188

THIS IS A BILL

Hospital Account		
Patient Name	SUBHASHINI JAGANNATHAN	
Patient Account Number	FV0101941141	
Statement Date	04/05/21	
Service Date (s)	08/29/20 - 08/31/20	
Medical Record Number	FM03191762	
Visit Service Type	Inpatient	
Total Charges	\$14,061.83	
Patient Payments	\$0.00	
Patient Adjustments	\$0.00	
Insurance Payments	\$15,136.22	
Insurance Adjustments	\$1,689.83	
Current Account Balance	\$3,279.78	
Patient Balance Due	\$3,279.78	

Please see back for a Summary of Charges

Insurance Information

Insurer

Cigna Open Access MC

Important Message

Thank you for choosing St. Jude Medical Center. This bill is the amount you owe. Payment is due within 20 days.

If you have received a medical bill for COVID-19-related testing or treatment and you have questions about the out-of-pocket cost assigned by your insurer based on your network coverage, please contact us.

Are you experiencing financial hardship? Financial assistance may be available to those who qualify for free care or a medical bill discount, regardless of insurance coverage. Patients with incomes at or below 350% of Federal Poverty Levels may be eligible for financial assistance. Contact us to learn about your options during difficult times, including the COVID-19 pandemic.

Although any payments that we receive will be posted to your account, partial payments received without an established agreement (monthly payment amount can change as additional accounts are added) may not be sufficient to maintain your account in good standing. Please contact our office to discuss specific payment arrangements, if needed.



Contact Us

To speak with a Customer Service Representative regarding your bill, please call the number below or feel free to email us.

If you need further assistance, call toll free (800) 378-4189.

You may also e-mail your inquiry by clicking on Contact Us at www.stjudemedicalcenter.org/for-patients.

Our Customer Service phone hours are: Monday-Friday 8am - 4.30pm PST

Physician Billing

For your convenience, these offices should be contacted directly for professional (physician) billing questions:

St. Jude Pathology Billing	(714) 338-1003
St. Jude Radiology Billing	(800) 317-5834
St. Jude Anesthesia Billing	(714) 619-5391
St. Joseph Heritage Billing	(714) 449-4800
St. Jude Emergency Medicine Group	(866) 898-7148
Billing	





- ✓ Please make check payable to St. Jude Medical Center.
 ✓ Please include your account number on your check.
- ✓ Enclose this payment stub with your payment.

PATIENT NAME	ACCOUNT NUMBER	AMOUNT DUE	AMOUNT ENCLOSED
SUBHASHINI JAGANNATHAN	FV0101941141	\$3,279.78	\$

Check box if you have updated address/insurance carrier information on reverse side.

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