F1 - 3176 - 10z - #10 - 272 - 272 -



Pay Online: hshs.patientsimple.com

By Phone: (855) 555-1212 By Mail: REMIT TO ADDRESS

#### Financial Assistance / Itemized Statement

You may obtain an itemized bill upon request by calling (855) 555-1212.

Financial Assistance options are available, please contact us at (855) 555-1212. See reverse side of this page for additional information.

TYPE OF STATEMENT	GUARANTOR NAME	STATEMENT DATE	DUE DATE
MONTHLY STATEMENT		12/19/2016	01/18/2017

			PAYMENTS / ADJUSTMENTS		PATIENT
DATE	DESCRIPTION	CHARGES	PATIENT	INSURANCE	DUE
12/21/2015	, Account #:				
	Insurance Billed: GHP MANAGED CARE				
	OUTPT RECUR THERAPY: Rehab - O'Fallon	\$5,700.20			
11/06/2015	ADJ GHP MANAGED CARE			-\$2,376.79	
12/08/2015	ADJ GHP MANAGED CARE			-\$2,063.41	
04/14/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
05/11/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
06/15/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
07/14/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
08/15/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
09/15/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
10/12/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
11/11/2016	PAYMENT SELF PAY		-\$100.00		
11/14/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
12/14/2016	PAYMENT SELF PAY CREDIT CARD		-\$52.00		
	BALANCE DUE				\$692.00

# **IMPORTANT MESSAGE**

We have posted a payment to your account(s) in the amount of \$52.00, and it has reduced your balance to \$692.00. Your next installment is due on the 18th. If you miss your payment, your account might receive further contact, so it is important to make your payments timely. Manage your hospital billing information and make payments online at honchatbot.com.

# PLEASE PAY THIS AMOUNT

\$692.00

\*\*SEPARATE AND RETURN BOTTOM PORTION WITH YOUR PAYMENT\*\*



2112 South West Street | Lakewood, CO 80401

December 19, 2016

220	T1 - 3176 - 10z - #10 - 272 - 272 - 297

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Amount Due: \$692.00

ABC Hospital PO Box 6580 Lakewood, CO 60197-6580

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## UNDERSTANDING YOUR HOSPITAL BILL

Thank you for choosing ABC Hospital for your healthcare needs. We are dedicated to providing high quality healthcare within the communities that we serve. Our mission is "to reveal and embody Christ's healing love for all people through our high quality Franciscan health care ministry." We understand that billing is a complicated process that can leave you with many questions. Therefore, we want to answer some of the most commonly asked questions.

### **Health Insurance:**

Health insurance helps with many of the financial burdens of illness or injury, but it usually does not cover the entire bill. Each time you visit ABC Hospital, you will be asked to furnish us with your current insurance information, including any secondary insurance or Medicare supplemental insurance that you have. We can assist you by filing your claim with your insurance company, but you are ultimately responsible for your account. It is important for you to stay involved with your insurance company to ensure they pay your claim promptly and properly. You are expected to pay any deductible, co-pay and/or coinsurance amounts and any charges not covered under your insurance. If you have additional insurance information that has not been billed please contact us at (855) 555-1212

### **Payment Options:**

In order for ABC Hospital to have the financial resources to serve the community healthcare needs, payment in full is expected upon receipt of first statement. Payment options include: cash, check, money order, debit card, VISA, Discover, MasterCard and American Express. If you are unable to pay this balance in full, please call us at (855) 555-1212 A Patient Services Team representative can provide available payment options, including payment arrangements, financial assistance and charity care. Manage your hospital billing information and make payments online at honchatbot.com.

#### **Medicare Patients:**

To be compliant with billing regulations, ABC Hospital bills Medicare patients for non-covered medications you may have received as an Outpatient that Medicare considers to be self-administered, such as tablets, sprays, drops and inhalants. Please see your Medicare handbook for additional information or please contact us at (855) 555-1212

#### **Financial Assistance:**

Financial assistance and charity care are part of the services provided by ABC Hospital. For those unable to pay for the necessary medical services, every effort will be made to assist you in obtaining help from public agencies. Those who do qualify for public funding may be considered for charity care. Sources of income and a financial statement may be required to verify need. Any patient may apply. Please contact our Patient Services Team at the number listed on the front of this letter for assistance. We can only assist you in applying for financial assistance or establishing a payment arrangement if you contact us first.

To download a financial assistance application, please visit our website at ABC Hospital - honchatbot.com.

## **Other Professional Services:**

This statement represents only the hospital bill. Charges for pathologists, radiologists, anesthesiologists, emergency room physicians, oncologists, surgeons, cardiologists and/or consultants ordered by your physician will be billed separately.

A representative from our Patient Service Team is available to assist you with questions concerning your hospital bill. Please call **(855) 555-1212** between the hours of 8 a.m. to 8 p.m., Monday through Thursday, and 8 a.m to 5 p.m. on Friday.

You can also email us at Bruce@honchatbot.com.

CHANGE OF INSURANCE INFORMATION					
Insurance Provider Name					
Claim Address					
City	State Zip				
Subscriber Name					
Subscriber #	Group Number				
Group Name	Insurance Phone Number				

Internal Use Only				
	\$692.00			