

1000 Main St. Ossining, NY 10562

Joshua Jensen 1 Main St Phoenix, AZ 85012

Reference # 123456

Statement Date 02/06/2019
Statement ID 987654
Due Date UPON RECEIPT
Guarantor Name Joshua Jensen

Amount Due \$358.00



Questions?

Customer Care is available for assistance.

Call

(914) 200-3292

Monday-Friday 9am - 6:30pm EST



Pay Online

odfmc.youraccountcenter.com

QuickPay ID

01-123456

Account Statement

This bill represents the charge for your visit to Open Door Family Medical Centers. If you would like to speak to a Customer Service Representative, please call (914) 200-3292.

Other Information

Please let us know if the address on this statement is incorrect or your insurance information has changed by calling (914) 200-3292.

Representati	ive, please call (914) 200-3292.	by calling (914) 200-32	by calling (914) 200-3292.	
Date	Service Description	Charges	Payments/ Adjustments	Balance
	Account #: 291929 PATIENT: MARCIA JENSEN LOCATION: Sleepy Hollow Open Door CHARGES			
08/16/2017	PAST DUE - 99213 OFFICE VISIT. EST PT LEVEL 3	\$185.00		
	Total Charges Adjustments	\$185.00	-\$139.00	
	Amount Due			\$46.00
06/18/2018 06/18/2018	Account #: 317417 PATIENT: ALLISON JENSEN LOCATION: Sleepy Hollow Open Door CHARGES PAST DUE - 99213 OFFICE VISIT. EST PT LEVEL 3 PAST DUE - 90460 CHILD VFC ADMIN OF VACCINE PAST DUE - 90651 GARDASIL 9 (<19 YEARS)	\$185.00 \$45.00 \$1.00		
	PAST DUE - 99213 OFFICE VISIT. EST PT LEVEL 3 PAST DUE - 80061 LIPID PANEL. IN-HOUSE	\$185.00 \$12.00		
09/19/2018	PAST DUE - 36416 CAPILLARY BLOOD DRAW	\$10.00 \$7.00		
09/19/2018	PAST DUE - 83036 GLYCATED HEMOGLOBIN TEST Total Charges	\$7.00 \$445.00		
	Adjustments Amount Due		-\$319.00	\$126.00
				T
	Account #: 317244 PATIENT: JOAQUIN JENSEN LOCATION: Sleepy Hollow Open Door			
06/18/2018	CHARGES PAST DUE - 99392 PREV VISIT. EST. AGE 1-4	\$277.00		

06/18/2018	PAST DUE - 99392 PREV VISIT. EST. AGE 1-4	\$277.00
06/18/2018	PAST DUE - G0009 ADMN PNEUMOCOC VAC NO FEE SC	\$45.00
06/18/2018	PAST DUE - 90461 CHILD ADMIN OF VACCINE. EA ADDTL	\$42.00
06/18/2018	PAST DUE - 90670 PCV/PREVNAR 13 (PED<5YO)	\$17.85
06/18/2018	PAST DUE - 94760 PULSE OXIMETRY	\$5.00
06/18/2018	PAST DUE - 90634 HEP A VACC. PED/ADOL. 3 DOSE	\$1.00
06/18/2018	PAST DUE - 90648 HIB VACCINE. PRP-T. IM	\$1.00



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09/19/2018	continued from previous page PAST DUE - 99213 OFFICE VISIT. EST PT LEVEL 3 Total Charges Adjustments Amount Due	\$185.00 \$573.85	-\$435.85	\$138.00
10/19/2018 10/19/2018 10/19/2018 10/19/2018	PAST DUE - 99000 SPECIMEN HANDLING PAST DUE - 90471 IMMUNIZATION ADMIN PAST DUE - 36415 VENIPUNCT. ROUTINE PAST DUE - 36416 CAPILLARY BLOOD DRAW PAST DUE - 83036 GLYCATED HEMOGLOBIN TEST PAST DUE - 94760 PULSE OXIMETRY PAST DUE - 85018 HEMOGLOBIN Total Charges Patient Payments Adjustments	\$185.00 \$52.00 \$45.00 \$10.00 \$10.00 \$7.00 \$5.00 \$2.00 \$316.00	-\$25.00 -\$243.00	
	Amount Due		- - 13100	\$48.00

Detach Lower Portion and Return with Payment

Additional Payment Options

Pay on-line with a check, debit/credit, and HSA/FSA card using the below Payment ID.

Pay Online odfmc.youraccountcenter.com

QuickPay ID **01-123456**

Pay By Phone (914) 200-3292

Financial Assistance

You may qualify for financial assistance.

Visit odfmc.youraccountcenter.com or contact (914) 200-3292 for details.

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Please make checks payable to
Open Door Family Medical Centers

Open Door Family Medical Centers

PO Box 780548

Amount Due

Philadelphia, PA 19178-0548

\$358.00