

HUMANA INC. []  
P.O. BOX 14601  
LEXINGTON, KY 405124601  
(000)000-0000  
APPS.HUMANA.COM/MARKETING/DOCUMENTS.ASP?FILE=2859948

REMITTANCE  
ADVICE

BYRON CENTER FAMILY MEDICINE [941242]  
7740 BYRON CENTER AVE SW STE 2  
BYRON CENTER, MI 49315

NPI #: 1982923660  
PAGE #: 1 of 1  
DATE: 2025-04-06  
EFT #: 156299900250407  
TAX ID #: 272620668

REND	PROV	SERV DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME BARTZ, JOANN M					HIC H46769308		ACNT 5485LMD642			ICN 820250920699904	ASG Y MOA	
INSURED NAME: BARTZ, JO ANN M												
1306898036	0326	032625	11	1	3060F		0.00	0.00	0.00	0.00		0.00
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	99213	25	171.26	85.63	0.00	0.00	CO-253 CO-45 PR-3	1.61 85.63 5.00
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	G2211		25.00	0.00	0.00	0.00	CO-B1	25.00
					REM: N20							
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	82043	QW	14.70	5.78	0.00	0.00	CO-253 CO-45	0.12 8.92
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	82570	QW	17.85	5.18	0.00	0.00	CO-253 CO-45	0.10 12.67
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	17000		122.10	62.59	0.00	0.00	CO-253 CO-45	1.25 59.51
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	2	17003		50.60	12.02	0.00	0.00	CO-253 CO-45	0.24 38.58
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	3075F		0.00	0.00	0.00	0.00		0.00
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	3078F		0.00	0.00	0.00	0.00		0.00
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	G8420		0.00	0.00	0.00	0.00		0.00
					HCPI: RECONSIDERATION							
1306898036	0326	032625	11	1	1036F		0.00	0.00	0.00	0.00		0.00
					HCPI: RECONSIDERATION							
PT RESP	5.00				CLAIM TOTALS		401.51	171.20	0.00	0.00	238.63	162.88
ADJ TO TOTAL: PREV PD					INTEREST		0.00		LATE FILING CHARGE		0.00	NET 162.88
PLAN TYPE: MEDICARE ADVANTAGE PPO												
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
	1	401.51	171.20	0.00	0.00	238.63	162.88	0.00	162.88

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-B1 Non-covered visits.  
N20 Service not payable with other service rendered on the same date.  
PR-3 Co-payment Amount

