

Welcome to Your New Highland Hospital Statement

UR Medicine has simplified your hospital statement to make it easier to understand your health care services and charges. As we transition to a new billing system, please note – you'll continue to receive other UR Medicine statements in the old format. This guide highlights what's new:

Statement of Hospital Services

Account Summary
 Statement Date: 03/20/2017
 Account Number: 55
 Payments Since Last Statement: \$ 0.00
 Hospital Amount Due: \$ 1,247.80
 Professional Amount Due: \$ 0.00
Total Account Balance: \$ 1,247.80
 Minimum Amount Due: \$ 1,247.80

YOUR STATEMENT HAS A NEW LOOK!
 UR Medicine has simplified your billing statement to make it easier to understand and pay for your health care. Now all of your Highland Hospital care is combined on one statement. You'll continue to receive a separate bill for physician care. Watch for more useful changes this October. For details and a guide to reading your new statement, go to paybill.urmc.edu.

Insurance Information on File
 Please confirm the information below is correct. If your insurance information has changed, please indicate your changes on the reverse side of the payment form.
 Primary Insurance: Not on file
 Secondary Insurance: Not on file

Paying Your Bill: For your convenience, we have three (3) payment options available.
 • Online: Pay your bill online at paybill.urmc.edu.
 • Mail: Make your payment with the bottom portion of your bill in the enclosed envelope.
 • Call: Pay by phone at (888) 758-7650 or toll free (888) 925-4301.

Please pay your bill in full for \$1,247.80 by 04/10/17.

If you are insured and have out-of-pocket responsibility (deductible, coinsurance, copayment) that you cannot afford to pay in full, please contact us at the billing phone number below so we can work with you to arrange a manageable payment plan.

Billing Questions? Please call us at (888) 758-7650 or toll free at (888) 925-4301, 8:00am - 5:00pm Mon - Fri.

If you need Financial Assistance, UR Medicine (Strong Memorial Hospital, Highland Hospital, and UR Medicine Healthcare Professionals) has a Financial Assistance program for patients who are having difficulty paying for their medical bills. For more details on the program available please visit financialassistance.urmc.edu or contact us at (888) 758-7650 or toll free at (888) 925-4301.

Please See Reverse Side for Account Detail

please detach bottom portion and return with your payment in the enclosed envelope Page 1

UR MEDICINE
 601 Elmwood Ave, Box 888, Rochester, NY 14642

Thank You for Choosing UR Medicine
 Check here if your address or insurance has changed. Please indicate your changes on the reverse side of this page.

JOHN DOE
 98 TEST DRIVE
 ROCHESTER, NY 14623

To pay using your credit card
 Please visit our website at paybill.urmc.edu
 For your convenience, we accept Visa, Mastercard and Discover.

Account # 55 Amount Due by 04/10/17 Amount Paid
 \$5 \$1,247.80 \$

Make Check Payable and Mail to:
 UR Medicine
 P.O. Box 21093
 New York, NY 10087-1093

00000000552109320170320001247806

Statement of Hospital Services
 (As of 03/20/2017)

Account # 55 - John Doe

Date of Service	Provider	Description of Services	Charge	Insurance Payments	Adjustments	Patient Payments	Amount You Owe
03/01/17-03/01/17	Highland Hospital	Hospital Charges					
	Patient: John Doe	HAR # 40000015794					
		Medical/Surgical Supplies	\$154.00				
		Laboratory	\$64.00				
		Diagnostic Chest X-Ray	\$1,250.00				
		Self-Pay Discount			-\$220.20		
03/02/17							\$1,247.80
TOTAL			\$1,468.00	\$0.00	-\$220.20	\$0.00	\$1,247.80

Hospital Balance	Professional Balance	Total Account Balance
\$1,247.80	\$0.00	\$1,247.80

IMPORTANT MESSAGES

Thank You for choosing the University of Rochester Medical Center for your healthcare needs. Payment in full is due upon receipt. If you've already sent your payment, please disregard this notice.

We appreciate your patience during our transition to a new billing system and apologize for any inconvenience you might experience. If you believe you have received this bill in error, please call (888) 758-7650 or toll free at (888) 925-4301 for assistance.

RESPONSIBLE PARTY UPDATES/CHANGES

ACCOUNT NUMBER	RESPONSIBLE PARTY	HOME PHONE NUMBER	CELL PHONE NUMBER
55	John Doe		
STREET ADDRESS (PT)	CITY	STATE/PROVINCE	ZIP CODE
INSURANCE CHANGES - PRIMARY		INSURANCE CHANGES - SECONDARY	
INSURANCE COMPANY	RELATIONSHIP TO SUBSCRIBER	INSURANCE COMPANY	RELATIONSHIP TO SUBSCRIBER
SUBSCRIBER'S NAME	SUBSCRIBER'S DATE OF BIRTH	SUBSCRIBER'S NAME	SUBSCRIBER'S DATE OF BIRTH
TEL NUMBER	GROUP PLAN NUMBER	EFFECTIVE DATE	TEL NUMBER
MAILING ADDRESS FOR CLAIMS	CITY	STATE	ZIP CODE

Page 2

- A Statement of Hospital Services:** All Hospital care is combined in one bill. Until October 1, you'll receive a separate statement for physician charges. Hospital and physician care provided before **May 1, 2017** will be billed separately in the old format.
- B View online:** Now you can see your Highland statement online through MyChart. Starting this fall, sign up for paperless billing and manage all your UR Medicine accounts through MyChart.
- C Account number:** Each patient received a new account number when we transitioned to our new billing system.
- D Account Summary box:** All of your key account information is listed in this box.
- E Billing Help:** All of your payment options are listed here for easy reference. If you need help or have questions about your bill, call us!

- F Billing Cycle Date:** Any care you received at Highland after this date will appear on your next statement.
- G Hospital Charges:** We've combined all your hospital services and charges on one statement vs. sending separate statements.
- H Description of Services and Charges:** Each service and charge is summarized so you can see exactly what you're being billed for.
- I Hospital Balance:** Your hospital balance is now listed separately from the total account balance.
- J Important Messages:** Watch this space for reminders and updates.