


Reading Your New UPMC Statement

UPMC LIFE CHANGING MEDICINE

2 HOT METAL ST | DIST. ROOM 386 | PITTSBURGH PA 15203

Hospital/Physician Statement

-  For questions or to request an itemized statement, please call (412) 864-0284 or (844) 591-5949.
Email: patientstatements@upmc.edu
- Check if address/insurance changes are on back

Addressee




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Account Number	Due Date	Amount Due	Paid
See Below	10/23/2015	\$85.00	\$

Please make check payable to remit to


UPMC Health Services
PO BOX 371472
PITTSBURGH PA 15250-7

1

2

3

1. Payment Due Date

Date the payment is due

2. Amount Due

Payment amount due on this statement

3. Paid Amount

Pay online, with a check or money order, or use reverse side of remit coupon to pay by Credit Card


Date	Service Description	Status	Charges	Payments/ Adjustments	Patient Balance
Current Physician Charges					
	Patient: Account #: Provider: Date of Service: Location: Payment Due:	Current	\$181.00	\$151.60	\$29.40

**Patient
 Account Number**


Transaction Detail

Please see reverse side for our Financial Assistance Policies.

QUICK PAY



SCAN →



To make a fast & secure one-time payment!

Pay Online: upmc.mysecurebill.com
 myEasyMatch Code:

Physician Total.....\$86.12

AMOUNT DUE: \$86.12

**EZ Match Code for
online payments.**

QR Code Quick Pay

Conveniently pay your bill
by scanning the bar code
with your smart phone.