



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

TORRE E. ANDERSON
2731 DRY CREEK DR
MISSOURI CITY, TX 77459-2086

(323)649-3253

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDTO001	1
Guarantor	Due Date	Payment Due
TORRE E.	Upon Receipt	342.07

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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
TORRE E. ANDERSON	ROHIT R. DHIR MD	ANDTO001	CLS HEALTH	09/13/1982

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by AETNA	Adjustments	Remainder
07/17/23	99204	OFFICE VIST NEW LEVEL 4	Q6	503.00	-20.00	-138.95	0.00	-364.05	118.95
12/13/23	99992	NO SHOW	Q6	50.00			0.00		50.00

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
TORRE E. ANDERSON	ROHIT R. DHIR MD	ANDTO001	CLS HEALTH	09/13/1982

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by AETNA	Adjustments	Remainder
08/28/23	99214	OFFICE VISIT EST/LEVEL 4	GT	385.00	-20.00	-106.56	0.00	-278.44	86.56

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
TORRE E. ANDERSON	ABDULHADI M. AKHTAR MD	ANDTO001	CLS HEALTH	09/13/1982

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by AETNA	Adjustments	Remainder
10/23/23	99214	OFFICE VISIT EST/LEVEL 4	GT	385.00	-20.00	-106.56	0.00	-278.44	86.56

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Amount Due

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