

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

ELIZABETH A. AUTRY 5103 DEVON GREEN DR KATY, TX 77449-6039

Rendering Physician:

(832)331-7967

Date of Last Payment: 11/27/2024

Patient:

Call 281-694-5986

To make a payment online, go to cls.health/payment

If remitting payment via mail in check, Please include statement.

Statement Date	Invoice Number	Page		
02/10/2025	CLS AUTEL001	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:

Continued

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Place of Service:

Amount of Last Payment: -10.00

ELIZABETH A. AUTRY HEENA S.		RY HEENA Š. A	AHMED MD		AUTEL001	CLS HEALTH	01/15/1980		
					Paid By Applied to	Paid by			
Dates	Procedure	Desciption	Modifier Charge Pa		Patient Deductible	BLUE	Adjustments R	Adjustments Remainder	
02/13/24	99205	OFFICE VIST NEW LEVEL 5	25	669.00	i	-154.27	-506.78	7.95	
02/29/24	27096	Inject sacroiliac joint	50	493.00	-91.66	-167.48	-269.69	-35.83	
02/29/24	Q9967	Locm 300-399mg/ml iodine,1ml	59	3.00	ı	0.00	-1.95	1.05	
03/28/24	64405	Njx aa&/strd gr ocpl nrv	50	233.00	-19.75	-77.04	-130.28	5.93	
03/28/24	76942	Echo guide for biopsy		174.00	ı	-35.39	-126.81	11.80	
03/28/24	Q9967	Locm 300-399mg/ml iodine,1ml	59	1.00	ı	0.00	-0.65	0.35	
Patient:		Rendering Pl	hysician:		Chart Number:	Place of Service:	Date of Birth:		
ELIZABETH A. AUTRY HEENA S. AHMED MD			AUTEL001	CLS HEALTH 01/15/1980		30			
					Paid By Applied to	Paid by			
Dates	Procedure	Desciption	Modifier	odifier Charge Patient Deduct		BLUE	Adjustments Remainder		
02/13/24	80307	Drug test prsmv chem anlyzr		186.00		-25.64	-151.82	8.54	
02/13/24	G0483	Drug test def 22+ classes		741.00	I	-101.86	-605.19	33.95	
05/14/24	80307	Drug test prsmv chem anlyzr		186.00	ı	-25.64	-151.82	8.54	
06/11/24	80307	Drug test prsmv chem anlyzr		186.00	I	-25.64	-151.82	8.54	
02/16/24	80307	Drug test prsmv chem anlyzr		186.00	ı	-25.64	-151.82	8.54	
08/08/24	80307	Drug test prsmv chem anlyzr		186.00	I	-25.64	-151.82	8.54	
Patient: Rendering Physician:		Chart Number:	Place of Service:	Date of Birth:					
ELIZABETH A. AUTRY HEENA S. AHMED MD		AUTEL001	CLS HEALTH	01/15/1980					
					Paid By Applied to	Paid by			
Dates	Procedure	Desciption	Modifier	Charge	Patient Deductible	BLUE	Adjustments R	emainder	
07/09/24	99214	OFFICE VISIT EST/LEVEL 4	95	387.00	ı	-73.54	-303.46	10.00	
Have a question about your balance, or need to update your insurance information with us?						Amount Due			

Chart Number: