

MUTUAL OF OMAHA COMPANIES CLAIMS DEPARTMENT []  
3300 MUTUAL OF OMAHA PLZ  
OMAHA, NE 681751004  
(000)000-0000

REMITTANCE  
ADVICE

TIMOTHY J TOBOLIC MD PL [0006598733]  
STE 202  
7740 BYRON CENTER AVE  
BYRON CENTER, MI 49315

NPI #: 1982923660  
PAGE #: 1 of 1  
DATE: 2025-08-13  
EFT #: 721875566  
TAX ID #: 272620668

REND	PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD	
NAME MENACHER, JAMES B			HIC 78395892M		ACNT 7523LMD642	ICN 586310138500-007/20250807MIBAl173			ASG Y	MOA		
1013940584	0721	072125	11	G0439		361.00	0.00	0.00	0.00	OA-23	361.00	0.00
1013940584	0721	072125	11	99497	33	155.32	0.00	0.00	0.00	OA-23	155.32	0.00
1013940584	0721	072125	11	99214	25	219.00	24.17	0.00	0.00	OA-23	194.83	24.17
1013940584	0721	072125	11	82043	QW	14.70	0.00	0.00	0.00	OA-23	14.70	0.00
1013940584	0721	072125	11	82570	QW	17.85	0.00	0.00	0.00	OA-23	17.85	0.00
1013940584	0721	072125	11	G2211		25.00	3.05	0.00	0.00	OA-23	21.95	3.05
1013940584	0721	072125	11	93000		71.00	2.67	0.00	0.00	OA-23	68.33	2.67
PT RESP		0.00	CLAIM TOTALS			863.87	29.89	0.00	0.00		833.98	29.89
ADJ TO TOTAL: PREV PD						INTEREST	0.00	LATE FILING CHARGE		0.00	NET	29.89
STATUS CODE 2: Processed as Secondary												

PROVIDER ADJ DETAILS:	PLB REASON CODE	FCN/OTHER IDENTIFIER	HIC	AMOUNT
	Adjustment (CS)	ZELIS	TRANSACTION FEE	0.74

TOTALS:	# OF CLAIMS	BILLED AMT	ALLOWED AMT	DEDUCT AMT	COINS AMT	TOTAL RC-AMT	PROV PD AMT	PROV ADJ AMT	CHECK AMT
	1	863.87	29.89	0.00	0.00	833.98	29.15	0.74	29.15

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

OA-23 Payment adjusted due to the impact of prior payer(s) adjudication including payments and / or adjustments

