

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

TIMOTHY M. BABB 13022 MAPLEWOOD LN OLD RIVER WINFREE, TX 77535-1851

Rendering Physician:

REGINA PILLAI MD

(713)851-7853

Date of Last Payment: 5/23/2024

Patient:

TIMOTHY M. BABB

Statement Date	Invoice Number	Page	
02/10/2025	CLS BABTI000	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:

06/04/1974

PO BOX 58538 Webster, TX 77598

Place of Service:

CLS HEALTH

Paid by

Amount of Last Payment: 0.00

Dates	Procedure	Desciption	Modifier	Charge	Patient Deductible	AETNA	Adjustments R	emainder
05/02/24	99205	OFFICE VIST NEW LEVEL 5	Q6	669.00	-220.00 -183.75	0.00	-485.25	-36.25
Patient:		Rendering Ph	nysician:		Chart Number:	Place of Service:	Date of B	irth:
TIMOTHY	M. BABB	REGINA PIL	LAI MD		BABTI000	CLS HEALTH	06/04/197	'4
					Paid By Applied to	Paid by		
Dates	Procedure	Desciption	Modifier	Charge	Patient Deductible	AETNA	Adjustments R	emainder
Dates 05/02/24	Procedure 94060	Desciption Evaluation of wheezing	Modifier Q6	Charge 116.00	Patient Deductible -35.57	AETNA 0.00	-80.43	35.57
		·						
05/02/24	94060	Evaluation of wheezing	Q6	116.00	-35.57	0.00	-80.43	35.57
05/02/24 05/02/24	94060 94726	Evaluation of wheezing Pulm funct tst plethysmograp	Q6 Q6	116.00 167.00	-35.57 -49.79	0.00 0.00	-80.43 -117.21	35.57 49.79
05/02/24 05/02/24 05/02/24	94060 94726 94729	Evaluation of wheezing Pulm funct tst plethysmograp Co/membane diffuse capacity	Q6 Q6 Q6	116.00 167.00 169.00	-35.57 -49.79 -53.54	0.00 0.00 0.00	-80.43 -117.21 -115.46	35.57 49.79 53.54

Chart Number:

BABTI000

Paid By Applied to

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.

Amount Due

102.68