

Patient Name: **Nikolai Schlegel**  
Guarantor Name: Nikolai Schlegel  
Guarantor Account #: 64327063  
Bill Date: 10/31/22

Page 1 of 2

**PHYSICIAN SERVICES BILL SUMMARY**

Previous Balance	\$ 30.40
New Charges	0.00
Payments/Adjustments	0.00
New Balance	\$ 30.40

**Payment Due**

Your Responsibility To Pay Is

**\$ 30.40**

Please Pay In Full By

**11/28/22**

Thank you for choosing Palo Alto Medical Foundation. The amount due represents your responsibility.

**Insurance Information On File**

Primary: No Primary Insurance  
Secondary: No Secondary Insurance

**Pay Online (Recommended)**

myhealthonline.sutterhealth.org or scan


Access Code:  
**GD4PX-3NH97**
**Set Up Automated Payment Plan**

myhealthonline.sutterhealth.org


**Pay By Phone (24/7)**

Call (877) 252-1777.


**Pay By Mail**

Send your check(s) only using the coupon below.


**Billing Help**

Call (877) 252-1777, Billing Representatives are available 7:00am - 5:00pm, Monday through Friday. When asked, please provide your account number, which is **64327063**.

**Financial Assistance**

Call (877) 252-1777. Please tell us if you cannot pay your bill in full and let us help you. Monthly payment plans and other financial assistance programs may be available for patients that meet certain financial criteria. To learn more, visit [www.sutterhealth.org/for-patients/financial-assistance](http://www.sutterhealth.org/for-patients/financial-assistance).


Please See Reverse Side for Account Detail.



If your insurance or address has changed,  
please update online or call (877) 252-1777.

Guarantor Account # **64327063**

Due Date **11/28/22**

Payment Due **\$ 30.40**

Amount I am paying **\$ [ ]**


Pay online at [myhealthonline.sutterhealth.org](http://myhealthonline.sutterhealth.org) or  
by phone at (877) 252-1777. We accept Visa,  
MasterCard, Discover, and American Express.

Make Checks Payable to:  
**Palo Alto Medical Foundation**  
PO Box 278420  
Sacramento, CA 95827-8420



Patient Name:

**Nikolai Schlegel**

Guarantor Name:

Nikolai Schlegel

Guarantor Account #:

64327063

Bill Date:

10/31/22

Page 2 of 2

**① Procedure/Monitoring****Date of Service** 08/19/22    **Provider:** Tracy Ngoc Huynh MD, CardiologyCharges \$ 38.00    Insurance Remarks

Patient Payments 0.00

Insurance Payments/Adjustments - 7.60

Amount You Will Need To Pay **\$ 30.40****Payment Due** **\$ 30.40**    **Please Pay In Full By 11/28/22****My Health Online**

Paying your bill is easy with Sutter Health's  
My Health Online. Sign up today!

Log in or enroll at [myhealthonline.sutterhealth.org](https://myhealthonline.sutterhealth.org)

With My Health Online, you can also:

- View the details of your bill
- Book appointments
- Email your doctor
- View your health records and lab results - and more!
- Pay as Guest: <https://myhealthonline.sutterhealth.org/mho/billing/guestpay>

or scan

Access Code:  
GD4PX-3NH97