHARGE		0.00	NET 304.50
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	670.42	304.50	0.00	0.00	365.92	304.50	0.00	304.50

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES
 CO-107 Claim / service adjusted because the related or qualifying claim / service was not identified on this claim.
 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
 N1 Alert: You may appeal this decision in writing within the required time limits following receipt of this notice by following the instructions included in your contract or plan benefit documents.
 N19 Procedure code incidental to primary procedure.

