

NEW EASIER-TO-READ BILL

Here's a quick look at where to find key information on your new bill



P.O. Box 629028
EL Dorado Hills, CA 95762-9028

RETURN SERVICE ONLY - DO NOT MAIL PAYMENTS TO THE ABOVE ADDRESS

ABC Company
John Doe
123 Main Street
Los Angeles, CA 94404

ABC Company
Customer ID: 012345
Statement ID: 987654321
June 2022

Any activity processed after 05/01/2022 will appear on your next bill.

Summary of Account Due

Previous Balance \$4,500.00
Payments \$-4,500.00
Balance \$0.00

Current Activity \$2,725.00
Retro & Other Activity \$1,523.00
Account Adjustments & Fees \$467.00
Total Current Charges \$4,715.00

Total Amount Due \$4,715.00

(Includes past due and current charges)

Due Before 06/01/2022

You are signed up for autopay. Your account ending in 1234 will be charged \$4,715.00 on 06/01/22.

Visit account.kp.org to find all the resources you need to manage coverage, billing, and enrollment.

Accounts included in this bill

Purchaser ID	Region	Billing Unit ID	Billing Unit Name	Total Active Member Count	Total Charges
012345	SCR	0100	ABC HSA	6	\$4,248.00
001234	NCR	0001	ABC HMO	0	\$0.00

Payment Summary for Customer ID 012345

Purchaser ID	Date posted	Payment type	Reference number	Payment amount	Billing Unit ID applied	Coverage month	Amount applied
012345	05/01/2022	ACH	0000000001	\$2,000.00	0100	04/01/2022	\$-2,000.00
012345	05/01/2022	CHEC	0000000002	\$2,000.00	0100	04/01/2022	\$-2,000.00
012345	05/01/2022	WIRE	0000000003	\$500.00	0100	03/01/2022	\$-500.00
Total amount paid							\$-4,500.00

It can take up to 10 days to process your payments. If you don't see a payment you've already made, you'll see it on a future bill.

1

Customer ID is a unique account identifier within our new billing system.

Note: Invoice number will appear in place of Statement ID on non-consolidated bills.

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Bill cut-off date.

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Autopay status.

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Accounts included in bill, with region, billing unit details, and total active member count.

3

Payment, invoice summary, and due date.

For more details on Retro Activity, visit account.kp.org to view an Excel version of your bill.

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Important news and updates.

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Payment details.

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Membership Detail for Purchaser ID 012345 Billing Unit ID 0100 Billing Unit Name - ABC HSA

Current coverage month - 06/01/2022 - 06/30/2022										Retro and other activity			Total Due
Name	Family count	Medicare assignment Y/N	Subscriber ID	Coverage	Status	Medical plan	Medical current charge	Ancillary product	Ancillary current charge	Period	Code	Amount	
AGUILAR, JERRY	1	N	XXX-XX-0123	E	A	HSA	\$367.00	CHIRO	\$0.00				\$367.00
BERK, KELLY	2	N	XXX-XX-1234	ES	A	HSA	\$835.00	CHIRO	\$0.00				\$835.00
DAVIS, FRANKLIN	3	N	XXX-XX-2465	ESD	A	HSA	\$1,523.00	CHIRO	\$0.00	05/01/2022	MEDICAL	\$1,523.00	\$3,046.00
Subtotal							\$2,725.00		\$0.00			\$1,523.00	\$4,248.00
Total Current Activity												\$2,725.00	
Total Retro & Other Activity												\$1,523.00	
Total Charges												\$4,248.00	

Membership details with both current and retroactive information, Medicare assignment, and eligibility status.

Note: For more details, visit account.kp.org to view an Excel version of your bill.

A table will be shown for each account.

Coverage Type	Status	Activity
E Employee Only	A Active	TRM Retroactive Termination
ES Employee and Spouse	R Retiree	ADD Retroactive Addition
ESD Employee, Spouse and Dependent(s)	C Cobra	CHG Retroactive Change
ED Employee and Dependent(s)	T Terminated	LEP Medicare Late Enrollment Penalty
		LIS Medicare Low Income Subsidy

Medical Plan Legend					
Code	Description	Code	Description	Code	Description
ACCU	Acupuncture	FIT	Fitness	POS	Point of Service
BZ	Bronze	GD	Gold	PPO	Preferred Provider Organization
BZS	Bronze HSA	GDR	Gold HRA	PT	Platinum
CAT	Catastrophic	HMO	Health Maintenance Organization	SL	Silver
CHAC	Chiropractic and Acupuncture	HRA	Health Reimbursement Arrangement	SL&FIT	Silver & Fit
CHIRO	Chiropractic	HSA	Health Savings Account	SLS	Silver HSA
DEPO	Deductible EPO	MEDICAL	Medical	SRADV	Senior Advantage
DHMO	Deductible HMO	MSPSRADV	Medicare Secondary Payer Senior Advantage	SRADDHMO	Senior Advantage DHMO
EPO	Exclusive Provider Organization	OOA	Out of Area		

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Account Adjustments & Fees – for Purchaser ID 012345 Billing Unit ID 0100 Billing Unit Name - ABC HSA

Account adjustment reason	Period	Reference	Charge / Credit
Adjustment 1	01/01/2022		\$367.00
Adjustment 2	03/01/2022		\$100.00
Total			\$467.00

Account adjustments and details are reflected at the summary level.

For more details by account, visit account.kp.org to view an Excel version of your bill.

(RETURN THIS PORTION WITH YOUR PAYMENT)

ABC Company
John Doe
123 Main St.
Los Angeles, CA 94404

BUIK 012345678 Customer ID 012345

REMITTANCE ADVICE FOR June 2022

Please pay this Amount: \$4,715.00

AMOUNT PAID: \$ _____

Due Date: **06/01/2022**

Kaiser Foundation Health Plan Inc
P.O. Box 741562
Los Angeles, CA 90074-1562

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Payment address.