How to read your bill

You will receive one bill for both hospital and doctor services. Use this guide to understand what each part of your statement means.

Cover page

A. Account Number
Please have your account number ready when contacting us.

B. Amount Due
This is what you owe at the time you receive this bill.

C. Insurance Information
This is the insurance we have on file and billed for you.

D. Questions
Please call or write us if you have questions.

E. About Your Health Care Account
Important information about your health care account.

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**HOW TO PAY YOUR BILL**

| PATIENT PORTAL | www.ohsu.edu/mychart |
| ONLINE         | www.ohsu.edu/guestpay |
| PHONE          | 503-494-8047 or 1-866-617-6855 (toll-free) |
| MAIL           | Patient Billing Services, P.O. Box 4674, Portland, OR 97208-4676. Please include your payment coupon with your payment. |
### Details page

**A. Date of Service**
Date of your visit or procedure.

**B. Description**
Information about the care you received at OHSU. Details include charges, payments, adjustments and patient balance.

**C. Section Header**
The hospital or provider who is billing for the service.

**D. Balance Due**
This is what you owe.

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**Questions?**

**Online**
www.ohsu.edu/billing

**Phone**
503-494-8047 or 1-866-617-6855 (toll-free)

**Email**
askus@ohsu.edu