

# Estimate

3535 Southern Blvd.  
Kettering, OH 45429  
(555) 555-5555

Created On 2/20/2014  
Printed On

Patient Information	
Patient Name	Todd Meinershagen
Patient DOB	11/23/1972
MRN	TEST
Account #	
Patient Address1	1805 Countryland St.
Patient Address2	
Patient City	
Patient State	
Patient Zip	75034
Patient Phone	
Patient Type	OP
Patient Plan	
Patient Plan Description	
Date Of Service	10/1/2013 12:00 PM

Service Information					
Procedure Code	Revenue Code	Description	Units	Per Unit Charge	Total
	RCODE1	This Is The Description For 1	2	\$1.25	\$2.50
	RCODE2	This Is The Description For 2	3	\$2.50	\$7.50
Total:					\$10.00
Self Pay Discount:					-( \$246.00)
Estimated Patient Amount Due For Services:					\$256.00
Break Down Of Adjustments To The Estimate Amount Due					
Prior Unpaid Balance:					-
Adjusted Estimate Of Patient Amount Due:					\$256.00

Patient Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

The above estimate is based upon the scheduled or intended service or services that you will receive, an estimated cost of the service, and any insurance co-payments or deductibles that may be outstanding at the time that the service is rendered. Please understand that this is an estimate only and may change depending on the actual services rendered based upon the medical needs of the patient. Actual charges will not be entered until the service is completed.

Please contact your facility's registration department where you are having services rendered with any questions regarding this estimate.

Kettering Medical Center: (937) 395-8880

Kettering Medical Center - Sycamore: (937) 384-8774

Grandview Medical Center: (937) 723-3237

Southview Hospital: (937) 401-6215