(000)000-0000

TIMOTHY J TOBOLIC MD PLLC [900068405]

7740 BYRON CENTER AVE SW

BYRON CENTER, MI 49315

NPI #: 1982923660 PAGE #: 1 of 1 DATE: 2025-05-01

EFT #: 25117B1000327779

REMITTANCE

ADVICE

272620668 TAX ID #:

REND PROV	SERV DATE	POS NO	S PROC	MODS		BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-A	MT	PROV PD
NAME LANDIS, CHRISTOPHER HIC 94958102700 ACNT					ACNT	5960LMD6	LMD642 ICN 4444			471429500 ASG Y MOA		
INSURED NA	ME: LANDIS	, CHRIS										
1306898036	0421 0421	25	1 99213	25		146.00	108.22	108.22	0.00	CO-45	37.78	0.00
1306898036	0421 0421	25	1 82043	QW		14.70	6.00	6.00	0.00	CO-45	8.70	0.00
1306898036	0421 0421	25	1 82570	QW		17.85	5.65	5.65	0.00	CO-45	12.20	0.00
1306898036	0421 0421	25	1 G0447	XU		65.00	31.26	0.00	0.00	CO-45	33.74	31.26
1306898036	0421 0421	25	1 99401	25		65.00	54.70	0.00	0.00	CO-45	10.30	54.70
1306898036	0421 0421	25	1 G0446	XU		65.00	31.26	0.00	0.00	CO-45	33.74	31.26
1306898036	0421 0421	25	1 3061F			0.00	0.00	0.00	0.00			0.00
1306898036	0421 0421	25	1 3008F			0.00	0.00	0.00	0.00			0.00
1306898036	0421 0421	25	1 2001F			0.00	0.00	0.00	0.00			0.00
1306898036	0421 0421	25	1 2000F			0.00	0.00	0.00	0.00			0.00
1306898036	0421 0421	25	1 1000F			0.00	0.00	0.00	0.00			0.00
1306898036	0421 0421	25	1 1159F			0.00	0.00	0.00	0.00			0.00
1306898036	0421 0421	25	1 1160F			0.00	0.00	0.00	0.00			0.00
PT RESP	119.87		CLAIM	TOTALS		373.55	237.09	119.87	0.00		136.46	117.22
ADJ TO TOT	AL: PREV P	D		INTER	EST	0.00	LATE	FILING	CHARGE	0.00	NET	117.22
STATUS COD	E 1: Proce	ssed as P	rimary									
TOTALS:	# OF	BILLED	ALLC	WED	DED	UCT	COINS	TOTAL	PROV P	D D	PROV	CHECK
	CLAIMS	AMT	AM	ſΤ	AM'	r	AMT	RC-AMT	AMT	A	DJ AMT	AMT
	1	373.55	23	37.09	11:	9.87	0.00	136.4	117.	22	0.00	117.22

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

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

Deductible Amount CO-45

PR-1

