




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

CHRISTIANA L. ANDERSON
2514 FOXGLOVE ST
HIGHLANDS, TX 77562-3165

(281)813-6327

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDCH005	1
Guarantor	Due Date	Payment Due
CHRISTIANA L.	Upon Receipt	148.72

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: 8/12/2022			Amount of Last Payment: -190.04		
Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:	
CHRISTIANA L. ANDERSON	FARRAH ALI FNP-C	ANDCH005	SYLVAN	10/26/1953	

Dates	Procedure	Description	Modifier	Charge	Paid By		Paid by	Adjustments	Remainder
					Applied to	Patient Deductible			
04/19/22	99306	Nursing Home Initial Visit Level 3		507.00		-28.72	-113.72	-364.56	28.72
04/21/22	99308	Nursing fac care subseq		212.00		-12.00	-47.51	-152.49	12.00
04/26/22	99308	Nursing fac care subseq		212.00		-12.00	-47.51	-152.49	12.00
05/10/22	99308	Nursing fac care subseq		212.00		-12.00	-47.51	-152.49	12.00
05/12/22	99308	Nursing fac care subseq		212.00		-12.00	-47.51	-152.49	12.00
05/17/22	99308	Nursing fac care subseq		212.00		-12.00	-47.51	-152.49	12.00
05/19/22	99308	Nursing fac care subseq		212.00		-12.00	-47.51	-152.49	12.00
05/24/22	99308	Nursing fac care subseq		212.00			-47.51	-152.49	12.00
05/26/22	99308	Nursing fac care subseq		212.00			-47.51	-152.49	12.00
05/31/22	99308	Nursing fac care subseq		212.00			-47.51	-152.49	12.00
06/02/22	99308	Nursing fac care subseq		212.00			-47.51	-152.49	12.00

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
148.72