Intermountain Health

Amount Due:
$12,886.30

Account Activity

Guarantor Name:	Livio Sudiro
Guarantor Number:	1003675619
Statement Date:	10/7/2024
Due Date:	10/27/2024
Total Hospital Charges:	$242,793.85
Total Physician Charges:	$0.00
Total Payments/Adjustments:	-$229,907.55
Amount Due:	**$12,886.30**

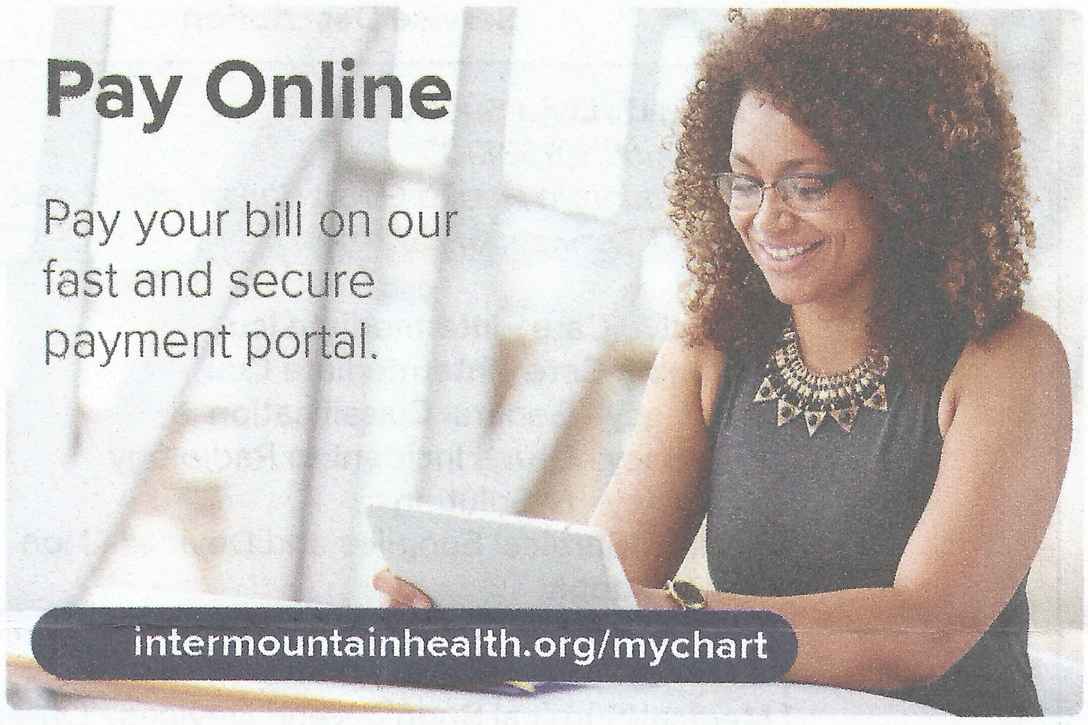
Past Due Notice

Thank you for choosing Intermountain Health for your healthcare needs. If you need assistance, we offer Payment Plans and a Financial Assistance Program for eligible patients.

For billing questions call us at 866-665-2636. Se Habla Espanol

Pay Online

Pay your bill on our fast and secure payment portal.



Manage Your Account

Self-Service Payment Plans
If you are unable to pay in full, please contact us at 866-665-2636 or visit intermountainhealth.org/mychart to set up a convenient monthly payment plan.

Sign-up for Paperless Billing
It's fast, easy and no postage necessary. Enroll today at intermountainhealth.org/mychart.

Mobile Quick Pay
Make an instant payment by using your smartphone!

Financial Assistance
You may qualify for financial assistance. To apply visit www.intermountainhealth.org/financialassistance or call us at 866-665-2636.

Intermountain Health
PO BOX 1259 DEPT #168041,OAKS, PA 19458

1 of 2

Have questions about your bill?
Call us: 866-665-2636 8:00am - 5:00pm Mon-Fri
Se habla espanol

ADDRESSEE:

LIVIO SUDIRO
722 ROCK RIDGE DR
LAFAYETTE CO 80026-8708

0026 012382

Guarantor Number:	1003675619
Due Date:	10/27/2024
Amount Due:	**$12,886.30**
Amount Paid:	$ _____

One-Time Payment: intermountainhealth.org/mychart

167972-PastDue-173

MAKE CHECKS PAYABLE AND REMIT TO:

Intermountain Health
PO BOX 200491
DALLAS TX 75320-0491

02 100724 1003675619 8 0001288630 9