

ONLINE BILL PAY GUIDE



Your Current Account Activity

Guarantor Name: NAME

Work Item Number:

Statement Date:

Total Charges:

Total Payment/Adjustment:

Total Balance: \$93.71

Due Date: 02/26/2022

ENTER THIS
NAME & THIS
PERSON'S DOB
FOR ONLINE
BILL PAY

Total Amount Due \$93.71

Need to make a phone payment?

Call one of our friendly representatives from
8am to 8pm Mon-Fri at **225.243.1722**
to pay your bill over the phone.



Summary Billing Statement

Questions about your bill?
Call us at (225) 243-1722 from
8am - 8pm, Mon. - Fri.

PATIENT NAME
PATIENT ADDRESS
LUTCHER LA 70071-0982

Amount Due
\$93.71

Payment Options

Mail

Return with slip below

Phone

Call 225.243.1722

Online

sjph.paymyhealthbill.com
See instructions below



Online Bill Pay

1 24/7 Pay Online
Login to your portal or visit
sjph.paymyhealthbill.com



2 Get Your Access Code
Find your Access Code on Page 2 of this
statement (under the Account # on each
listing)

3 Enter Your Info to View & Pay
Enter your Last Name, Date of Birth and
Access Code

Work Item Number
Due Date 02/26/2022
Minimum Amount Due \$50.00

One-Time Payment: <http://sjph.paymyhealthbill.com>

MAKE CHECKS PAYABLE AND REMIT TO:
ST. JAMES PARISH HOSPITAL
1645 LUTCHER AVENUE
LUTCHER LA 70071

Date	Service Description	Charges
9/7/21	Patient: Account #: 12345678 Access Code: 876543 NURSE VISIT Total Charges Total Adjustments Total Insurance Payments/Contractual Adjustments Total Patient Payments Balance Due	\$60.01
12/8/21	Patient: Account #: Access Code: 876543 CLINIC Total Charges Total Adjustments Total Insurance Payments/Contractual Adjustments Total Patient Payments Balance Due Total Balance Due	\$353.00