

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: 2025-04-17
 EFT #: 24049B1000405464
 TAX ID #: 272620668

REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME SUMADJI, LEEANN		HIC 0013935428	ACNT 6218600002I		ICN 386791101000	ASG Y	MOA			
1306898036	0206 020624	1 99395			297.00	81.34	0.00	0.00	CO-45	215.66 81.34
1306898036	0206 020624	1 G2211			25.00	0.00	0.00	0.00	CO-16	25.00 0.00
			REM: M51							
1306898036	0206 020624	1 96127 59			40.00	2.98	0.00	0.00	CO-45	37.02 2.98
1306898036	0206 020624	1 96127 59			40.00	2.98	0.00	0.00	CO-45	37.02 2.98
1306898036	0206 020624	1 3008F			0.00	0.00	0.00	0.00		0.00
1306898036	0206 020624	1 2001F			0.00	0.00	0.00	0.00		0.00
1306898036	0206 020624	1 2000F			0.00	0.00	0.00	0.00		0.00
1306898036	0206 020624	1 3074F			0.00	0.00	0.00	0.00		0.00
1306898036	0206 020624	1 3078F			0.00	0.00	0.00	0.00		0.00
1306898036	0206 020624	1 G8427			0.00	0.00	0.00	0.00		0.00
1306898036	0206 020624	1 1000F			0.00	0.00	0.00	0.00		0.00
1306898036	0206 020624	1 G8510			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00	CLAIM TOTALS			402.00	87.30	0.00	0.00		314.70 87.30
ADJ TO TOTAL: PREV PD		INTEREST			0.00				0.00	NET 87.30
STATUS CODE 1: Processed as Primary										

NAME MORTON, AUSTIN		HIC 0008257561	ACNT 6002400001W		ICN 386728989600	ASG Y	MOA			
1013940584	0206 020624	1 99213 25			146.00	78.66	0.00	0.00	CO-45	67.34 78.66
1013940584	0206 020624	1 10060			239.00	81.58	0.00	0.00	CO-45	157.42 81.58
1013940584	0206 020624	1 3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0206 020624	1 2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0206 020624	1 2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0206 020624	1 3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0206 020624	1 3078F			0.00	0.00	0.00	0.00		0.00
1013940584	0206 020624	1 G8427			0.00	0.00	0.00	0.00		0.00
1013940584	0206 020624	1 1000F			0.00	0.00	0.00	0.00		0.00
PT RESP	0.00	CLAIM TOTALS			385.00	160.24	0.00	0.00		224.76 160.24
ADJ TO TOTAL: PREV PD		INTEREST			0.00				0.00	NET 160.24
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
	2	787.00	247.54	0.00	0.00	539.46	247.54	0.00	247.54

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.
 M51 Missing / incomplete / invalid procedure code(s).

