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

TIMOTHY J. TOBOLIC, MD, PLLC STE 202 7740 BYRON CENTER AVE SW BYRON CENTER, MI 49315 NPI #: 1982923660
PAGE #: 1 of 1
DATE: 2025-05-06
EFT #: 664820708
TAX ID #: 272620668

REND PROV	SERV DATE	POS	NOS PRO	C MODS		BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AM		PROV PD
NAME EUWEM	A, PETER		HIC 2129	1846	ACNT	5817LMD64	.2	ICN 2	5106123499	ASG :	Z MOA	
1013940584	0414 04142	5 11	99213	25		171.26	74.71	74.71	0.00	CO-45	96.55	0.00
1013940584	0414 04142	5 11	1159F			0.00	0.00	0.00	0.00			0.00
1013940584	0414 04142	5 11	1160F			0.00	0.00	0.00	0.00			0.00
1013940584	0414 04142	5 11	G0446	XU		65.00	28.27	0.00	0.00	CO-45	36.73	28.27
1013940584	0414 04142	5 11	17003	RT		101.20	31.40	31.40	0.00	CO-45	69.80	0.00
1013940584	0414 04142	5 11	3074F			0.00	0.00	0.00	0.00			0.00
1013940584	0414 04142	5 11	3078F			0.00	0.00	0.00	0.00			0.00
1013940584	0414 04142	5 11	3008F			0.00	0.00	0.00	0.00			0.00
1013940584	0414 04142	5 11	2001F			0.00	0.00	0.00	0.00			0.00
1013940584	0414 04142	5 11	2000F			0.00	0.00	0.00	0.00			0.00
1013940584	0414 04142	5 11	1000F			0.00	0.00	0.00	0.00			0.00
PT RESP	106.11		CLAIM	TOTALS		337.46	134.38	106.11	0.00		203.08	28.27
ADJ TO TOT	AL: PREV PD			INTER	EST	0.00	LATE	FILING	CHARGE	0.00	NET	28.27

STATUS CODE 1: Processed as Primary

PROVIDER ADJ DETAILS: PLB REASON CODE FCN/OTHER IDENTIFIER HIC AMOUNT
Adjustment (CS) ZELIS TRANSACTION 0.70
FEE

TOTALS: PROV PD CHECK # OF BILLED ALLOWED DEDUCT COINS TOTAL PROV CLAIMS AMT AMT AMT AMT RC-AMT AMT ADJ AMT AMT 0.00 27.57 337.46 134.38 106.11 203.08 27.57 0.70

GLOSSARY: GROUP, REASON, MOA, REMARK AND REASON CODES

CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.

PR-1 Deductible Amount

