

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

JOSE AVINA CERVANTES 404 AVENUE F SOUTH HOUSTON, TX 77587-4311

Rendering Physician:

**EMRAN ABU ATHERAH MD** 

(713)493-4136

Date of Last Payment: 4/2/2024

Procedure Descintion

JOSE AVINA CERVANTES

Patient:

Dates

	Statement Date	Invoice Number	Page		
	02/10/2025	CLS AVIJO000	1		
_					
	Guarantor	Due Date	Payment Due		

Pay Online

Go to: cls.health/payment
or scan the QR Code

Make Checks Payable To:

Date of Birth:

11/27/1951

PO BOX 58538 Webster, TX 77598

Place of Service:

**UTMB** 

Paid by

Amount of Last Payment: -133.54

Dates	i i ocedai e	Desciption	Widdiner Charge	Tatient beductible	AWIERIGR	Adjustments Re	ilialiluei
03/22/22	99223	INITIAL HOSPITAL/HIGH	609.00		-162.52	-405.85	40.63
Patient:		Rendering PI	hysician:	Chart Number:	Place of Service:	Date of Bi	rth:
JOSE AV	INA CERV	ANTES EMRAN ABI	J ATHERAH MD	AVIJO000	UTMB	11/27/195	1
				Paid By Applied to	Paid by		
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	AMERIVA	Adjustments Re	mainder
12/07/22	99233	HOSPITAL, SUBSEQUENT, HIGH	315.00		-82.31	-211.69	21.00
12/08/22	99233	HOSPITAL, SUBSEQUENT, HIGH	315.00		-82.31	-211.69	21.00
12/09/22	99233	HOSPITAL, SUBSEQUENT, HIGH	315.00		-82.31	-211.69	21.00

Chart Number:

**AVIJO000** 

Paid By Applied to

Modifier Charge Patient Deductible AMERICA

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

103.63