

PRIORITY HEALTH []
 1231 E. BELTLINE NE
 GRAND RAPIDS, MI 49525
 (000)000-0000

REMITTANCE
 ADVICE

TIMOTHY J TOBOLIC MD PLLC [900068405]
 7740 BYRON CENTER AVE SW

BYRON CENTER, MI 49315

NPI #: 1982923660
 PAGE #: 1 of 1
 DATE: 2025-08-21
 EFT #: 25215B1000349034
 TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME ESPARZA, ISAIAS			HIC 94976650800	ACNT 7733LMD642		ICN 456318365000	ASG Y	MOA			
1013940584	0617	061725	1 99213 25			146.00	108.22	0.00	0.00	CO-45 PR-3	37.78 20.00 88.22
1013940584	0617	061725	1 3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0617	061725	1 3079F			0.00	0.00	0.00	0.00		0.00
1013940584	0617	061725	1 3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0617	061725	1 2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0617	061725	1 2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0617	061725	1 1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0617	061725	1 1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0617	061725	1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	20.00		CLAIM TOTALS			146.00	108.22	0.00	0.00		57.78 88.22
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET 88.22
STATUS CODE 1: Processed as Primary											

NAME ESPARZA, ISAIAS			HIC 94976650800	ACNT 7734LMD642		ICN 456318365300	ASG Y	MOA			
1013940584	0730	073025	1 99212			87.00	67.39	0.00	0.00	CO-45 PR-3	19.61 20.00 47.39
1013940584	0730	073025	1 3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0730	073025	1 2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0730	073025	1 2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0730	073025	1 1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0730	073025	1 1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0730	073025	1 1160F			0.00	0.00	0.00	0.00		0.00
1013940584	0730	073025	1 3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0730	073025	1 3079F			0.00	0.00	0.00	0.00		0.00
PT RESP	20.00		CLAIM TOTALS			87.00	67.39	0.00	0.00		39.61 47.39
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET 47.39
STATUS CODE 1: Processed as Primary											

NAME KOTMAN, BETHANY			HIC 94976597900	ACNT 7746LMD642		ICN 456384243500	ASG Y	MOA			
1013940584	0801	080125	1 99214 25			146.00	146.00	0.00	0.00	PR-3	20.00 126.00
1013940584	0801	080125	1 20610			155.00	0.00	0.00	0.00	CO-4	155.00 0.00
1013940584	0801	080125	60 J1010			60.00	7.20	0.00	0.00	CO-45	52.80 7.20
1013940584	0801	080125	1 3074F			0.00	0.00	0.00	0.00		0.00
1013940584	0801	080125	1 3078F			0.00	0.00	0.00	0.00		0.00
1013940584	0801	080125	1 3008F			0.00	0.00	0.00	0.00		0.00
1013940584	0801	080125	1 2001F			0.00	0.00	0.00	0.00		0.00
1013940584	0801	080125	1 2000F			0.00	0.00	0.00	0.00		0.00
1013940584	0801	080125	1 1000F			0.00	0.00	0.00	0.00		0.00
1013940584	0801	080125	1 1159F			0.00	0.00	0.00	0.00		0.00
1013940584	0801	080125	1 1160F			0.00	0.00	0.00	0.00		0.00
PT RESP	20.00		CLAIM TOTALS			361.00	153.20	0.00	0.00		227.80 133.20
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET 133.20
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
	3	594.00	328.81	0.00	0.00	325.19	268.81	0.00	268.81

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

CO-4 The procedure code is inconsistent with the modifier used or a required modifier is missing.
 CO-45 Charge exceeds fee schedule / maximum allowable or contracted / legislated fee arrangement.
 PR-3 Co-payment Amount

