NORTHEAST ORTHOPAEDIC ALLIANCE, PLLC
Michael W. Geary, MD

Patient [redacted]
Ph [redacted]
State [redacted]

Payment Past Due

H[redacted] your balance of $548.00 is past due.

This is your second statement, and 1 of your bills is now over 35 days past due.
We have not received payment. Please respond to this past due notice.

Note From Your Practice

Thank you for choosing South Shore Orthopedics, a division of Northeast Orthopaedic Alliance (NOA). If you have questions about your bill, please call during regular business hours 781-337-5555. You can email billing@southshoreorthopedics.com or connect through patient portal. If you need assistance paying your bill, please contact our office regarding payment plan options. You can pay your bill online at www.southshoreorthopedics.com

Questions? Call us at 781-337-5555
Reference your ID: [redacted]

Summary

Your insurance [redacted]ovider, [redacted], needs information from you to de[redacted]mine coverage. Please contact your insurer. Other[redacted]e, this balance is your responsibility.

Original cost:
Insurance [redacted]ustment:
Your paym[redacted]ts and credits:
Amount d[redacted]

[redacted]

Details start on back >

Pay By Mail

partnership with athenahealth

Follow the instructions below to make a payment by mai[redacted]

Detach the coupon below and include in your payment.
Place in the enclosed envelope. **No cash, stapled checks, or other paper.** [redacted]nk you!
Mail your payment! *Note: our US-based payment processor, athenahealth, p[redacted]esses mail payments in Maine.*

Prefer to pay by check? Detach the slip below and include your pa[redacted]hecks, or other paper. Thank you!

NORTHEAST ORTHOPAEDIC ALLIANCE, PLLC
PO BOX 14099
BELFAST, ME 04915

Make checks pa[redacted] NORTHEAST ORTHOPAEDIC ALLIANCE, PLLC
1. Fill out the amo[redacted] enclosed below.
2. Place in provided envelope and mail.

Patient Account # is the numbers to the left of the A34145

[redacted]

Patient Account #	Amount Enclosed
153261A34145	

NORTHEAST ORTHOPAEDIC ALLIANCE, PLLC
ATTN # 43061E
PO BOX 14000
BELFAST ME 04915-4033