

PO BOX 58538 Webster, TX 77598 281-694-5986

ELLEN W. AKERS 2383 CALYPSO LN **LEAGUE CITY, TX 77573-0758** 

Rendering Physician:

(832)289-0685

Date of Last Payment: 5/26/2022

Patient:

05/03/22 99225

Statement Date	Invoice Number	Page	
02/10/2025	CLS AKEEL000	1	
Guarantor	Due Date	Payment Due	

**Pay Online** Go to: cls.health/payment or scan the QR Code

Make Checks Payable To:

Date of Birth:

-167.25

50.75

**CLS HEALTH PLLC** PO BOX 58538 Webster, TX 77598

Place of Service:

0.00

-50.75

Amount of Last Payment: 0.00

ELLEN W	. AKERS	NISARG PA	TEL MD	AKEEL000	UTMB	04/28/1962
Dates	Procedure	Desciption		Paid By Applied to Patient Deductible	Paid by UNITED	Adjustments Remainder
05/04/22	99217	OBSERVATION DISCHARGE	220.00	-59.50	0.00	-160.50 59.50
Patient:		Rendering P	hysician:	Chart Number:	Place of Service:	Date of Birth:
ELLEN W	. AKERS	REMY TEQV	WIMUAH MD	AKEEL000	UTMB	04/28/1962
				Paid By Applied to	Paid by	
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	UNITED	Adjustments Remainder
05/02/22	99220	Observation, Initial - High Severity	550.00	-129.50	0.00	-420.50 129.50

218.00

Chart Number:

Have a question about your balance, or need to update your insurance information with us? Call 281-694-5986

To make a payment online, go to cls.health/payment

If remitting payment via mail in check, Please include statement.

Subsequent observation care

Amount Due

239.75