



# CORE Sports

Physical Therapy & Orthopedic Rehabilitation

## HOW DO I READ MY STATEMENT???

### STATEMENT

CORE SPORTS PT AND ORTHOPEDICS  
PO BOX 30570  
Honolulu, HI 96820-0570

This is our billing company's address; you can either submit payment to this address or come to our office and pay

OFFICE PH NO (808)947-3316	CLOSING DATE 2016-09-15	YOUR ACCT NO 1465	<b>NEW BALANCE</b> 4.98	PAGE 1
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NEIGHBOR ISLANDS CALL TOLL FREE 800-404-3316. PLEASE CALL SHOULD YOU HAVE ANY QUESTIONS.

DATE	EXPLANATION OF ACTIVITY	PATIENT NAME	CHARGES & DEBITS	INSURANCE PENDING	PAYMENTS & CREDITS	PATIENT BALANCE
2016-08-11	PROVIDER: FONG-REYES, DANA	[REDACTED]				
2016-08-11	THERAPEUTIC PX 1/> AREAS EACH EXERCISES		43.60			0.00
2016-08-26	PRIMARY INSURANCE PAYMENT				-25.72	
2016-09-10	SECONDARY INSURANCE PAYMENT				-6.43	
2016-08-26	INSURANCE ADJUSTMENTS				-11.45	
2016-08-11	MANUAL THERAPY TQS 1/> REGIONS EACH		110.67			4.98
2016-08-26	PRIMARY INSURANCE PAYMENT				-71.50	
2016-09-10	SECONDARY INSURANCE PAYMENT				-12.89	
2016-08-26	INSURANCE ADJUSTMENTS				-21.30	
2016-08-11	SALES TAX		7.27			0.00
2016-08-26	INSURANCE ADJUSTMENTS				-7.27	
2016-09-15	CURRENT STATEMENT BALANCE					4.98

PRIMARY INSURANCE is what your insurance will pay based on what you signed up for; i.e. higher monthly premiums usually will pay more

INSURANCE ADJUSTMENT is the amount that we waive with your insurance company with each patient

SECONDARY INSURANCE is what your other insurance will pay for after it's been submitted to your primary insurance; this is usually your significant other's insurance

These are the services that were performed the day of your PT

This is what you owe at the moment; there may be more statements on the way; Double Check with your last PT visit date

After 90 days, you will receive a letter that if your payment is not received ASAP, your file automatically goes to collections

MESSAGE  
YOUR PROMPT PAYMENT IS GREATLY APPRECIATED. PLEASE DON'T HESITATE TO CONTACT US SHOULD YOU HAVE ANY QUESTIONS.

CURRENT	30-60 DAYS	60-90 DAYS	>90 DAYS
0.00	4.98	0.00	0.00
<b>PREVIOUS BALANCE</b>	<b>TOTAL CHARGES</b>	<b>TOTAL CREDITS</b>	<b>AMOUNT DUE</b>
0.00	161.54	-156.56	4.98