Understanding Your New Billing Statement

We have redesigned your billing statement to make it easier for you to understand the services we provided and the amount you owe. With this new format, you will now be able to locate the information you need more quickly, making it easier to find the information that is most important to you.

We have added an Account Summary to provide a snapshot of your account, and we have reorganized and enhanced the detail page to better describe the services provided and the payments that have already been made.

Key to important information on the front side of your statement.

- 1 The amount we received from you over the past 30 days.
- 2 The amount you owe.
- 3 Important message about your account status.
- 4 Your insurance information according to our files.
- Where to pay your statement online.
- 6 Your Guthrie Medical Group Account Number.
- Our telephone numbers and office hours.
- Payment slip mail this with your payment if not using Online bill pay.
- The date your payment is due.
- Enter the amount you are paying here.



Guthrie Medical Group, P.C.



Guthrie Medical Group, P.C. One Guthrie Square Sayre, PA 18840-1699

Statement Date

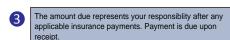
February 11, 2014

JOHN Q PUBLIC 123 MAIN ST ANYTOWN, NY 13899

Account Summary

Patient Name John Q Public
Patient Payments (Last 30 Days) \$ 0.00

Amount Due \$50.00 2



Dunning Level: 1 Acctstat:

4 Insurance Information on File

Please confirm this information is correct and if your insurance information has changed, please indicate your changes on the reverse side of the payment form.

Primary Insurance MEDICARE - ASSIGNED
Secondary Insurance EXCELLUS NON-MANAGE



Guthrie Medical Group, P.C.

Check here if your address or insurance has changed. Please indicate your changes on the reverse side of this page.

Make Checks Payable to:

GUTHRIE MEDICAL GROUP, P.C. ONE GUTHRIE SQUARE SAYRE, PA 18840-1699

Statement of Physician Services





Page 1

About Your Statement

Paying Your Bill: For your convenience, we have 3 options available.

- Online: Pay your bill online at www.guthrie.org/content/pay-my-bill.
- Mail in: Pay your bill by mailing your payment with the bottom portion of your bill in the enclosed envelope.
- Call in: Pay your bill over the phone by calling 800-836-9990.

Can't Pay Your Bill? Guthrie Health is proud of its mission to provide quality care to all who need it. If you do not have health insurance or worry that you may not be able to pay part or all of your care, we may be able to help. Guthrie Health provides financial aid to patients based on their income, assets, and financial needs. In addition, we may be able to help you get free or low-cost health insurance or work with you to arrange a manageable payment plan.

Billing Questions? Call 570-887-2600 or 800-836-9990
Monday - Friday, 8:00am - 5:00pm.

Get connected to your health record with section, request an appointment, ask your provider a question, view your medical history and more all from the comfort of your home, or on the go with our mobile app. Visit www.eguthrie.org to sign up.

Please See Reverse Side for Account Detail

_				
	Patient Name	Account Numb	per Date Due	
	JOHN Q PUBLIC	009999	Upon Receipt	9
	Amount Due		Amount Enclosed	
	\$50.00		\$	10

Pay your bill online at www.guthrie.org/content/pay-my-bill						
□ VISA □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □						
Card Number						
Expiration Date						
Signature						

Understanding Your New Billing Statement

Key to important information on the back side of your statement.

- Date you were seen by your provider.
- Provider that rendered your services.
- Services rendered and payments received.
- The charge for these services.
- The amount your insurance company paid.
- Contractual adjustments made by your insurance company.
- Amounts you have already paid.
- The amount you owe.
- Remarks about your insurance payments.
- Enter any address changes here.
- Enter any insurance changes here.



Statement Date 02/11/14
Account Number 009999
Patient Name John Q Public

11	12	13	14	15	16	17	18 Pag	ge 2
Date of Service	Provider	Description	Charge	Insurance Payments	Insurance Adjustments	Patient Payments	Amount You Owe	Remarks
01/20/14	INV #: 99999999 Marcus Welby MD	Office Visit Level3,Est.Pt 01/28/14 NY Medicare Payment 02/07/14 NY Central Blue Shield	\$ 138.00	\$ 0.00 \$ 20.15			\$ 50.00	A A
TOTAL			\$ 138.00	\$ 20.15	\$ 67.85		\$ 50.00	

(A) Amount Applied To Your Deductible/Coinsurance.

20	Address Change					Account Number 009999	
	Patient Name	Street Address	City	State	Zip Code	Telephone Number	
	Guarantor Name	Street Address	City	State	Zip Code	Telephone Number	
21	Insurance Change	Primary or Secondary (circle one)					

Subscriber ID Telephone Number

Subscriber Name Group Number

Insurance Company Name Group Name

Insurance Company Claim Address Coverage Effective Date

Guthrie Health is proud of its mission to provide quality care to all who need it. If you do not have health insurance or worry that you may not be able to pay part or all of your care, we may be able to help. Guthrie Health provides financial aid to patients based on their income, assets, and financial needs. In addition, we may be able to help you get free or low-cost health insurance or work with you to arrange a manageable payment plan.

Federal and state laws require all hospitals/clinics to seek payment for care provided. This means we could ultimately turn unpaid bills over to a collection agency, which could affect your credit status. Therefore, it is important that you let us know if there may be a problem paying your bill.

