




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

SUSAN M. ABBAS
2700 ROLLINGBROOK DR
BAYTOWN, TX 77521-3670

(832)597-4307

Statement Date	Invoice Number	Page
02/10/2025	CLS ABBSU000	1
Guarantor	Due Date	Payment Due
SUSAN M.	Upon Receipt	357.66

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CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment: 12/30/2024	Amount of Last Payment: -8.65
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Patient: SUSAN M. ABBAS	Rendering Physician: MOUSTAFA M. AHMED MD	Chart Number: ABBSU000	Place of Service: CLS HEALTH	Date of Birth: 04/16/1954
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MOLINA	Adjustments	Remainder
04/24/23	72146	Mri chest spine w/o dye		601.00			-165.19	-398.96	36.85
05/09/23	72148	Mri lumbar spine w/o dye		602.00			-165.46	-399.28	37.26

Patient: SUSAN M. ABBAS	Rendering Physician: MOUSTAFA M. AHMED MD	Chart Number: ABBSU000	Place of Service: CLS HEALTH	Date of Birth: 04/16/1954
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MOLINA	Adjustments	Remainder
04/06/23	99204	OFFICE VIST NEW LEVEL 4	25	503.00			-134.67	-333.98	34.35
06/01/23	J2001	Lidocaine injection	59	2.00			-0.05	-1.94	0.01
06/01/23	Q9967	Locm 300-399mg/ml iodine,1ml	59	3.00			-0.40	-2.50	0.10
07/14/23	99214	OFFICE VISIT EST/LEVEL 4	25	385.00			-103.17	-255.51	26.32
09/22/23	99214	OFFICE VISIT EST/LEVEL 4	25	385.00			-103.17	-255.51	26.32
12/14/23	99214	OFFICE VISIT EST/LEVEL 4	25	385.00			-103.17	-255.51	26.32
02/06/24	64493	Inj paravert f jnt l/s 1 lev	RT	533.00			-139.53	-357.95	35.52
02/06/24	64494	Inj paravert f jnt l/s 2 lev	RT	274.00			-72.17	-183.56	18.27
02/06/24	Q9967	Locm 300-399mg/ml iodine,1ml	59	1.00			-0.10	-0.88	0.02
02/06/24	J2001	Lidocaine injection	59	1.00			-0.02	-0.97	0.01
08/08/24	99214	OFFICE VISIT EST/LEVEL 4	25	387.00			-102.81	-257.96	26.23
10/03/24	99214	OFFICE VISIT EST/LEVEL 4	25	387.00			-102.81	-257.96	26.23

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Amount Due
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