


Insurance Eligibility

 **AETNA**
 Deductible: \$0.00
 Coinsurance: 20%
 Out of Pocket: \$3,649.80

[View Insurance History](#)

Charges

Date Entered	Qty	Code	Description	Item Charge	Total
12/2/2019	1	L4361.C	AIRSELECT, STANDARD, MEDIUM	[REDACTED]	

Estimated Total: \$

Patient Estimator

Total Before Discounts	\$39.06
Total Before Payment Arrangements	\$39.06
Total Payments	-\$0.00

Remaining Patient Balance: \$39.06

- [Printable forms](#)
- [View payment history](#)
- [View account history](#)