


Please use this guide to find information on your billing statement.

- 1 Provider of Service
- 2 Online Bill Pay Information
- 3 Your account number
- 4 A brief description of your service
- 5 The amount that you are responsible for
- 6 Payments/adjustments
- 7 Payment/account status information
- 8 Important message for this statement period
- 9 Amount due upon receipt

 Pay Online at: WWW.CVSSPECIALTY.COM

1  **CVS specialty**
 PO BOX 99778 | CHICAGO IL 60698

For help with billing questions, please call:
 800-250-9031
 Office Hours: Mon - Fri, 8:00AM to 8:00PM EST
 Check if address/insurance changes are on back

Addresssee Page 1 of 1

JOHN DOE
 1234 MAIN STREET
 BRIARCLIFF MANOR NY 10510-1234

2 CVSSpecialty.com/bills

For an easy way to pay, visit us online.

Account Number	Due Date	Amount Due	Amount Paid
1234567	Upon Receipt	\$22.00	\$

Please make checks payable and remit to:

CVSSpecialty
 PO BOX 99778
 CHICAGO IL 60698

Please detach and return top portion with payment.

Account Number	Account Name	Statement Date	Due Date
1234567	JOHN DOE	07/25/2018	Upon Receipt

Date	Service Description	Charges	Payments/Adjustments	Patient Balance
03/02/2018	RX # : NURSING FEE- FIRST 2 HOURS FSA Eligible: Y, Exp Date: Refills Remaining: 0 Balance Due:	\$22.00	\$0.00	\$22.00
Total Patient Balance Due:				\$22.00

7 **MESSAGES**
 Thank you for choosing CVS/Specialty. The customer balance due shown is your current responsibility. This balance may not reflect balances for orders not paid by your insurance.

8 Your statement design has changed!
 Please see the back of this document for details.

9 **AMOUNT DUE: \$22.00**

If you have already submitted payment, please disregard this statement.