

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

BETTY J. ANDREWS PO BOX 2424 ONALASKA, TX 77360-2424

(409)594-8700

Date of Last Payment: 7/9/2021

Statement Date	Invoice Number	Page	
02/10/2025	CLS ANDBE001	1	
Guarantor	Due Date	Payment Due	

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

Amount of Last Payment: -59.24

Patient:		Rendering Phy	•	Chart Number:	Place of Service:	Date of Birth	1:
BETTY J.	ANDREWS	S MOHAMMAD	J. BABA MD	ANDBE001	UTMB	03/24/1948	
				Paid By Applied to	Paid by		
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible M	MEDICARE	Adjustments Rem	ainder
04/06/21	99220	Observation, Initial - High Severity	GW 559.00	-37.26	-149.05	-372.69	37.26
Patient:		Rendering Phy	ysician:	Chart Number:	Place of Service:	Date of Birth	1:
BETTY J.	ANDREWS	S LUIGI TERMII	NELLA MD	ANDBE001	UTMB	03/24/1948	
				Paid By Applied to	Paid by		
Dates	Procedure	Desciption I	Modifier Charge	Patient Deductible M	MEDICARE	Adjustments Rem	ainder
04/07/21	99217	OBSERVATION DISCHARGE	GW 222.00		-59.24	-147.95 1	14.81

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

52.07