



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

DULCE M. ANDRADE
3207 SUITER WAY
PASADENA, TX 77503-2151

(832)455-4310

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDDU000	1
Guarantor	Due Date	Payment Due
DULCE M.	Upon Receipt	21.03

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Date of Last Payment: 12/13/2024	Amount of Last Payment: -516.06
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Patient: DULCE M. ANDRADE	Rendering Physician: ABDELNASER ELKHALILI MD	Chart Number: ANDDU000	Place of Service: CLS HEALTH	Date of Birth: 09/12/1954
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MEDICARE	Paid by MUTUAL	Adjustments	Remainder
01/18/21	99214	OFFICE VISIT EST/LEVEL 4		404.00	-149.57	-26.91	-108.95	-26.91	-268.14	-149.57

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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MEDICARE	Paid by MUTUAL	Adjustments	Remainder
01/17/23	99213	OFFICE VISIT EST/LEVEL 3	25	272.00		-93.05	0.00	0.00	-178.95	93.05
01/17/23	96413	Chemo iv infusion 1 hr		394.00		-53.86	-63.36	-16.16	-260.62	53.86

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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MEDICARE	Paid by MUTUAL	Adjustments	Remainder
01/04/22	99214	OFFICE VISIT EST/LEVEL 4	25	400.00	-149.57	-133.20	0.00	0.00	-266.80	-16.37
01/04/22	96401	Chemo anti-neopl sq/ir		480.00		-111.81	-48.63	-12.01	-319.56	99.80

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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by MEDICARE	Paid by MUTUAL	Adjustments	Remainder
01/11/24	99214	OFFICE VISIT EST/LEVEL 4	25	387.00	-240.00	-129.00	0.00	0.00	-258.00	-111.00
01/11/24	96413	Chemo iv infusion 1 hr		385.00		-51.86	-51.04	-15.32	-266.78	51.86

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