



Sutter Health
Sacramento Sierra Region

With You. For Life.
PO BOX 160100
SACRAMENTO, CA 95816-0100

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NIC [REDACTED]
SACRAMENTO CA 95814-1637
[Barcode]

Dear NIC [REDACTED]

Thank you for choosing SUTTER GENERAL HOSPITAL for your health care needs. Your insurance company has processed its portion of your bill for hospital services. The remaining balance is your responsibility. Please submit the full payment at your earliest convenience.

Sincerely,
Patient Accounts

Questions/Preguntas?

Billing questions or changes in coverage -

Contact us Monday - Friday 8:00 am - 4:00 pm at
(800) 353-3369 Fax: (916) 503-7119.

Si necesita asistencia en español favor de llamar al
Departamento de Servicio al número (800) 353-3369
Fax: (916) 503-7119.



Online Bill Pay, 24 hours per day, 7 days
per week at sutterhealth.org. A simple and
secure way to access and update your
account information and pay your
accounts online.

REMIT THIS PAYMENT STUB TO:

SUTTER GENERAL HOSPITAL
PO BOX 160100
SACRAMENTO CA 95816-0100
[Barcode]

Account Summary

Date of Bill	11/17/2013
Date of Service	10/01/2013
Account Number	[REDACTED]
Total Charges	\$55,029.31
Payments/Adjustments	-\$43,909.78
What You Owe Now	\$11,119.53

Please see reverse side for patient billing details →

Insurance Information

Insurance 1: AETNA PPO
Insurance 2: PRIVATE PAY BALANCE
See reverse side to update your insurance information →

Guarantor Name	Account Number	Date Due
NIC [REDACTED]	[REDACTED]	12/17/2013
Amount Due	Amount I Am Paying	
\$11,119.53	\$	



Name as it appears on the card

Card No. _____
Expiration Date _____ CCV Code _____
Signature X _____

Patient Name: NIC [REDACTED]

Account Number: [REDACTED]
[REDACTED]

Summary of Services

Date	Description	Amount
10/01/2013	ROOM AND BOARD	\$4,878.00
10/01/2013	PHARMACY	\$2,420.56
10/01/2013	LABORATORY	\$1,408.00
10/01/2013	RECOVERY ROOM	\$7,501.00
10/01/2013	MEDICAL/SURGICAL SUPPLIES AND DEVICES	\$6,428.75
10/01/2013	CT SCAN	\$6,983.00
10/01/2013	EMERGENCY ROOM	\$2,703.00
10/01/2013	IV THERAPY	\$1,658.00
10/01/2013	OTHER THERAPEUTIC SERVICES	\$210.00
10/01/2013	ANESTHESIA	\$4,562.00

(continued on next page ...)

Patient Name: NIC [REDACTED]

Account Number: [REDACTED]
[REDACTED]

401108

Summary of Services (cont.)

Date	Description	Amount
10/01/2013	OPERATING ROOM SERVICES	\$16,277.00
Total Charges		\$55,029.31
Payments/Adjustments		
11/15/2013	ALLOWANCE - INSURANCE C/A	-\$37,448.31
11/15/2013	AETNA PPO PAYMENT	-\$6,461.47
Total Payments and Adjustments		-\$43,909.78