# Your Bill Explained

## Payment Options
Describes the options you have for making your payment in a way that's easiest for you.

## Custom Messaging
Helpful information based on your individual situation.

## Payment Coupon
Detach and pay by mail in supplied envelope.

## Visit Details
Each visit with one of our Renown locations that has a balance due will appear individually on the detail section of the statement. The following information is included for each:

### Visit Number
Each visit is assigned a unique number. Reference this number when speaking to a customer service representative.

### Provider
The person or entity who provided the services you received.

### Balance From New Activity
Total outstanding balance for a brand new visit appearing on the statement for the first time. This amount includes all activity from the past 30 days. Any unpaid portion of this balance due within the next 30 days will appear in the Balance from New Activity in the front page Account Summary.

### Total Charges
The sum of all new charges for services added to this visit in the last 30 days.

## Your Payments
Your activity over the past 30 days that reduced the amount you owe.

## Minimum Amount Due
This is the current amount of the total balance that must be paid in the next 30 days to avoid having your account move to Past Due status.

## Total Account Balance
The total amount owed for all outstanding services.

## Last Statement Balance
The Total Account Balance from your most recent statement prior to this one.

## Your Bill Explained

### A. Statement Date
Statement creation date. Information on the statement is only as recent as the statement date. Activity occurring after that date will not be reflected until the following statement.

### B. Previous Statement
If you were sent a statement prior to this one, its date will be shown here. If this is your first statement, this field will be blank.

### C. Account Number
This is your unique ID number for billing. Reference this number when speaking to a customer service representative.

### D. Responsible Party
The person responsible for paying the amount due. This is assigned at the time of your visit.

### E. Patient Name
The person who received services at one of our Renown locations.

## Account Summary

### Minimum Amount Due
Minimum amount due by 04/17/14 $28.95
Total account balance $206.07

- Your minimum amount due is made up of:
  - Contracted payment plan amount $30.00
  - Payment plan balance past due $30.00
  - Payments remaining on plan $15.00
  - Accounts not on plan $18.96

- Last statement balance $106.17
- Your Payments Since 2/18/2014 $-30.00

## Hospital/Physician/Clinic Summary

### Visit Details

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Charges</th>
<th>Insurance Payments</th>
<th>Your Payments</th>
<th>Your Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance From Prior Statement</td>
<td>$105.17</td>
<td>$50.00</td>
<td>$36.00</td>
<td>$19.17</td>
</tr>
<tr>
<td>Current Visit Balance</td>
<td>$838.30</td>
<td>$726.00</td>
<td>$50.00</td>
<td>$62.30</td>
</tr>
<tr>
<td>Balance From New Activity</td>
<td>$1333.33</td>
<td>$726.00</td>
<td>$50.00</td>
<td>$111.04</td>
</tr>
<tr>
<td>Total Charges</td>
<td>$426.00</td>
<td>$726.00</td>
<td>$50.00</td>
<td>$111.04</td>
</tr>
</tbody>
</table>

Total Account Balance: $206.07

### Dates of Activity
Days on which you were seen by our providers. Note that if you have insurance it may take some time for your visits to appear on your statement as we are waiting for your insurance to pay their portion of the balance.

- Balance From Prior Statement: 3/18/2014
- Current Visit Balance: 3/18/2014
- Balance From New Activity: 4/24/2013

### Insurance Payments
Any activity from your insurance towards the visit charges are listed in this column.