

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: 2025-07-07  
EFT #: 790163873  
TAX ID #: 272620668

REND	PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV	PD
NAME KITLER, DAVID W					HIC	X3L910052465	ACNT	6827LMD642		ICN	26251748200500710	ASG Y	MOA	
1013940584	0530	053025	11	1	99214	25		219.00	0.00	0.00	0.00	OA-18	219.00	0.00
1013940584	0530	053025	11	1	G2211			30.52	0.00	0.00	0.00	OA-18	30.52	0.00
1013940584	0530	053025	11	1	99406	33		23.00	0.00	0.00	0.00	CO-96	23.00	0.00
REM: N115														
1013940584	0530	053025	11	1	29580	50		114.00	86.69	0.00	0.00	CO-253	1.73	84.96
													CO-45	27.31
1013940584	0530	053025	11	1	0513F			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	G8417			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	G8427			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	3008F			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	2001F			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	2000F			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	1000F			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	1159F			0.00	0.00	0.00	0.00			
1013940584	0530	053025	11	1	1160F			0.00	0.00	0.00	0.00			
PT RESP	0.00			CLAIM		TOTALS		386.52	86.69	0.00	0.00		301.56	84.96
ADJ TO TOTAL: PREV PD								INTEREST	0.00	LATE FILING CHARGE		0.00	NET	84.96
STATUS CODE 1: Processed as Primary														
NAME KITLER, DAVID W					HIC	X3L910052465	ACNT	7110LMD642		ICN	27251764553000710	ASG Y	MOA	
1013940584	0613	061325	11	1	99214	25		219.00	0.00	0.00	0.00	OA-18	219.00	0.00
1013940584	0613	061325	11	1	29580	50		114.00	86.69	0.00	0.00	CO-253	1.73	84.96
													CO-45	27.31
1013940584	0613	061325	11	1	G2211			25.00	0.00	0.00	0.00	OA-18	25.00	0.00
1013940584	0613	061325	11	1	3008F			0.00	0.00	0.00	0.00			
1013940584	0613	061325	11	1	2001F			0.00	0.00	0.00	0.00			
1013940584	0613	061325	11	1	2000F			0.00	0.00	0.00	0.00			
1013940584	0613	061325	11	1	1000F			0.00	0.00	0.00	0.00			
1013940584	0613	061325	11	1	1159F			0.00	0.00	0.00	0.00			
1013940584	0613	061325	11	1	1160F			0.00	0.00	0.00	0.00			
1013940584	0613	061325	11	1	3074F			0.00	0.00	0.00	0.00			
1013940584	0613	061325	11	1	3078F			0.00	0.00	0.00	0.00			
PT RESP	0.00			CLAIM		TOTALS		358.00	86.69	0.00	0.00		273.04	84.96
ADJ TO TOTAL: PREV PD								INTEREST	0.00	LATE FILING CHARGE		0.00	NET	84.96
STATUS CODE 1: Processed as Primary														
NAME KITLER, DAVID W					HIC	X3L910052465	ACNT	7111LMD642		ICN	27251764553200710	ASG Y	MOA	
1013940584	0620	062025	11	1	99215	25		295.00	169.85	0.00	0.00	CO-253	3.40	166.45
													CO-45	125.15
1013940584	0620	062025	11	1	29580	50		114.00	86.69	0.00	0.00	CO-253	1.73	84.96
													CO-45	27.31
1013940584	0620	062025	11	1	G2211			25.00	15.26	0.00	0.00	CO-253	0.31	14.95
													CO-45	9.74
1013940584	0620	062025	11	1	3074F			0.00	0.00	0.00	0.00			
1013940584	0620	062025	11	1	3078F			0.00	0.00	0.00	0.00			
1013940584	0620	062025	11	1	3008F			0.00	0.00	0.00	0.00			
1013940584	0620	062025	11	1	2001F			0.00	0.00	0.00	0.00			
1013940584	0620	062025	11	1	2000F			0.00	0.00	0.00	0.00			
1013940584	0620	062025	11	1	1000F			0.00	0.00	0.00	0.00			
1013940584	0620	062025	11	1	1159F			0.00	0.00	0.00	0.00			
1013940584	0620	062025	11	1	1160F			0.00	0.00	0.00	0.00			
PT RESP	0.00			CLAIM		TOTALS		434.00	271.80	0.00	0.00		167.64	266.36
ADJ TO TOTAL: PREV PD								INTEREST	0.00	LATE FILING CHARGE		0.00	NET	266.36
STATUS CODE 1: Processed as Primary														



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REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME KITLER, DAVID W			HIC X3L910052465		ACNT	6829LMD642	ICN 27251786784300710			ASG Y	MOA	
1013940584	0516	051625	11	1	99214	25	219.00	0.00	0.00	0.00	OA-18	219.00 0.00
1013940584	0516	051625	11	1	G2211		25.00	0.00	0.00	0.00	OA-18	25.00 0.00
1013940584	0516	051625	11	1	29580	50	115.58	86.69	0.00	0.00	CO-253	1.73 84.96
											CO-45	28.89
1013940584	0516	051625	11	1	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0516	051625	11	1	0513F		0.00	0.00	0.00	0.00		0.00
1013940584	0516	051625	11	1	3078F		0.00	0.00	0.00	0.00		0.00
1013940584	0516	051625	11	1	3074F		0.00	0.00	0.00	0.00		0.00
PT RESP		0.00			CLAIM TOTALS		359.58	86.69	0.00	0.00		274.62 84.96
ADJ TO TOTAL: PREV PD							INTEREST	0.00	LATE FILING CHARGE		0.00	NET 84.96
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
	4	1538.10	531.87	0.00	0.00	1016.86	521.24	0.00	521.24

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

CO-253 Sequestration - reduction in federal spending

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

CO-96 Non-covered charge(s).

N115 This decision was based on a local medical review policy (LMRP) or Local Coverage Determination (LCD).An LMRP / LCD provides a guide to assist in determining whether a particular item or service is covered. A copy of this policy is available at <http://www.cms.hhs.gov/mcd>, or if you do not have web access, you may contact the contractor to request a copy of the LMRP / LCD.

OA-18 Duplicate claim / service.

