



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

LAURA R. ALCAZAR
675 MILES RD TRLR 35
BACLIFF, TX 77518-2071

(361)243-0583

| Statement Date | Invoice Number | Page |
|----------------|----------------|-------------|
| 02/10/2025 | CLS ALCLA000 | 2 |
| Guarantor | Due Date | Payment Due |
| LAURA R. | Upon Receipt | 8.57 |

| Pay Online | |
|---|---|
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| CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598 | |

| | | | | | | |
|----------|-------|------------------------------|--------|--------|---------|-------|
| 09/25/23 | 80307 | Drug test prsmv chem analyzr | 186.00 | -23.30 | -154.93 | 7.77 |
| 11/21/23 | 80307 | Drug test prsmv chem analyzr | 186.00 | -23.30 | -154.93 | 7.77 |
| 01/22/24 | 80307 | Drug test prsmv chem analyzr | 186.00 | -23.30 | -154.93 | 7.77 |
| 01/22/24 | G0483 | Drug test def 22+ classes | 741.00 | -92.59 | -617.54 | 30.87 |

| | | | | |
|------------------|----------------------|---------------|-------------------|----------------|
| Patient: | Rendering Physician: | Chart Number: | Place of Service: | Date of Birth: |
| LAURA R. ALCAZAR | MOUSTAFA M. AHMED MD | ALCLA000 | CLS HEALTH | 08/18/1975 |

| Dates | Procedure | Description | Modifier Charge | Paid By Patient | Applied to Deductible | Paid by Ambetter | Adjustments | Remainder |
|----------|-----------|--------------------------|-----------------|-----------------|-----------------------|------------------|-------------|-----------|
| 12/29/23 | 72148 | Mri lumbar spine w/o dye | 602.00 | -51.51 | -123.61 | -437.19 | -10.31 | |

| | | | | |
|------------------|----------------------|---------------|-------------------|----------------|
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| LAURA R. ALCAZAR | MOUSTAFA M. AHMED MD | ALCLA000 | CLS HEALTH | 08/18/1975 |

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|----------|-----------|------------------------------|-----------------|-----------------|-----------------------|------------------|-------------|-----------|
| 12/27/23 | 73030 | X-ray exam of shoulder | 105.00 | -21.56 | -76.25 | 7.19 | | |
| 12/27/23 | 73502 | X-ray exam hip uni 2-3 views | 143.00 | -29.21 | -104.05 | 9.74 | | |

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

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| Amount Due |
|------------|
| 8.57 |