

Patient Name: Srinivasan, Raghuraj

Account Number: 2040049 Statement Date: 11/28/2023

# **Statement Summary**

Total Billed Charges	524.00
Insurance Payments & Adjustments	-354.00
Your Payments & Adjustments	0.00

Amount due	\$170.00
by December 27, 2023	<b>4170.00</b>

## **Ways to Pay**

### **MyChart**

Thank you for activating your MyChart account!



Phone Call 866-367-2901

Mon 8 am-8 pm, Tue-Thu 8 am-7pm, Fri 8 am-5 pm ET



#### Mail

Please complete and return the form below



#### **QR Code**

Scan the code to pay with your mobile device



# **Need Help?**

Call us at **866-367-2901** if you have any questions about your bill or to set up a payment plan. Translation services are also available upon request. Los servicios de traduccion estan disponibles a peticon.

 $\label{lem:catholic} \textbf{Catholic Health offers financial assistance to qualified applicants.} \\ \textbf{For more information, visit}$ 

https://www.chsli.org/financial-assistance

Return bottom section with your payment

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Account Number Amount Due by December 27, 2023	2040049 \$170.00				
Amount Enclosed	\$				
I am enclosing a check from my insurance company.  Please include a copy of the explanation of benefits.					
If you are not paying balance in account number(s):	full, please apply payment to				

# **Professional Services**

CHPP Internal Medicine at Ronkonkoma Srinivasan,Raghu 9923310081 November 7, 2023 - November 7, 2023					
Date	Visit Detail	Charges	Insurance Allowed	Payments/ Adjustments	Patient Balance
Sharma, Ral	kesh, MD		Allowed	rajuotinonto	Balarioo
11/07/23	Removal Impacted Cerumen Instrumentation Unilat	170.00			
11/07/23	Initial Preventive Medicine New Pt Age 18- 39yrs	354.00			
11/27/23	Blue Cross Payments - CLM #2023317CQ8827 Deductible: 170.00		-187.14		
11/27/23	Blue Cross Adjustments  Balance		-166.86		170.00
	Totals for Professional Accounts Professional Accounts Balance Due	524.00	-354.00	0.00	170.00 170.00