

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 4
DATE: 2025-04-09
EFT #: 742049965
TAX ID #: 272620668

REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME FULLER, KENNETH L					HIC	RMH893342977	ACNT	5581LMD642		ICN	26250922664500710	ASG Y	MOA	
1013940584	0331	033125	11	1	99214	25		219.00	143.12	0.00	0.00	CO-144	5.36	36.20
												CO-203	71.56	
												CO-45	75.88	
												PR-3	30.00	
1013940584	0331	033125	11	1	97803			59.34	0.00	0.00	0.00	PR-167	59.34	0.00
1013940584	0331	033125	11	1	G0447	XU		0.00	0.00	0.00	0.00			0.00
1013940584	0331	033125	11	1	99401	33		0.00	0.00	0.00	0.00			0.00
1013940584	0331	033125	11	1	G0446	XU		61.88	0.00	0.00	0.00	PR-204	61.88	0.00
1013940584	0331	033125	11	1	3008F			0.00	0.00	0.00	0.00			0.00
1013940584	0331	033125	11	1	2001F			0.00	0.00	0.00	0.00			0.00
1013940584	0331	033125	11	1	2000F			0.00	0.00	0.00	0.00			0.00
1013940584	0331	033125	11	1	1000F			0.00	0.00	0.00	0.00			0.00
1013940584	0331	033125	11	1	1159F			0.00	0.00	0.00	0.00			0.00
1013940584	0331	033125	11	1	1160F			0.00	0.00	0.00	0.00			0.00
PT RESP	151.22			CLAIM	TOTALS			340.22	143.12	0.00	0.00		304.02	36.20
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE			0.00	NET	36.20
STATUS CODE 1: Processed as Primary														

NAME HACKLEY, LEROY M				HIC MMJ914135142 ACNT 5550LMD642				ICN 26250922667600710 ASG Y				MOA			
INSURED NAME: HACKLEY, RENAE M															
1013940584	0328	032825	11	1	99395	25		297.00	155.93	0.00	0.00	CO-144	11.70	144.23	
												CO-45	141.07		
1013940584	0328	032825	11	1	96127	XU		40.00	7.46	0.00	0.00	CO-144	0.56	6.90	
												CO-45	32.54		
1013940584	0328	032825	11	1	96160	XU		10.00	4.79	0.00	0.00	CO-144	0.36	4.43	
												CO-45	5.21		
1013940584	0328	032825	11	1	G0136	33		34.80	0.00	0.00	0.00	PR-119	34.80	0.00	
1013940584	0328	032825	11	1	G8420			0.00	0.00	0.00	0.00			0.00	
1013940584	0328	032825	11	1	3074F			0.00	0.00	0.00	0.00			0.00	
1013940584	0328	032825	11	1	3078F			0.00	0.00	0.00	0.00			0.00	
1013940584	0328	032825	11	1	G9621			0.00	0.00	0.00	0.00			0.00	
1013940584	0328	032825	11	1	G8510			0.00	0.00	0.00	0.00			0.00	
PT RESP		34.80		CLAIM TOTALS				381.80	168.18	0.00	0.00		226.24	155.56	
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE				0.00	NET	155.56
STATUS CODE 1: Processed as Primary															

NAME SCHICHTEL, CASEY				HIC MMJ891962676 ACNT		5347LMD642		ICN 26250877035400710		ASG	Y	MOA	
1013940584	1217	121724	11	1	99396	25	327.00	165.75	0.00	0.00	CO-144	12.44	153.31
											CO-45	161.25	
1013940584	1217	121724	11	1	36415		15.00	5.00	0.00	0.00	CO-144	0.38	4.62
											CO-45	10.00	
1013940584	1217	121724	11	1	93000		71.00	18.06	0.00	0.00	CO-144	1.35	16.71
											CO-45	52.94	
1013940584	1217	121724	11	1	81003		33.60	2.25	0.00	0.00	CO-45	31.35	2.25
1013940584	1217	121724	11	1	96127	XU	40.00	7.46	0.00	0.00	CO-144	0.56	6.90
											CO-45	32.54	
1013940584	1217	121724	11	1	96160	XU	5.30	4.79	0.00	0.00	CO-144	0.36	4.43
											CO-45	0.51	
1013940584	1217	121724	11	1	G9622		0.00	0.00	0.00	0.00			0.00
1013940584	1217	121724	11	1	G8510		0.00	0.00	0.00	0.00			0.00
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			491.90	203.31	0.00	0.00		303.68	188.22
ADJ TO TOTAL: PREV PD				INTEREST			0.00	LATE FILING CHARGE			0.00	NET	188.22
STATUS CODE 1: Processed as Primary													



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EFT #:	742049965	PAGE #: 2 of 4	DATE: 2025-04-09

REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME MOORE, KARI L				HIC WYO916620136 ACNT 5559LMD642				ICN 26250922666600710 ASG Y				MOA		
INSURED NAME: MOORE, BRADLEY J														
1013940584	1004	100424	11	1	90656			35.00	21.12	0.00	0.00	CO-45	13.88	21.12
1013940584	1004	100424	11	1	90471			41.00	33.29	0.00	0.00	CO-144	2.50	30.79
												CO-45	7.71	
PT RESP		0.00		CLAIM TOTALS				76.00	54.41	0.00	0.00		24.09	51.91
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE		0.00		NET	51.91
STATUS CODE 1: Processed as Primary														

NAME MOORE, KARI L				HIC WYO916620136 ACNT 5564LMD642				ICN 26250926324300710 ASG Y MOA							
INSURED NAME: MOORE, BRADLEY J															
1013940584	0331	033125	11	1	99395 25			297.00	155.93	0.00	0.00	CO-144	11.70	144.23	
												CO-45	141.07		
1013940584	0331	033125	11	1	G0136 33			34.80	0.00	0.00	0.00	PR-119	34.80	0.00	
1013940584	0331	033125	11	1	97803			59.34	0.00	0.00	0.00	PR-167	59.34	0.00	
1013940584	0331	033125	11	1	99214 25			219.00	143.12	0.00	0.00	CO-144	5.36	36.20	
					REM: N172							CO-203	71.56		
												CO-45	75.88		
												PR-3	30.00		
1013940584	0331	033125	11	1	36415			20.00	5.00	0.00	0.00	CO-144	0.38	4.62	
												CO-45	15.00		
1013940584	0331	033125	11	1	G0447 XU			0.00	0.00	0.00	0.00			0.00	
1013940584	0331	033125	11	1	99401 33			0.00	0.00	0.00	0.00			0.00	
1013940584	0331	033125	11	1	96127 XU			40.00	7.46	0.00	0.00	CO-144	0.56	6.90	
												CO-45	32.54		
1013940584	0331	033125	11	1	96160 XU			10.00	4.79	0.00	0.00	CO-144	0.36	4.43	
												CO-45	5.21		
1013940584	0331	033125	11	1	G8417			0.00	0.00	0.00	0.00			0.00	
1013940584	0331	033125	11	1	3074F			0.00	0.00	0.00	0.00			0.00	
1013940584	0331	033125	11	1	3078F			0.00	0.00	0.00	0.00			0.00	
1013940584	0331	033125	11	1	G8510			0.00	0.00	0.00	0.00			0.00	
1013940584	0331	033125	11	1	G9622			0.00	0.00	0.00	0.00			0.00	
PT RESP	124.14	CLAIM TOTALS						680.14	316.30	0.00	0.00		483.76	196.38	
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE				0.00	NET	196.38
STATUS CODE 1: Processed as Primary															

NAME IRWIN, CYRUS B				HIC KCWM66241714 ACNT 5601LMD642				ICN 26250932234500710 ASG Y MOA							
INSURED NAME: IRWIN, CARRIE B															
1013940584	0401	040125	11	1	99385 25			341.00	172.90	0.00	0.00	CO-144	12.96	159.94	
												CO-45	168.10		
1013940584	0401	040125	11	1	G0136 33			34.80	0.00	0.00	0.00	PR-119	34.80	0.00	
1013940584	0401	040125	11	1	96127 XU			40.00	7.46	0.00	0.00	CO-144	0.56	6.90	
												CO-45	32.54		
1013940584	0401	040125	11	1	96160 XU			5.30	4.79	0.00	0.00	CO-144	0.36	4.43	
												CO-45	0.51		
1013940584	0401	040125	11	1	G8420			0.00	0.00	0.00	0.00			0.00	
1013940584	0401	040125	11	1	3074F			0.00	0.00	0.00	0.00			0.00	
1013940584	0401	040125	11	1	3078F			0.00	0.00	0.00	0.00			0.00	
1013940584	0401	040125	11	1	G9621			0.00	0.00	0.00	0.00			0.00	
1013940584	0401	040125	11	1	G8510			0.00	0.00	0.00	0.00			0.00	
1013940584	0401	040125	11	1	3074F			0.00	0.00	0.00	0.00			0.00	
1013940584	0401	040125	11	1	3079F			0.00	0.00	0.00	0.00			0.00	
PT RESP	34.80		CLAIM TOTALS				421.10	185.15	0.00	0.00		249.83	171.27		
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE				0.00	NET	171.27
STATUS CODE 1: Processed as Primary															

NAME PECK, BRAYDEN J				HIC RGI891510017 ACNT 5569LMD642				ICN 26250922663000710 ASG Y MOA						
INSURED NAME: PECK, FREDERICK M														
1306898036	0331	033125	11	1	99213			146.00	98.69	0.00	0.00	CO-144	7.40	66.29
												CO-45	47.31	
												PR-3	25.00	
1306898036	0331	033125	11	1	3008F			0.00	0.00	0.00	0.00			0.00
1306898036	0331	033125	11	1	2001F			0.00	0.00	0.00	0.00			0.00
1306898036	0331	033125	11	1	2000F			0.00	0.00	0.00	0.00			0.00
1306898036	0331	033125	11	1	1000F			0.00	0.00	0.00	0.00			0.00
1306898036	0331	033125	11	1	1159F			0.00	0.00	0.00	0.00			0.00
1306898036	0331	033125	11	1	1160F			0.00	0.00	0.00	0.00			0.00
1306898036	0331	033125	11	1	3074F			0.00	0.00	0.00	0.00			0.00
1306898036	0331	033125	11	1	3078F			0.00	0.00	0.00	0.00			0.00
PT RESP	25.00			CLAIM TOTALS				146.00	98.69	0.00	0.00		79.71	66.29
ADJ TO TOTAL: PREV PD				INTEREST				0.00	LATE FILING CHARGE		0.00	NET		66.29
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REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME TUREK, ERIK						HIC	MJE921837983	ACNT	5589	LMD642		ICN 26250937266100710	ASG Y	MOA
1306898036	0401	040125	11	1	99396	25			327.00	165.75	0.00	0.00	CO-144	153.31
													CO-45	161.25
1306898036	0401	040125	11	1	G0136	33			34.80	0.00	0.00	0.00	PR-119	0.00
1306898036	0401	040125	11	1	G0447	XU			65.00	40.48	0.00	0.00	CO-144	37.44
													CO-45	24.52
1306898036	0401	040125	11	1	99401	33			65.00	61.25	0.00	0.00	CO-144	56.65
													CO-45	3.75
1306898036	0401	040125	11	1	36415				20.00	5.00	0.00	0.00	CO-144	4.62
													CO-45	15.00
1306898036	0401	040125	11	1	96127	XU			40.00	7.46	0.00	0.00	CO-144	6.90
													CO-45	32.54
1306898036	0401	040125	11	1	96160	XU			5.30	4.79	0.00	0.00	CO-144	4.43
													CO-45	0.51
1306898036	0401	040125	11	1	3074F				0.00	0.00	0.00	0.00		0.00
1306898036	0401	040125	11	1	G9622				0.00	0.00	0.00	0.00		0.00
1306898036	0401	040125	11	1	G8510				0.00	0.00	0.00	0.00		0.00
PT RESP	34.80					CLAIM TOTALS			557.10	284.73	0.00	0.00		263.35
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	263.35
STATUS CODE 1: Processed as Primary														

NAME URTON, TARA L						HIC	MJE921839531	ACNT	5570	LMD642		ICN 26250922662300710	ASG Y	MOA
1306898036	0331	033125	11	1	99213				146.00	98.69	0.00	0.00	CO-144	66.29
													CO-45	47.31
													PR-3	25.00
1306898036	0331	033125	11	1	3074F				0.00	0.00	0.00	0.00		0.00
1306898036	0331	033125	11	1	3078F				0.00	0.00	0.00	0.00		0.00
1306898036	0331	033125	11	1	3008F				0.00	0.00	0.00	0.00		0.00
1306898036	0331	033125	11	1	2001F				0.00	0.00	0.00	0.00		0.00
1306898036	0331	033125	11	1	2000F				0.00	0.00	0.00	0.00		0.00
1306898036	0331	033125	11	1	1000F				0.00	0.00	0.00	0.00		0.00
1306898036	0331	033125	11	1	1159F				0.00	0.00	0.00	0.00		0.00
1306898036	0331	033125	11	1	1160F				0.00	0.00	0.00	0.00		0.00
PT RESP	25.00					CLAIM TOTALS			146.00	98.69	0.00	0.00		66.29
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	66.29
STATUS CODE 1: Processed as Primary														

NAME HILLS, CHERYL A						HIC	BQWM67631221	ACNT	5504	LMD642		ICN 26250909528100710	ASG Y	MOA
1013940584	0327	032725	11	1	99213	25			146.00	98.69	0.00	19.74	CO-144	71.55
													CO-45	47.31
1013940584	0327	032725	11	1	99459				40.00	36.22	0.00	0.00	CO-144	33.51
													CO-45	3.78
1013940584	0327	032725	11	1	Q0091	59			40.00	0.00	0.00	0.00	PI-97	0.00
1013940584	0327	032725	11	1	3077F				0.00	0.00	0.00	0.00		0.00
1013940584	0327	032725	11	1	3078F				0.00	0.00	0.00	0.00		0.00
1013940584	0327	032725	11	1	3008F				0.00	0.00	0.00	0.00		0.00
1013940584	0327	032725	11	1	2001F				0.00	0.00	0.00	0.00		0.00
1013940584	0327	032725	11	1	2000F				0.00	0.00	0.00	0.00		0.00
1013940584	0327	032725	11	1	1000F				0.00	0.00	0.00	0.00		0.00
1013940584	0327	032725	11	1	1159F				0.00	0.00	0.00	0.00		0.00
1013940584	0327	032725	11	1	1160F				0.00	0.00	0.00	0.00		0.00
PT RESP	19.74					CLAIM TOTALS			226.00	134.91	0.00	19.74		105.06
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	105.06
STATUS CODE 1: Processed as Primary														

NAME BUSBEE, RANDALL W						HIC	KMT890446051	ACNT	5440	LMD642		ICN 26250851636700710	ASG Y	MOA
1306898036	0324	032425	11	1	99213	25			146.00	98.69	49.35	0.00	CO-131	0.00
													CO-45	49.34
													CO-45	47.31
1306898036	0324	032425	11	1	36415				20.00	5.00	5.00	0.00	CO-45	0.00
1306898036	0324	032425	11	1	82043	QW			14.70	4.34	1.28	0.46	CO-45	2.60
1306898036	0324	032425	11	1	82570	QW			17.85	3.89	3.89	0.00	CO-45	0.00
1306898036	0324	032425	11	1	G0447	XU			0.00	0.00	0.00	0.00		0.00
1306898036	0324	032425	11	1	99401	33			0.00	0.00	0.00	0.00		0.00
1306898036	0324	032425	11	1	G0446	XU			61.88	40.48	40.48	0.00	CO-45	0.00
1306898036	0324	032425	11	1	3075F				0.00	0.00	0.00	0.00		0.00
1306898036	0324	032425	11	1	3078F				0.00	0.00	0.00	0.00		0.00
1306898036	0324	032425	11	1	1036F				0.00	0.00	0.00	0.00		0.00
1306898036	0324	032425	11	1	3061F				0.00	0.00	0.00	0.00		0.00
PT RESP	100.46					CLAIM TOTALS			260.43	152.40	100.00	0.46		2.60
ADJ TO TOTAL: PREV PD						INTEREST			0.00				0.00	2.60
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
	11	3726.69	1839.89	100.00	20.20	2303.36	1303.13	0.00	1303.13



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GLOSSARY : GROUP, REASON, MOA, REMARK AND REASON CODES			
CO-131	Claim specific negotiated discount.		
CO-144	Incentive adjustment, e.g. preferred product / service.		
CO-203	Discontinued or reduced service.		
CO-45	Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.		
N172	The patient is not liable for the denied / adjusted charge(s) for receiving any updated service / item.		
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		
PR-1	Deductible Amount		
PR-119	Benefit maximum for this time period or occurrence has been reached.		
PR-167	This (these) diagnosis(es) is (are) not covered.		
PR-2	Coinsurance Amount		
PR-204	This service / equipment / drug is not covered under the patient's current benefit plan		
PR-3	Co-payment Amount		