



Send Correspondence to:  
P.O. BOX 31218  
Tampa FL 33631-3218



## Premium Bill

Premium Due Date: **06/30/2017**

Previous Balance	-\$302.08
Payments Applied	\$0.00
Current Charges	\$147.92
Adjustments	\$0.00
Total Due	-\$154.16

### STATEMENT FOR:

43253 (260) 017304432274



DOMINIC MONTELONGO  
107 N COOK ST APT 241  
PORTLAND, OR 97227-2030



Pay online by visiting [kp.org/premiumbill](http://kp.org/premiumbill). Use the 6-digit billing ID as the Online Bill Payment Account Number.



Pay by phone – 24 hours a day, 7 days a week. Call 1-844-524-7370.



Pay by mail – Send your payment along with the bottom portion of this bill.

Current Billing Period: **07/01/2017 TO 07/31/2017**

Policy/Contract ID: **73862715**

Payments Applied Since Last Bill	Payment Method	Amount

**SUB-TOTAL \$0.00**

Current Charges For	Coverage	Plan / Coverage Type	Total Premium	APTC*	Monthly Charges
D MONTELO	Dental	KP OR Dental 80H Single (18+)	\$25.92	\$0.00	\$25.92
D MONTELO	Health	KP OR Silver 2000/30/73% CSR Single (18+)	\$274.00	-\$152.00	\$122.00

\*APTC = Advanced Premium Tax Credit

**SUB-TOTAL \$147.92**

Northwest Region (OR, WA) Kaiser Foundation Health Plan of the Northwest; In Oregon and Washington, all plans are offered and underwritten by Kaiser Foundation Health Plan of the Northwest, 500 NE Multnomah St., Suite 100, Portland, OR 97232.

Detach the bottom portion of this bill and include it with your payment.



Bank Number	Bank Code	Billing Period	Billing ID
23000092702018	49	7	T09Q21
Due Date	Amount Due	Amount Enclosed	
06/30/2017	-\$154.16		

23000092702018 49 07 00154163 2

Make check payable to Kaiser Permanente.  
Write the 6-digit Billing ID on your check's memo line.

DOMINIC MONTELONGO  
107 N COOK ST APT 241  
PORTLAND, OR 97227

Kaiser Foundation Health Plan  
PO Box 60508  
City of Industry, CA 91716-0508

## How can I pay my premium bill?



Pay online at **kp.org/premiumbill** using our secure payment portal. To pay online you will need your kp.org user ID and password. If you do not have a user ID and password go to **kp.org/premiumbill** and click "register". Use the 6-digit billing ID found on the front of the bill as the Online Bill Payment Account Number.

When making your payment online sign up for autopay. It's a quick and easy way to make sure you never miss a payment.



Pay by phone – 24 hours a day, 7 days a week. Call 1-844-524-7370



Mail your payment.

1. Make check payable to Kaiser Permanente
2. On the memo line of the check write your 6-digit Billing ID number. It can be found on the front of this bill.
3. Detach the bottom portion of this bill and include it with your check in the envelope provided.

**Note: If you do not include the bottom portion of this bill it could delay processing of your payment.**

**Please do not send payments for medical services with your premium payment.**

## What is included in my premium bill?

- Monthly premium – cost of your Kaiser Permanente coverage from the first day through the last day of the month for you and all covered family members on your individual plan. (Refer to your *Membership Agreement or Evidence of Coverage* for more information).
- Adjustments – includes credits or debits, nonsufficient funds, and return payment fees.