

PATIENT NAME

ACCOUNT NUMBER

STATEMENT DATE

BRAIDEN MILLER

15496996

08/08/19

Find YOUR Doctor
 www.cudoctors.com

TOTAL ACCOUNT BALANCE

\$1538.98

PAY YOUR
BILL ONLINE!
www.cumedicine.us

PAYMENT OPTIONS You may pay your bill in full with a check or credit card in 1 of 3 ways:



Pay online at www.cumedicine.us



Pay by phone, dial 303-493-7700



Mail in the payment to us using the coupon below

YOUR ACCOUNT STATUS

Statement for Physician Services

THANK YOU FOR ALLOWING US TO PROVIDE YOUR HEALTH CARE SERVICES.

CUSTOMER SERVICE

Phone:

303-493-7700 or Toll Free 800-621-9734

Office Hours:

Monday - Friday 8:00am to 5:00pm MST

Walk-In Hours:

Monday - Friday 8:00am to 5:00pm MST

PAYMENT PLANS To establish a payment plan, please go to www.cumedicine.us

Para crear un plan de pago, por favor diríjase www.cumedicine.us



Please see reverse side for a detailed summary

University of Colorado Medicine bills the professional fees for providers who are faculty members of the University of Colorado School of Medicine. This statement is separate from the one you may receive from the hospital or clinic where treatment was rendered. Tax ID 74-2161737

University of Colorado Medicine está a cargo de las cuentas de los Doctores miembros de la Facultad de Medicina de la Universidad de Colorado. Este estado de cuenta es por separado al que usted pueda recibir por parte del hospital o clinica en donde el tratamiento haya sido recibido.

Detach section below and return with your payment.



PO Box 111719 Aurora, CO 80042-1719

Please enter address or insurance changes on back and check box.

ADDRESSEE:

BRAIDEN MILLER P.O BOX 682 GOLDEN, CO 80402

IF PAYING BY VISA, MASTERCA	ARD, DISCOVER OR AMERICAN I	EXPRESS, FILL OUT BELOW
□visa VISA □ MASTERCA	RD DISCOVER	DAMER. EXP.
CARD NUMBER	EXP. DATE	AMOUNT
SIGNATURE	MUST INCLUDE SECURITY CODE BACK OF CARD	3 DIGIT E FROM
STATEMENT DATE	AMOUNT DUE	ACCOUNT NO.
08/08/19	\$883.98	15496996
DUE DATE	SHOW AMOUN	IT PAID HERE
Upon Receipt		
MAKE OFFICE	(S PAYABLE AND	



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All Open Invoices					
Item Description	Charges	Insurance Payments	Your Payments	Your Balance	
Invoice #: 15383423 Provider: THEODORE	F SCHLEGE	MD	DOS: 09	/19/2018	
(99204) OFFICE/OUTPATIENT VISIT Total Charges: AETNA PAYMENT - 10/04/2018 Adjustments: CREDIT CARD PMT ON ACCT - 12/06/2018 CREDIT CARD PMT ON ACCT - 01/07/2019 CREDIT CARD PMT ON ACCT - 02/06/2019 CREDIT CARD PMT ON ACCT - 03/06/2019 CREDIT CARD PMT ON ACCT - 03/11/2019 Diagnosis Code: S83.512A Balance Past Due:	\$512.00 \$512.00			0.00	
Invoice #: 15721473 Provider: NATHAN M	LOMBARDI 1	PA	DOS: 10	/22/2018	
(99213) OUTPT ESTAB VST-LVL III Total Charges: AETNA PAYMENT - 11/08/2018 Adjustments: CREDIT CARD PMT ON ACCT - 03/11/2019 Diagnosis Code: S83.512A Balance Past Due:	\$203.00 \$203.00			0.00	130877
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All Open Invoices				
Item Description	Charges	Insurance Payments	Your Payments	Your Balance
Invoice #: 15811844 Provider: THEODORE	F SCHLEGE	L MD	DOS: 10	/23/2018
(29883) KNEE ARTHROSCOPY SURGICAL (MEDIA (29879) KNEE ARTHROSCOPY SURGICAL ABRASI Total Charges: AETNA PAYMENT - 12/03/2018 Adjustments: CREDIT CARD PMT ON ACCT - 03/11/2019 CREDIT CARD PMT ON ACCT - 04/04/2019 CREDIT CARD PMT ON ACCT - 05/06/2019 CREDIT CARD PMT ON ACCT - 05/10/2019 CREDIT CARD PMT ON ACCT - 06/11/2019 CREDIT CARD PMT ON ACCT - 06/11/2019 CREDIT CARD PMT ON ACCT - 07/10/2019 Diagnosis Code: S83.222A Balance Past Due:				0.00
Invoice #: 15811845 Provider: MARTIN BO	UBLIK MD		DOS: 10	/23/2018
(29883) KNEE ARTHROSCOPY SURGICAL (MEDIA Total Charges: AETNA PAYMENT - 12/03/2018 Adjustments: Diagnosis Code: S83.222A Amount Pending with Insurance	\$1074.00 \$1074.00	492.49 581.51		0.00
Invoice #: 15811846 Provider: MARTIN BO	UBLIK MD		DOS: 10	/23/2018
(29879) KNEE ARTHROSCOPY SURGICAL ABRASI Total Charges: NON COVERED SERVICE/SUPPLY C - 11/07/201 Adjustments: Diagnosis Code: S83.512A	\$843.25	0.00 843.25		
Amount Pending with Insurance				0.00
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All Open Invoices				
Item Description	Charges	Insurance Payments	Your Payments	Your Balance
Invoice #: 15846160 Provider: THEODORE	F SCHLEGE	L MD	DOS: 10	/23/2018
(L1833) T SCOPE POST OP PREMIER OTS FIT (E0114) CRUTCHES ADULT 5FT 2IN 5 FT 10 Total Charges: AETNA PAYMENT - 12/06/2018 Adjustments: Diagnosis Code: S83.512A Amount Pending with Insurance				0.00
Invoice #: 15770776 Provider: THEODORE	F SCHLEGE	MD	DOS: 10	/24/2018
Diagnosis Code: 999.98 Invoice Balance				0.00
Invoice #: 15770778 Provider: THEODORE	F SCHLEGE	MD	DOS: 10	/24/2018
Total Charges: PREPAID PAYMENT-THANK YOU - 10/30/2018 PREPAID PAYMENT-THANK YOU - 11/21/2018 Diagnosis Code: 999.98 Invoice Balance	0.00		15.00 -15.00	0.00
Invoice #: 15782865 Provider: NATHAN M	LOMBARDI	PA	DOS: 10	/24/2018
Diagnosis Code: Z47.89 Amount Pending with Insurance				0.00
Invoice #: 15901010 Provider: THEODORE	F SCHLEGE	MD	DOS: 10	/24/2018
(00604) KNEE KIT SCOPE Total Charges: PREPAID PAYMENT-THANK YOU - 11/21/2018 PT NONREFUND - 04/12/2019 Adjustments: Diagnosis Code: S83.232D Balance Past Due:	\$10.00 \$10.00		15.00	0.00
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Item Description	Charges	Insurance Payments	Your Payments	Your Balance
Invoice #: 15874674 Provider: NATHAN M	LOMBARDI	PA	DOS: 11	/05/2018
Diagnosis Code: S83.232D Amount Pending with Insurance				0.00
Invoice #: 16185009 Provider: THEODORE	F SCHLEGE	MD	DOS: 12	/05/2018
Diagnosis Code: S83.512A Amount Pending with Insurance				0.00
Invoice #: 17213430 Provider: THEODORE	F SCHLEGE	MD	DOS: 12	/20/2018
(29888) ANTERIOR CRUCIATE LIGAMENT REPAI (29881) KNEE ARTHROSCOPY SURGICAL WITH M Fotal Charges: AETNA PAYMENT - 03/19/2019 Adjustments: AETNA PAYMENT - 04/17/2019 Adjustments: Diagnosis Code: S83.512A Amount Pending with Insurance		2100.35 1249.65 575.95 2388.05		0.00
Invoice #: 17215671 Provider: DREW A RA	INER MD		DOS: 12	/20/2018
(29888) ANTERIOR CRUCIATE LIGAMENT REPAI (29881) KNEE ARTHROSCOPY SURGICAL WITH M Fotal Charges: AETNA PAYMENT - 03/19/2019 Adjustments: Diagnosis Code: S83.512A Amount Pending with Insurance		360.06 477.44		\$741.00
Invoice #: 16359388 Provider: NATHAN M	LOMBARDI I	A	DOS: 12	/21/2018
Diagnosis Code: S83.512D Amount Pending with Insurance				0.00
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All Open Invoices				
Item Description	Charges	Insurance Payments		Your Balance
Invoice #: 16413470 Provider: THEODORE	F SCHLEGE	MD	DOS: 12	/21/2018
Total Charges: PREPAID PAYMENT-THANK YOU - 01/03/2019 PREPAID PAYMENT-THANK YOU - 01/11/2019 Diagnosis Code: 999.98 Invoice Balance	0.00		15.00 -15.00	0.00
Invoice #: 16492142 Provider: THEODORE	F SCHLEGE	MD	DOS: 12	/21/2018
(00605) KNEE KIT W BRACE Total Charges: PREPAID PAYMENT-THANK YOU - 01/11/2019 Diagnosis Code: S83.512D Invoice Balance	\$15.00 \$15.00		15.00	0.00
Invoice #: 16434218 Provider: NATHAN M	LOMBARDI	 A	DOS: 01	/02/2019
Diagnosis Code: S83.512D Amount Pending with Insurance				0.00
Invoice #: 16710405 Provider: THEODORE	F SCHLEGEI	MD	DOS: 01	/28/2019
Diagnosis Code: S83.512D Amount Pending with Insurance				0.00
Invoice #: 17180077 Provider: NATHAN M	LOMBARDI	A	DOS: 03	/11/2019
Diagnosis Code: S83.512D Amount Pending with Insurance				0.00
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All Open Invoices				3. W. A. S. T.
Item Description	Charges	Insurance Payments	Your Payments	Your Balance
Invoice #: 17654936 Provider: NATHAN M	LOMBARDI	PA	DOS: 04	/24/2019
(99213) OUTPT ESTAB VST-LVL III Total Charges: DISCOUNTED SERVICES LINE ITE - 07/03/20 Adjustments: AETNA PAYMENT - 08/08/2019 Adjustments: DISCOUNTED SERVICES - 08/08/2019 Adjustments: Diagnosis Code: S83.512D Balance Past Due:	\$203.00 \$203.00			\$34.49
Invoice #: 17814457 Provider: THEODORE	F SCHLEGE	MD	DOS: 05	/02/2019
(L1852) FUSION XT OTS OTS FIT Total Charges: DISCOUNTED SERVICES LINE ITE - 07/22/20 Adjustments: Diagnosis Code: S83.512D Balance Past Due:	\$1215.00 \$1215.00			\$729.00
Invoice #: 18188098 Provider: THEODORE	F SCHLEGE	MD	DOS: 06	
(99213) OUTPT ESTAB VST-LVL III Total Charges: AETNA PAYMENT - 08/08/2019 Adjustments: Diagnosis Code: S83.512D Amount Pending with Insurance	\$203.00 \$203.00	137.98 30.53		\$34.49
Total Account Balance:				\$1538.98
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