



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

AMY L. ALLEN
1404 WATERSIDE DR
LEAGUE CITY, TX 77573-0860

(281)549-7096

Statement Date	Invoice Number	Page
02/10/2025	CLS ALLAM000	1
Guarantor	Due Date	Payment Due
AMY L. ALLEN	Upon Receipt	31.63

Pay Online	
Go to: cls.health/payment or scan the QR Code	
Make Checks Payable To:	
CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment: 11/20/2024	Amount of Last Payment: -45.00
----------------------------------	--------------------------------

Patient: AMY L. ALLEN	Rendering Physician: RUDY LOZANO CARREON MD	Chart Number: ALLAM000	Place of Service: CLS HEALTH	Date of Birth: 10/05/1979
--------------------------	--	---------------------------	---------------------------------	------------------------------

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MEDICARE	Adjustments	Remainder
09/14/23	99205	OFFICE VIST NEW LEVEL 5		664.00	-29.91		-355.56	-263.09	15.44
10/12/23	99214	OFFICE VISIT EST/LEVEL 4		385.00			-103.17	-255.51	26.32
10/12/23	90833	Psytx w pt w e/m 30 min		214.00			-55.84	-143.92	14.24
01/11/24	99214	OFFICE VISIT EST/LEVEL 4		387.00	-100.00		-101.14	-260.06	-74.20
01/11/24	90833	Psytx w pt w e/m 30 min		217.00			-56.79	-145.72	14.49

Patient: AMY L. ALLEN	Rendering Physician: RUDY LOZANO CARREON MD	Chart Number: ALLAM000	Place of Service: CLS HEALTH	Date of Birth: 10/05/1979
--------------------------	--	---------------------------	---------------------------------	------------------------------

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MEDICARE	Adjustments	Remainder
11/15/23	99214	OFFICE VISIT EST/LEVEL 4	95	385.00			-103.17	-255.51	26.32
11/15/23	90833	Psytx w pt w e/m 30 min	95	214.00			-55.84	-143.92	14.24
12/13/23	99215	OFFICE VISIT EST/LEVEL 5	95	540.00	-66.72		-144.59	-358.53	-29.84
12/13/23	90833	Psytx w pt w e/m 30 min	95	214.00			-55.84	-143.92	14.24
02/07/24	99214	OFFICE VISIT EST/LEVEL 4	95	387.00	-29.91		-101.14	-260.06	-4.11
02/07/24	90833	Psytx w pt w e/m 30 min	95	217.00			-56.79	-145.72	14.49

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
31.63