

TRUE HEARTS AND HANDS HOSPICE
3500 BRENTWOOD DR
COLLETVILLE, TX 76034

**In order to properly credit your account all
payments must be made to**

**Nuaxess Account Services
5/3 (Fifth-Third) Bank Account**

REMINDER: Please put invoice number(s) in the memo or notes on all forms
of payment to ensure proper credit is applied to your account.

REMIT TO: Nuaxess Account Services:
 ACH Routing: #071923909
 Wire Routing: #042000314
 Account: #7242568934

IF MAILING CHECKS:

Make payable to: Nuaxess Account Services
Mail to: Nuaxess Account Services
 Lock Box #235149
 PO Box 85149
 Chicago, IL 60689-5149

WE NOW OFFER AUTOMATIC PAYMENT PROGRAMS

Contact: billing@mynuaxess.com OR CALL: (844) 999-5777



Account Services

Monthly Statement

TRUE HEARTS AND HANDS HOSPICE
3500 BRENTWOOD DR
COLLETVILLE, TX 76034
kimberly.clute@trueheartsandhandshospice.com
cbrooks@cbsgroup.net

Invoice Number: 5578-2209
Coverage For: SEPTEMBER
Payment Due Date: 08/31/2022

PLAN	COVERAGE	QTY	PRICE	TOTAL
GOLD	Employee & Children	1	\$1,525.20	\$1,525.20
PLATINUM	Employee Only	1	\$847.34	\$847.34
SILVER	Employee Only	1	\$686.35	\$686.35
			GRAND TOTAL	\$3,058.89

Primary ACH Instructions:
Account Name: Nuaxess Account Services
Bank: 5/3 Bank
Routing Number 071923909
Account Number: 7242568934
Bank Address:
38 Fountain Square Plaza
Cincinnati, OH 45263

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CURRENT MONTH ENROLLMENT

MEMBER NAME	EFF DATE	PLAN	COVERAGE	PRICE
BRANSOM, JOHANA	02/01/2022	SILVER	EE	\$686.35
CLUTE, CHARLES	07/01/2022	PLATINUM	EE	\$847.34
LEMIEUX, TARA	02/01/2022	GOLD	EC	\$1525.20

Employee Only	2
Employee & Spouse	0
Employee & Children	1
Family	0