

UMR []
 115 W Wausau Ave
 Wausau, WI 54401
 (000)000-0000

REMITTANCE
 ADVICE

TIMOTHY J. TOBOLIC, MD, PLLC
 STE 202
 7740 BYRON CENTER AVE SW
 BYRON CENTER, MI 49315

NPI #: 1982923660
 PAGE #: 1 of 1
 DATE: 2025-07-29
 EFT #: 711628038
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME VANDEWERKEN, BRANDIE			HIC 21291624		ACNT	7240LMD642		ICN 25193442954		ASG Y	MOA
INSURED NAME: VANDEWERKEN, JOEL											
1306898036	0701	070125	11	99386	25	388.00	158.55	0.00	0.00	CO-45	158.55
1306898036	0701	070125	11	G8510		0.00	0.00	0.00	0.00		0.00
1306898036	0701	070125	11	G0442	XU	30.00	19.02	0.00	0.00	CO-45	19.02
1306898036	0701	070125	11	G0444	XU	29.45	19.02	0.00	0.00	CO-45	19.02
1306898036	0701	070125	11	G0136	33	34.80	20.27	0.00	0.00	CO-45	20.27
1306898036	0701	070125	11	G8420		0.00	0.00	0.00	0.00		0.00
1306898036	0701	070125	11	3074F		0.00	0.00	0.00	0.00		0.00
1306898036	0701	070125	11	3079F		0.00	0.00	0.00	0.00		0.00
1306898036	0701	070125	11	G9622		0.00	0.00	0.00	0.00		0.00
1306898036	0701	070125	11	1036F		0.00	0.00	0.00	0.00		0.00
PT RESP	0.00			CLAIM TOTALS		482.25	216.86	0.00	0.00	265.39	216.86
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET 216.86
STATUS CODE 1: Processed as Primary											

PROVIDER ADJ DETAILS:	PLB REASON CODE	FCN/OTHER IDENTIFIER	HIC	AMOUNT
Overpayment Recovery (WO)		FCN	00003275230	4.78
Adjustment (CS)		ZELIS	REFEA 5563LMD642	
			TRANSACTION FEE	5.24

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	482.25	216.86	0.00	0.00	265.39	206.84	10.02	206.84

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

