

Understanding Your New Statement

Redesigned with you in mind

At Integrated Oncology Network (ION), we truly care about your patient experience. This includes your statement and the charges associated with the medical care you received at our facilities. Below you will find a description of changes to your new statement format. We appreciate your patience as we improve our billing processes.



Summary of Activity

| | |
|----------------------|------------------|
| Statement Date | 01/08/2025 |
| Account Name | Test Patient |
| Patient ID | ##### |
| Primary Insurance | Insurance 1 Here |
| Secondary Insurance | Insurance 2 Here |
| Charges | \$153.87 |
| Payments/Adjustments | -\$64.11 |
| Balance Due | \$89.76 |
| Due Date | Upon Receipt |

Total Account Balance **\$89.76**



Online Bill Pay
A fast, secure way to manage your bill online!
[Personapay.com/ionetwork](https://personapay.com/ionetwork)



PATIENT STATEMENT

5 Hours of Operation: Monday - Thursday 8:00am - 7:00pm EST, Friday 8:00am - 6:00pm EST
Call us: (615) 205-2042

ADDRESSEE:
Test Patient
123 Test Street
Sample, ST 12345

Amount Due
\$89.76



Mobile Quick Pay

Payment Options

-  **24/7 Payment Line**
Easy, automated phone payments at your convenience (615) 205-2042
-  **Go Paperless**
Sign up for eStatements, text notifications and more at [Personapay.com/ionetwork](https://personapay.com/ionetwork)
-  **Need help?**
If you have questions about your bill please call (615) 205-2042

Patient ID: 11630

Due Date: Upon Receipt

Amount Due: \$89.76

Amount Paid: \$

 **Pay Online: [Personapay.com/ionetwork](https://personapay.com/ionetwork)**

 **MAKE CHECKS PAYABLE AND REMIT TO:**
ION Intermediate Holdings LLC
P.O. Box 306598
Nashville TN 37230-6598

- Front of Statement (pg.1)*
- 1** This section includes information about the patient, when the statement is due and when your statement was issued. Your Patient ID is unique to you and will be used to register your online patient profile.
 - 2** Account activity, including total charges, total payments, and any pending insurance payments for all open accounts.
 - 3** Easy Pay QR link to your unique patient portal.
 - 4** Additional ways to pay your bill(s).
 - 5** Billing Support contact methods and hours of operations.
 - 6** Payment coupon to submit your payment by mail. Your total amount owed - this portion of the statement must be returned with payment. Use the back of this section to update your contact information.

- Back of Statement (pg.2)*
- 7** This section has a summary of account information including date of service, description of care, service location, provider, account status and a breakdown of charges and payments. If you have more than one open DOS, you will receive a detail section for each account.
 - 8** Account Status: A brief description of the status of your account (Current, Past Due, or Final Notice). If you have more than one open Account you could have multiple 'Status' depending on the age of the account. The oldest account will drive our statement layout.

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| Date | Service Description | Account Status | Charges | Payments/Adjustments | Patient Balance |
|-----------------|--|----------------|-----------------|----------------------|-----------------|
| 7 9/9/24 | Patient: Test Patient Location: Rocky Mountain Oncology Center Provider: Doctor MD, Example | Current | \$153.87 | -\$64.11 | \$89.76 |
| | ACCOUNT TOTALS | 8 | \$153.87 | -\$64.11 | \$89.76 |