

500 Campus Dr. | Hancock, MI 49930 RETURN MAIL ADDRESS

Clinic Statement

For Billing Inquiries: (906) 483-1100

Office Hours: Mon - Fri 8am to 4:30pm EST

email: billing@portagehealth.org

Addressee

Page 1 of 1

Please make checks payable and remit to:

Amount Due Before

Due Date

01/03/19

IF PAYING BY CREDIT CARD, FILL OUT BELOW

EXP. DATE

portagehealth.mysecurebill.com

Amount Due After

\$8.04

Pay Your Bill:

SECURITY CODE

Amount Paid

CHECK CARD USING FOR PAYMENT

CARD NUMBER

SIGNATURE

Account Number

P12345

Statement Date

12/13/18

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հեկիկյյյլակիկիսիսկույլնակոյյվ<u>յանդիկյունիկ</u>ուր JANE DOE **1234 MAIN ST** ANYWHERE, MI 12345-1234

000000222010320190000008888800000804010123456

my⊑asywatch	code: TAA-AZZ-Z	2AB	PIE	ease detach and	return top portio	n with payment	
Account Number		Account Name	Statement Date		Due	Due Date	
P12345		Jane Doe	12/13/18		01/0	01/03/19	
Date	Provider	Service Description		Charges	Payments/ Adjustments	Patient Balance	

Date	Provider	Service Description	Charges	Payments/ Adjustments	Patient Balance
11/08/18 11/08/18 11/08/18 11/08/18 11/26/18 11/26/18 11/26/18	Mary Smith, PA	Patient: JANE DOE, Account Num: 12345 Claim:111222, Facility: PH Family Medicine-Orthopedics 99212 OFFICE VISIT EST BCBS TRUST Payment BCBS TRUST Adjustment Your Balance Due On These Services e is available through The Healthy Michigan Plan. If yfy. Visit www.mibridges.michigan.gov/access/ or call	\$85.00 pu are betwee	\$32.18 \$44.78 n the ages of	Balance \$8.04
IF YOU CA ASSISTAN OBTAIN A ASSISTAN POLICY AT PLEASE C HANCOCK	NNOT AFFORD CE UNDER UP COPY OF THE CE, AND A CO WWW.PORTA ALL 906-483-1 , MI 49930.	TO PAY YOUR PHYSICIAN BILL, YOU MAY BE ELIG HEALTH SYSTEM-PORTAGE FINANCIAL ASSISTANC FINANCIAL ASSISTANCE POLICY, A FORM TO APPL PY OF A PLAIN LANGUAGE SUMMARY OF THE FINA GEHEALTH.ORG FOR MORE INFORMATION ON FINA 100 OPTION 2 OR VISIT US AT OUR MAIN CAMPUS A s resulting in Non-sufficient Funds will be charged \$3	E POLICY. YO Y FOR FINAN NCIAL ASSIST NCIAL ASSIST T 500 CAMPU	DU CAN CIAL TANCE TANCE,	

MESSAGES

Thank you for using Portage Physician Practices. The balance on this statement is your responsibility.

Pay Your Bill Online: portagehealth.mysecurebill.com

AMOUNT DUE:

\$8.04