WPS GHA - MAC J8 MI PART B [] P.O. BOX 8939 MADISON, WI 53708 (866)234-7331

TIMOTHY J. TOBOLIC, MD, PLLC 7740 BYRON CENTER AVE SW STE 202 BYRON CENTER, MI 493156929

1982923660 NPI #: PAGE #: 1 of 1 DATE: 2025-05-05 NONPAY #: 393557121 TAX ID #: 272620668

REND PROV	SERV D	ATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AM	т	PROV PD
NAME MINE	R, EDWAR	D B		HIC	3RH1K	P7NJ12 AC	NT 6150LMD64	.2	ICN 1	L825122674	242 ASG	Y MOA	MA15
101394058	4 0502 0	50225	11	1	3075F		0.00	0.00	0.00	0.00			0.00
						REM: N517	MA130						
101394058	4 0502 0	50225	11	1	3078F		0.00	0.00	0.00	0.00			0.00
						REM: N517	MA130						
101394058	4 0502 0	50225	11	1	3008F		0.00	0.00	0.00	0.00			0.00
						REM: N517	MA130						
101394058	4 0502 0	50225	11	1	2001F		0.00	0.00	0.00	0.00			0.00
						REM: N517	MA130						
101394058	4 0502 0	50225	11	1	1000F		0.00	0.00	0.00	0.00			0.00
						REM: N517	MA130						
101394058	4 0502 0	50225	11	1	1159F		0.00	0.00	0.00	0.00			0.00
				_		REM: N517							
101394058	4 0502 0	50225	11	1	1160F		0.00	0.00	0.00	0.00			0.00
						REM: N517							
PT RESP	0.00)			CTATM	TOTALS	0.00	0.00	0.00	0.00		0.00	0.00
ADJ TO TO					5	INTEREST			FILING		0.00	NET	0.00
STATUS CO			d as	Pri	imarv	111111111111111111111111111111111111111	0.00		111110	OIII III OL	0.00		0.00
D11110D CO.	· · ·	ОССББС	u ub										
NAME WEIS	MHOT. 2	W		нтс	- 5MC7C	UOTH36 AC	NT 6095LMD64	.2	TCN 1	L825121689	080 ASG	V MOA	N382 MA130
101394058			11		G0136		65.00	0.00	0.00	0.00	CO-16	65.00	
101331030	1 011, 0	711/25		_	G0130	REM: N382		0.00	0.00	0.00	CO 10	05.00	0.00
101394058	4 0417 0	11725	11	1	36415	KEM. NJOZ	20.00	0.00	0.00	0.00	CO-16	20.00	0.00
101334036	1 041/ 0	741/23		_	30413	DEM. M202		0.00	0.00	0.00	CO-10	20.00	0.00
101204050	4 0417 0	41705	11	-	ann11	REM: N382		0 00	0 00	0 00	go 16	25 00	0 00
101394058	± 041/ 0	141/25	TT		G2211	DEM 11300	25.00	0.00	0.00	0.00	CO-16	25.00	0.00
101304050	4 0415 0	41805		-	G0 4 4 4	REM: N382		0 00	0 00	0.00	go 16	00 45	0.00
101394058	4 041/ 0	141/25	TT		G0444		29.45	0.00	0.00	0.00	CO-16	29.45	0.00
101304050	4 0415 0	41805		-	G0 4 4 0	REM: N382		0 00	0 00	0.00	go 16	20.00	0.00
101394058	± 041/ 0	141/25	TT		G0442	-	30.00	0.00	0.00	0.00	CO-16	30.00	0.00
		44505		_	~~	REM: N382					~~ 1.5	261 00	
101394058	4 041/ 0	141/25	TT		G0402		361.00	0.00	0.00	0.00	CO-16	361.00	0.00
				_		REM: N382							
101394058	4 0417 0	141725	11	1	0513F		0.00	0.00	0.00	0.00			0.00
				_		REM: N382							
101394058	4 0417 0	41725	11	1	G8417		0.00	0.00	0.00	0.00			0.00
						REM: N382							
101394058	4 0417 0	41725	11	1	3078F		0.00	0.00	0.00	0.00			0.00
						REM: N382							
101394058	4 0417 0	41725	11	1	3075F		0.00	0.00	0.00	0.00			0.00
						REM: N382	MA130						
101394058	4 0417 0	41725	11	1	G9621		0.00	0.00	0.00	0.00			0.00
						REM: N382	MA130						
101394058	4 0417 0	41725	11	1	2028F		0.00	0.00	0.00	0.00			0.00
						REM: N382	MA130						
101394058	4 0417 0	41725	11	1	G8510		0.00	0.00	0.00	0.00			0.00
						REM: N382	MA130						
PT RESP	0.00)			CLAIM	TOTALS	530.45	0.00	0.00	0.00		530.45	0.00
ADJ TO TO	TAL: PRE	V PD				INTEREST	0.00	LATE	FILING	CHARGE	0.00	NET	0.00
STATUS CO	DE 1: Pr	ocesse	ed as	Pri	imary								
TOTALS:	# OF	BI	LLED)	ALLO	WED D	EDUCT	COINS	TOTAL	PROV	PD P	ROV	CHECK
	CLAIMS	A	TM		AM	T .	AMT	AMT	RC-AMT	AMT	AD	J AMT	AMT
	_	_	20 4	_		0 00	0 00	0 00	E20		0.0	0 00	0 00

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

0.00

530.45

Claim / service lacks information which is needed for adjudication. Check Remittance Remark Codes for CO-16

details.

Your claim contains incomplete and / or invalid information, and no appeal rights are afforded because MA130 the claim is unprocessable. Please submit a new claim with the complete / correct information.

0.00

530.45

0.00

MA15 Alert: Your claim has been separated to expedite handling. You will receive a separate notice for the

other services reported.

N382 Missing / incomplete / invalid patient identifier.

N517 Resubmit a new claim with the requested information.



0.00