



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

MAHA ALOOSH
263 WESTWOOD DR
LEAGUE CITY, TX 77573-3489

(832)544-9160

Statement Date	Invoice Number	Page
02/10/2025	CLS ALOMA000	1
Guarantor	Due Date	Payment Due
MAHA ALOOSH	Upon Receipt	47.24

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CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment: 3/3/2022	Amount of Last Payment: -97.13
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Patient: MAHA ALOOSH	Rendering Physician: NISARG PATEL MD	Chart Number: ALOMA000	Place of Service: UTMB	Date of Birth: 08/14/1986
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Dates	Procedure	Description	Modifier	Charge	Paid By Applied to Patient Deductible	Paid by UNITED	Adjustments	Remainder
11/23/21	99217	OBSERVATION DISCHARGE		222.00		-44.63	-162.50	14.87

Patient: MAHA ALOOSH	Rendering Physician: OMAR ALBUSTAMI MD	Chart Number: ALOMA000	Place of Service: UTMB	Date of Birth: 08/14/1986
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Dates	Procedure	Description	Modifier	Charge	Paid By Applied to Patient Deductible	Paid by UNITED	Adjustments	Remainder
11/22/21	99220	Observation, Initial - High Severity		559.00		-97.13	-429.50	32.37

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Amount Due
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