



Operated in partnership by UCHealth and Adeptus Health, formerly First Choice Emergency Room

PO Box 841047

Dallas, TX 75284-1047

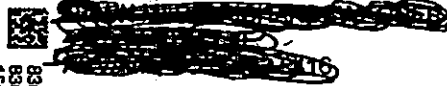
For billing questions, please call (866) 688-6600

**Save Time, Pay Online**  
 Go to: <https://mymedicalbill.connectiq.net/FCER/>  
 and enter your Online Bill Pay Code: ~~XXXXXXXXXX~~

STATEMENT DATE	ACCOUNT NO.	PATIENT RESPONSIBILITY
11/19/2015	<del>XXXXXXXXXX</del>	2889.90
DUE DATE	UPON RECEIPT	SHOW AMOUNT PAID HERE \$

ADDRESSEE:

ADDRESS SERVICE REQUESTED 5 1



836  
836  
1514040

MAKE CHECKS PAYABLE TO:



UCHEALTH EMERGENCY ROOM  
 PO BOX 841047  
 DALLAS, TX 75284-1047

*M. A. G. S.*

Please check if you are mailing in payment and the above address is incorrect or has changed. Please indicate change(s) on reverse side.

**STATEMENT**

PLEASE DETACH AND RETURN TOP PORTION WITH YOUR PAYMENT

**Go Green and Stay Secure! Receive statements via email and make payments in our secure website.**

Go to: <https://mymedicalbill.connectiq.net/FCER/>

and enter your Online Bill Pay Code: ~~XXXXXXXXXX~~

Date	Description	Charges	Payments & Adjustments	Patient Responsibility
	/Thomas Meason MD/F153153			
09/10/2015	Location: Arvada Ralston Medical Center			
09/10/2015	Facility Charge	6237.00		
09/10/2015	IV Medication	154.00		
09/10/2015	IV Medication; additional medication	122.00		
09/10/2015	Venipuncture; collection of venous blood by venipuncture	12.00		
09/10/2015	Toradol 15mg IV/IM	78.00		
09/10/2015	Zofran 1mg IM/IV	424.00		
09/10/2015	CT - Abdomen/Pelvis w/o contrast	6370.00		
09/10/2015	CBC	186.00		
09/10/2015	CMP	345.00		
09/10/2015	UA Dip	64.00		
09/10/2015	Urine Preg	164.00		
09/10/2015	Cipro 200mg IV	102.00		
11/12/2015	Payment from Rocky Mountain Health Plans		-11368.10	
11/12/2015	Transfer from Insurance			
	This amount is being transferred to your responsibility.			
	<b>BALANCE:</b>			2889.90

MESSAGE:

	2889.90
	0.00



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 Dallas, TX 75284-1047

PAYMENT DUE BY

UPON RECEIPT

PAY THIS AMOUNT



2889.90

Your Payment is Due in Full. Thank You  
 Please see reverse for additional information



Do not send correspondence to this address.

ONAMSY01  
PO Box 1022  
Wixom MI 48393-1022  
ADDRESS SERVICE REQUESTED

1 \$ 2,436<sup>02</sup>



111 Lancewood Road • Columbia, SC 29210  
Phone: (803) 217-3800  
Toll Free: (800) 849-8500

Date: January 6, 2016  
Total Due: \$4,872.80

See Reverse Side for Creditor  
Information and Account Details

Your account(s) have been placed with this agency for collection of the balance in full. Payment in full is due. If these account(s) are not paid in full, they will be reported as bad debt collection item(s) on your credit bureau record after the time period described below. If you need help with this bill, it is important that you contact this office where a representative is on hand to assist you.

Unless you notify this office within 30 days after receiving this notice that you dispute the validity of this debt or any portion thereof, this office will assume this debt is valid. If you notify this office in writing within 30 days from receiving this notice that you dispute the validity of this debt or any portion thereof, this office will obtain verification of the debt or obtain a copy of a judgment and mail you a copy of such judgment or verification. If you request this office in writing within 30 days after receiving this notice this office will provide you with the name and address of the original creditor, if different from the current creditor. This is an attempt to collect a debt. Any information obtained will be used for that purpose. This communication is from a debt collector.

Remember, mail payment in full, or contact this office for assistance.

FOR INFORMATION ABOUT THE COLORADO FAIR DEBT COLLECTIONS PRACTICES ACT, SEE  
[WWW.COLORADOATTORNEYGENERAL.GOV/CA](http://WWW.COLORADOATTORNEYGENERAL.GOV/CA).

A consumer has the right to request in writing that a debt collector or collection agency cease further communication with a consumer. A written request to cease communication will not prohibit the debt collector or collection agency from taking any other action authorized by law to collect the debt.  
Local Office: 3501 S. Shields St., Fort Collins, CO 80526. (970) 229-1960.