How to read my statement

1 Total Amount Due - the amount that is due within 30 days of the bill date.

2 Ways to Pay - you can pay your bill online, by phone or through the mail.

3 Address - this is the person Mosaic Medical Center – Maryville has on file that is listed to get monthly bills and is responsible for paying the bills.

4 Accounts Summary Box - this section lists quick information about your bill.

- Account Number - this is the account number for the person we have on file that is responsible for paying the bill (sometimes called guarantor). It is also the number needed to log in to the online bill pay portal at https://mosaic.simplepay.com.

- Bill Date - this is the date your bill was mailed. It is important to note as payments are due no later than 30 days from this date.

- Total Billed Charges - this is the total price Mosaic Medical Center – Maryville requests for services provided.

- Total Insurance Adjustment/Paid - this amount includes money insurance has paid; money you have paid (such as copays or coinsurance); any contractual adjustments given by your insurance company; or any other discounts added to your account.

- Amount Due on a Payment Plan - if you have any visits/encounters that were previously set up on a short-term payment plan (less than 4 months) the amount owed for that payment plan month is shown here.

- Amount Due not on a Payment Plan - this amount due is an amount that has not been added to a short-term payment plan (less than 4 months) and is due within 30 days of the bill date. If you would like to set up a payment plan for this balance, call (844) 261 – 7266.

- Total Amount Due - this is the total amount that you owe Mosaic Medical Center – Maryville for this bill. It includes both the amount owed for short-term payment plans already set up and amounts not on short-term payment plans.

Questions?
844.261.7266

Pay online, set up a payment plan or sign up for eStatements at myMosaicLifeCare.org/billpay

Pay or set up a payment plan by phone 844.261.7266

Pay by mail. Payments can be made returning the stub below.
MEDICAL CENTER
MARYVILLE
1643 LEWIS AVE. SUITE 203 BILLINGS, MT 59102-4151
Electronic Service Requested

Total Amount Due
$43.79

Ways to Pay
Pay online, set up a payment plan or sign up for eStatements at myMosaicLifeCare.org/billpay
Pay or set up a payment plan by phone 844.261.7266
Pay by mail. Payments can be made returning the stub below.

Accounts Summary

<table>
<thead>
<tr>
<th>Bill Date</th>
<th>Account Number XXXXXXX</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total Billed Charges $213.00</td>
</tr>
<tr>
<td></td>
<td>Total Insurance Adjustment/Paid $169.21</td>
</tr>
<tr>
<td></td>
<td>Amount Due on a Payment Plan $0.00</td>
</tr>
<tr>
<td></td>
<td>Amount Due not on a Payment Plan $43.79</td>
</tr>
<tr>
<td></td>
<td>Total Amount Due $43.79</td>
</tr>
</tbody>
</table>

Payment Due 30 Days from Date of Bill

Important Messages
Thank you for using Mosaic Life Care. The total amount due is the amount still owed after billing insurance. Please pay using any of the ways listed above.

Payments will be posted to the oldest date of service PAYMENT IS PAST DUE: You have one or more balances past due. See the encounter details, starting on page 3. Provide payment in full or contact Patient Billing at 844.261.7266 to avoid being sent to collections.

myMosaic Portal
Securely pay your medical bills, see your medical information, schedule an appointment, email your care team, review lab results and more online. Sign up at myMosaicLifeCare.org/Portal.

Questions?
844.261.7266

Hours of Operation:
Monday - Thursday, 8 a.m. - 7 p.m. CST
Friday, 8 a.m. - 6 p.m. CST
Saturday, 9 a.m. - 1 p.m. CST

How to read my statement

Important Messages - this area will let you know if you have any visits/encounters with payments that are past due. It also lets you know that all payments will be posted to the oldest date of service. If you would like your payment posted to a specific visit/encounter, please call (844) 261-7266.

Payment Due - the total amount due for this bill is owed in full no later than 30 days from the date of the bill. If you are unable to pay the full amount within 30 days, please call (844) 271-7266 for payment plan options or visit myMosaicLifeCare.org/billpay to find more information about our financial assistance program.

Minimum Amount Due - total amount that you owe this month.
How to read my statement

8 Primary Insurance – this is the insurance that Mosaic Medical Center — Maryville has on file for the patient that will be billed first.

9 Secondary Insurance – if you have a secondary insurance plan, this is the insurance company that Mosaic Medical Center — Maryville has on file that will be billed if there are costs the primary insurance didn’t cover.

10 Accounts not on a Payment Plan – this section lists the details for services provided by Mosaic Medical Center — Maryville. It includes the details for costs, adjustments and discounts and payments. Accounts not on a Payment Plan have not been set up for short or long-term payment plans as of the date of this bill.

11 Charges – the price Mosaic Medical Center — Maryville requests for services provided.

12 Insurance/Other Adjustments (Adj)/Payments (Pmt) – this amount includes money insurance has paid; money you have paid (such as copays or coinsurance); any contractual adjustments given by your insurance company; or any other discounts added to your account.

13 Patient Payment – payments you have made; this may be your copay, coinsurance or deductible payments.

14 Patient Owes – this is the amount you owe for that specific visit/encounter. This is not your total balance due.

15 Visit/Encounter # – this is the number that the Mosaic Medical Center — Maryville billing system creates to track services received.

16 Patient Name – this is the person that received services.

17 Location – this is where the patient received services.

18 Summary – this tells you where each visit/encounter is in the billing process. Messages may be: Ready for Payment, Payment Past Due, Past Due Second Notice, Past Due Final Notice. Important messages will also include this message for any visit/encounter that is past due.

19 Service Date – this is the date the patient first received care.

20 Visit Subtotals – this is the amount of charges, Ins./Other Adj/Pmt, Patient Pmt and Patient Owes by visit/encounter. This is not the total amount owed for the bill.

21 Totals – these are the totals for each column (charges, Ins./Other Adj/Pmt, Patient Pmt and Patient Owes) for all visits/encounters on this bill.