

CLINEVA URGENT CARE

This is your Account ID
Please enter the first 5 digits
on the online bill pay form

Patient Name
Patient Account #
Statement Date

Sample Patient
XXXXXA15000
01/01/2019

Your Account Status

Your health insurance has been billed correctly and the remaining deductible is your responsibility.

Payment Due

\$.00

Due Upon Receipt

Choose a Payment Method



Pay Online
Recommended

Make a secure online payment: www.quickpayportal.com
QuickPay Code:



Mail Payment

Mail your payment with the coupon below.
Make checks payable to: CLINEVA URGENT CARE CENTERS.
Please include your account # on the check.

Balance Details

Service Date	Provider	Charges	Payments/Credits	Patient Balance
...	Dr. Awesome MD	\$145.00	\$.00	\$0.00 - DEDUCTIBLE

Questions? Have a question about your balance, or need to update your insurance information with us? Call 844-254-6382

Detach this coupon and return with your payment.



CLINEVA URGENT CARE CENTERS
PO BOX 14099
BELFAST ME 04915

Pay Online At QuickPay

www.quickpayportal.com | QuickPay Code:

Due Date	Patient Account #
Upon Receipt	
Amount Due	Amount Enclosed
\$.00	

Make checks payable: CLINEVA URGENT CARE CENTERS. Please include your account # on the check and use the return envelope provided for faster processing.



CLINEVA URGENT CARE CENTERS
ATTN # 20137R
PO BOX 14000
BELFAST ME 04915-4033

Check box if insurance or patient information has changed.
Please indicate change on reverse side.