

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: 2025-03-20
EFT #: 25068B1000353313
TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME TOMPKINS, DEBRA			HIC	94922358700	ACNT	5082LMD642		ICN	435769269800	ASG Y	MOA
1013940584	0303	030325	1	99213		146.00	107.30	0.00	0.00	CO-45	38.70
										PR-3	20.00
1013940584	0303	030325	1	G8510		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	3075F		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	3008F		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	2001F		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	2000F		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	1000F		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	1159F		0.00	0.00	0.00	0.00		0.00
1013940584	0303	030325	1	1160F		0.00	0.00	0.00	0.00		0.00
PT RESP		20.00	CLAIM TOTALS			146.00	107.30	0.00	0.00		58.70
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET
PLAN TYPE: WEST MI PARTNERS											87.30
STATUS CODE 1: Processed as Primary											

TOTALS:	# OF	BILLED	ALLOWED	DEDUCT	COINS	TOTAL	PROV PD	PROV	CHECK
	CLAIMS	AMT	AMT	AMT	AMT	RC-AMT	AMT	ADJ AMT	AMT
	1	146.00	107.30	0.00	0.00	58.70	87.30	0.00	87.30

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES
CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
PR-3 Co-payment Amount

