



PO BOX 981006, BOSTON, MA 02298-1006  
RETURN SERVICE REQUESTED

**DUE BY 01/02/2021**  
**\$90.00**

## Hospital & Physician Bill

**John Smith**  
123 Main Street, Apt 3  
Nowhere, GA 12345-6789

### Ways To Pay



**Pay Online**  
Visit: [www.mylvhn.org](http://www.mylvhn.org)  
Enter Activation Code: **3PS56-P8QKR**

**Pay on Smartphone**  
Scan QR Code



**Pay by Phone**  
Call: **855-968-3873**  
Enter Pay by Phone Code: **123-456-789**

**Pay by Mail**  
Complete the form below and return in the enclosed envelope. Make check payable to **Lehigh Valley Health Network**

### Payment Options

Learn more about the following options by visiting [www.mylvhn.org](http://www.mylvhn.org)

- Payment Plans
- Financial Assistance

### Have Questions?

Call: **484-884-1300 or 844-884-1300**  
Hours: Mon-Fri 7:30am - 4:30pm  
Email: Visit [www.mylvhn.org](http://www.mylvhn.org)

### Bill Summary *See following page(s) for itemized charges*

Guarantor Name:	John Smith
Guarantor Number:	577084
Statement Date:	12/03/2020
Primary Insurance:	Medicare Advantage

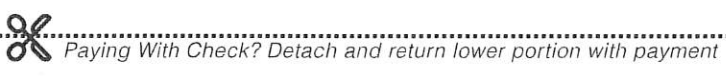
Total Charges:	\$698.14
Payments & Adjustments:	-\$608.14

**Amount Due: \$90.00**

#### **i** Important Message

Any insurance information provided has been billed. The balance is your responsibility and is due upon receipt of this statement.

**Flip Page →**



**Thank you for choosing Lehigh Valley Health Network for your healthcare needs.**

Guarantor Name:	John Smith
Guarantor Number:	577084
Secure Health Code:	PCO-PCO-PCO

**Amount Due: \$90.00**

Payment Included \$

*If paying by check, make payments to:*  
**LEHIGH VALLEY HEALTH NETWORK**  
PO BOX 981006  
BOSTON, MA 02298-1006

0715218933940084 0000090006