

BCBSM []  
600 E LAFAYETTE  
DETROIT, MI 482262998  
(800)282-4548

REMITTANCE  
ADVICE

TIMOTHY J TOBOLIC MD PLLC  
  
BYRON CENTER, MI 493156928

NPI #: 1982923660  
PAGE #: 1 of 2  
DATE: 2025-06-11  
EFT #: 742576343  
TAX ID #: 272620668

REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD		
NAME HIMES, MELISSA J						HIC	BQWM62582501	ACNT	6378LMD642			ICN	27251350226300710	ASG	Y	MOA
1306898036	0514	051425	11	1	99396	25		327.00	165.75	0.00	0.00	CO-144		12.44		153.31
												CO-45		161.25		
1306898036	0514	051425	11	1	G0447	XU		65.00	40.48	0.00	0.00	CO-144		3.04		37.44
												CO-45		24.52		
1306898036	0514	051425	11	1	G0136	33		65.00	30.36	30.36	0.00	CO-45		34.64		0.00
1306898036	0514	051425	11	1	G0442	XU		30.00	30.00	0.00	0.00	CO-144		2.25		27.75
1306898036	0514	051425	11	1	G0444	XU		29.45	0.00	0.00	0.00	PI-97		29.45		0.00
1306898036	0514	051425	11	1	81003			33.60	2.25	0.00	0.00	CO-45		31.35		2.25
1306898036	0514	051425	11	1	3075F			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	3078F			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	G8510			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	G9622			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	3008F			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	2001F			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	2000F			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	1000F			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	1159F			0.00	0.00	0.00	0.00					0.00
1306898036	0514	051425	11	1	1160F			0.00	0.00	0.00	0.00					0.00
PT RESP	30.36					CLAIM	TOTALS	550.05	268.84	30.36	0.00			298.94		220.75
ADJ TO TOTAL: PREV PD								INTEREST	0.00	LATE FILING CHARGE		0.00		NET		220.75
STATUS CODE 1: Processed as Primary																

NAME POSTMA, MATTHEW				HIC	KMT892619334	ACNT	6403LMD642		ICN	26251392137200710		ASG	Y	MOA	
1013940584	0515	051525	11	1	99214	25		219.00	143.12	0.00	0.00	CO-144		5.36	51.20
												CO-131		71.56	
												CO-45		75.88	
												PR-3		15.00	
1013940584	0515	051525	11	1	G0447	XU		65.00	40.48	0.00	0.00	CO-144		3.04	37.44
												CO-45		24.52	
1013940584	0515	051525	11	1	99401	25		65.00	61.25	0.00	0.00	CO-144		4.60	56.65
												CO-45		3.75	
1013940584	0515	051525	11	1	3008F			0.00	0.00	0.00	0.00				0.00
1013940584	0515	051525	11	1	2001F			0.00	0.00	0.00	0.00				0.00
1013940584	0515	051525	11	1	2000F			0.00	0.00	0.00	0.00				0.00
1013940584	0515	051525	11	1	1000F			0.00	0.00	0.00	0.00				0.00
1013940584	0515	051525	11	1	1159F			0.00	0.00	0.00	0.00				0.00
1013940584	0515	051525	11	1	1160F			0.00	0.00	0.00	0.00				0.00
PT RESP	15.00					CLAIM TOTALS		349.00	244.85	0.00	0.00			203.71	145.29
ADJ TO TOTAL: PREV PD						INTEREST		0.00		LATE FILING	CHARGE		0.00	NET	145.29
STATUS CODE 1: Processed as Primary															

NAME RAMIREZ, SARAH J	HIC WYO929017064	ACNT 6693LMD642	ICN 26251548515700710	ASG Y	MOA			
1013940584 0520 052025 11	1 99213	146.00	98.69	98.69	0.00	CO-45	47.31	0.00
1013940584 0520 052025 11	1 G8476	0.00	0.00	0.00	0.00			0.00
1013940584 0520 052025 11	1 G8420	0.00	0.00	0.00	0.00			0.00
1013940584 0520 052025 11	1 G8427	0.00	0.00	0.00	0.00			0.00
1013940584 0520 052025 11	1 3078F	0.00	0.00	0.00	0.00			0.00
1013940584 0520 052025 11	1 3074F	0.00	0.00	0.00	0.00			0.00
PT RESP 98.69	CLAIM TOTALS	146.00	98.69	98.69	0.00		47.31	0.00
ADJ TO TOTAL: PREV PD	INTEREST	0.00	LATE FILING	CHARGE	0.00	NET	0.00	
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
	3	1045.05	612.38	129.05	0.00	549.96	366.04	0.00	366.04

GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES  
CO-131 Claim specific negotiated discount.  
CO-144 Incentive adjustment, e.g. preferred product / service.  
CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.  
PI-97 Payment adjusted because the benefit for this service is included in the payment / allowance for another service / procedure that has already been adjudicated



BCBSM  
NPI #: 1982923660  
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PR-1 Deductible Amount  
PR-3 Co-payment Amount

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