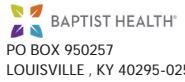


HOW TO READ YOUR BILL

- 1 Total amount due**
The total amount due is the total amount owed this payment cycle for all services received and billed through Baptist Health.
- 2 Amount enclosed**
Please enter the amount enclosed in this box.
- 3 Statement date**
The date this statement was generated by Baptist Health.
- 4 Guarantor number**
The guarantor number is the account number of the person financially responsible for this bill.
- 5 Patient name**
The name of the individual receiving the services detailed on this bill.
- 3 Statement date**
(See #3 as reference)
- 4 Guarantor number**
(See #4 as reference)
- 6 Account number**
This is the patient's account number and the name of the patient.
- 7 Date**
The date the services listed in the description were received.
- 8 Description of services**
This section describes the services received since the last statement.
- 9 Charges**
This column lists the amount(s) billed directly to the insurance company.
- 10 Insurance pmts/adjs**
This column lists insurance payments (amount paid by the insurance company) and adjustments (amount by which your bill has been reduced based on your insurance contract or plan, or by Baptist Health adjustments).
- 11 Patient pmts/adjs**
This column lists amounts previously paid by the patient toward services received at Baptist Health.
- 12 Balance due**
This is the total amount owed to Baptist Health for services.



BAPTIST HEALTH®
PO BOX 950257
LOUISVILLE, KY 40295-0257


MyChart
Access your MyChart account by going to:
mychart.baptisthealth.com

John Doe
4007 Kresge Way
Louisville, KY 40207

0000000032350000122651

Please Pay This Amount	Amount Enclosed
\$1,226.51	
Statement Date 07/29/19	Guarantor Number 3235

Thank you for Choosing Baptist Health!



Make Checks Payable / Remit To:
BAPTIST HEALTH
PO BOX 950257
LOUISVILLE KY 40295-0257

PLEASE DETACH AND RETURN THE PORTION ABOVE WITH YOUR PAYMENT

STATEMENT

Patient Name John Doe	Statement Date 07/29/19	Guarantor Number 3235
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Date	Description	Charges	Insurance Pmts/Adjs	Patient Pmts/Adjs	Patient Balance
Acct : #400002009480 John Doe's visit to Baptist Health Louisville					
05/22/19	PHARMACY - GENERAL CLASSIFICATION	321.90			
to	RAPY - GENERAL CLASSIFICATION	986.00			
05/24/19	MEDICAL/SURGICAL SUPPLIES & DEVICES (ALSO SEE 062X, AN EXTENSION OF 027X)-GENERAL CLASSIFICATION	2,385.60			
	LABORATORY - GENERAL CLASSIFICATION	1,983.55			
	RADIOLOGY - DIAGNOSTIC - GENERAL CLASSIFICATION	305.00			
	ANESTHESIA - GENERAL CLASSIFICATION	465.26			
	EMERGENCY ROOM - GENERAL CLASSIFICATION	1,834.86			
	CARDIOLOGY - GENERAL CLASSIFICATION	48,533.06			
	PHARMACY - EXTENSION OF 025X - SINGLE SOURCE	405.90			
	DRUG				
	RECOVERY ROOM - GENERAL CLASSIFICATION	4,686.04			
	ELECTROCARDIOGRAM (EKG/ECG) - GENERAL CLASSIFICATION	1,524.50			
	SPECIALTY SERVICES - GENERAL CLASSIFICATION	2,951.23			
	Anthem Blue Cross Payments		-16,040.49		
	Deductible: 806.51				
	Copay: 400.00				
	Anthem Blue Cross Adjustments		-49,135.90		
	Totals	66,382.90	-65,176.39	0.00	1,206.51
	Patient Balance				1,206.51
Acct : #400002009487 John Doe's visit to Baptist Health Louisville					
06/14/19	RADIOLOGY - DIAGNOSTIC - GENERAL CLASSIFICATION	1,151.00			
	Anthem Blue Cross Payments		-301.62		

For financial assistance, to pay by credit or debit card, or address and/or insurance changes please contact customer service at (866) 273-5392 Mon-Fri 8:00AM-5:30PM ET or access your MyChart account.

Insurance Pmts/Adjs	Patient Pmts/Adjs	Patient Balance	Balance Due
Copay: 40.00			
Anthem Blue Cross Adjustments			-809.38
PRE-PAYMENT - 07/25/19			-20.00
Totals	1,151.00	-1,111.00	20.00
Patient Balance			20.00
			Balance Due
			1,226.51