



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

ALEXANDER Y. ARON
4309 SPOONBILL DR
SEABROOK, TX 77586-2562

(281)961-1587

Statement Date	Invoice Number	Page
02/10/2025	CLS AROAL000	1
Guarantor	Due Date	Payment Due
ALEXANDER Y.	Upon Receipt	32.59

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PO BOX 58538
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Date of Last Payment:	11/12/2024	Amount of Last Payment:	-9.01
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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ALEXANDER Y. ARON	ROHIT R. DHIR MD	AROAL000	CLS HEALTH	10/11/1948

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
					Patient	Deductible	MEDICARE		
02/15/22	99204	OFFICE VIST NEW LEVEL 4		521.00	-212.00	-173.69	0.00	-347.31	-38.31
02/15/22	51798	Us urine capacity measure		33.00		-10.99	0.00	-22.01	10.99
02/17/22	55899	Genital surgery procedure		1,103.0	-59.00	-15.75	-63.03	-1,024.22	-43.25
02/17/22	51784	Anal/urinary muscle study		202.00		-6.73	-26.94	-168.33	6.73
02/17/22	51741	Electro-uflowmetry first		43.00		-1.45	-5.79	-35.76	1.45
02/17/22	51798	Us urine capacity measure		33.00		-2.20	-8.79	-22.01	2.20
02/22/22	99214	OFFICE VISIT EST/LEVEL 4	25	400.00	-76.65	-65.30	-67.91	-266.79	-11.35
02/22/22	52000	Cystoscopy		779.00		-51.92	-207.72	-519.36	51.92
02/22/22	76872	Us transrectal		444.00		-29.61	-118.47	-295.92	29.61

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
ALEXANDER Y. ARON	ROHIT R. DHIR MD	AROAL000	CLS HEALTH	10/11/1948

Dates	Procedure	Description	Modifier	Charge	Paid By	Applied to	Paid by	Adjustments	Remainder
					Patient	Deductible	MEDICARE		
09/11/24	99214	OFFICE VISIT EST/LEVEL 4		387.00	-26.22		-102.81	-257.96	0.01
09/11/24	G2211	Complex e/m visit add on		49.00			-13.13	-32.52	3.35
09/11/24	51798	Us urine capacity measure		34.00			-9.01	-22.69	2.30
10/04/24	51784	Anal/urinary muscle study		194.00			-51.58	-129.26	13.16
10/04/24	51741	Electro-uflowmetry first		44.00			-5.81	-36.71	1.48
10/04/24	51798	Us urine capacity measure		34.00			-9.01	-22.69	2.30

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Amount Due

32.59