



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 \$468.00



### 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.

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

**Amount Due \$468.00**

Date	Service Description	Charges	Payments/ Adjustments	Balance
<i>continued from previous page...</i>				
09/19/2018	PAST DUE - 99213 OFFICE VISIT. EST PT.. LEVEL 3	\$185.00		
	<b>Total Charges</b>	<b>\$573.85</b>		
	<i>Adjustments</i>		-\$435.85	
	<b>Amount Due</b>			<b>\$138.00</b>
<b>Account #: 291929</b>				
PATIENT: MARCIA JENSEN				
LOCATION: Ossining Open Door				
<b>CHARGES</b>				
10/19/2018	PAST DUE - 99213 OFFICE VISIT. EST PT.. LEVEL 3	\$185.00		
10/19/2018	PAST DUE - 99000 SPECIMEN HANDLING	\$52.00		
10/19/2018	PAST DUE - 90471 IMMUNIZATION ADMIN	\$45.00		
10/19/2018	PAST DUE - 36415 VENIPUNCT. ROUTINE	\$10.00		
10/19/2018	PAST DUE - 36416 CAPILLARY BLOOD DRAW	\$10.00		
10/19/2018	PAST DUE - 83036 GLYCATED HEMOGLOBIN TEST	\$7.00		
10/19/2018	PAST DUE - 94760 PULSE OXIMETRY	\$5.00		
10/19/2018	PAST DUE - 85018 HEMOGLOBIN	\$2.00		
	<b>Total Charges</b>	<b>\$316.00</b>		
	<i>Patient Payments</i>		-\$25.00	
	<i>Adjustments</i>		-\$243.00	
	<b>Amount Due</b>			<b>\$48.00</b>
<b>Account #: 317244</b>				
PATIENT: JOAQUIN JENSEN				
LOCATION: Ossining Open Door				
<b>CHARGES</b>				
10/19/2018	PAST DUE - G0008 ADMN FLU VAC	\$45.00		
10/19/2018	PAST DUE - 90686 LU (FLULAVAL IIV4 PF)	\$20.00		
	<b>Total Charges</b>	<b>\$65.00</b>		
	<i>Adjustments</i>		-\$34.00	
	<b>Amount Due</b>			<b>\$31.00</b>
<b>Account #: 317417</b>				
PATIENT: ALLISON JENSEN				
LOCATION: Ossining Open Door				
<b>CHARGES</b>				
10/19/2018	PAST DUE - G0008 ADMN FLU VAC	\$45.00		
10/19/2018	PAST DUE - 90686 LU (FLULAVAL IIV4 PF)	\$20.00		
	<b>Total Charges</b>	<b>\$65.00</b>		
	<i>Adjustments</i>		-\$34.00	
	<b>Amount Due</b>			<b>\$31.00</b>
<b>Account #: 317418</b>				
PATIENT: MARY JENSEN				
LOCATION: Ossining Open Door				
<b>CHARGES</b>				
10/19/2018	PAST DUE - 99213 OFFICE VISIT. EST PT.. LEVEL 3	\$185.00		
10/19/2018	PAST DUE - 99000 SPECIMEN HANDLING	\$52.00		
10/19/2018	PAST DUE - 90471 IMMUNIZATION ADMIN	\$45.00		
10/19/2018	PAST DUE - 36415 VENIPUNCT. ROUTINE	\$10.00		
10/19/2018	PAST DUE - 36416 CAPILLARY BLOOD DRAW	\$10.00		
10/19/2018	PAST DUE - 83036 GLYCATED HEMOGLOBIN TEST	\$7.00		
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	<b>Total Charges</b>	<b>\$316.00</b>		
	<i>Patient Payments</i>		-\$25.00	
	<i>Adjustments</i>		-\$243.00	
	<b>Amount Due</b>			<b>\$48.00</b>

\*\*\*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  
Philadelphia, PA 19178-0548