

Total Balance \$405.00

Payment Options



Pay Online
ProvidenceOregon.org/paymybill



The easiest way to make payments, view your statement, contact customer service and schedule clinic appointments.



Pay by Phone - Customer Service
503-215-3030 or 1-866-747-2455
Para ayuda en Español, oprima el numero 1.
Monday - Friday: 8:00 a.m. - 7:00 p.m.



Pay by Mail
Complete the coupon below and return in the enclosed envelope.

OR-7

JOHN Q SAMPLE
1234 ANYSTREET
PRINCETON, NJ 08540-3222

Important Message

Thank you for choosing Providence. You are responsible for the amount listed by the "Total Balance." Payment is due within 20 days. Balances of \$500 or greater may qualify for a prompt pay discount if paid in full online or by phone.

Financial Assistance may be available to those who qualify. See reverse side for more information.

Summary

Guarantor: JOHN Q SAMPLE
Guarantor ID: 2123456

Total Charges	\$450.00
Total Payments & Adjustments	\$-45.00
Total Balance	\$405.00

Current Amount Due by 03/24/2017 \$405.00

Providence Health & Services and its Affiliates do not discriminate on the basis of race, color, national origin, sex, age, or disability in their health programs and activities.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-311-9127 (TTY: 711).

注意：如果您講中文，我們可以給您提供免費中文翻譯服務，請致電 888-311-9127 (TTY: 711)

Detach coupon and return with your payment. Include the Guarantor ID on the memo line of your check.

PAYMENT OPTIONS

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- Pay by Mail

MAKE CHECKS PAYABLE TO:
Providence Health & Services

Check box if your address has recently changed and complete the form on the back of this coupon.

CURRENT AMOUNT DUE	TOTAL BALANCE	PAYMENT AMOUNT
\$405.00	\$405.00	

Providence Health & Services
PO Box 3299
Portland, OR 97208-3299



Detailed Account Activity

Date	Description	Charges	Insurance Pmts/Adjs	Patient Pmts/Adjs	Patient Balance
Patient: John Q Sample Provider: Michael James Smith, MD		Acct: 570000123456 Location: Newberg Medical Center		Status: New Balance Department: Lab	
2/7/2017	Laboratory UNITED H Adjustments UNITED H Payments Deductible: 405.00 Totals	450.00 450.00	-45.00 0.00 -45.00	 0.00	 405.00
			Current Amount Due		\$405.00

