



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

LERITA ANDINO
8316 CHANNELSIDE ST
HOUSTON, TX 77012-2604

(832)549-2356

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDLE001	1
Guarantor	Due Date	Payment Due
LERITA ANDINO	Upon Receipt	161.18

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CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598	

Date of Last Payment: 9/19/2024	Amount of Last Payment: -55.00
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Patient: LERITA ANDINO	Rendering Physician: ABDELNASER ELKHALILI MD	Chart Number: ANDLE001	Place of Service: CLS HEALTH	Date of Birth: 01/10/1965
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by Ambetter	Adjustments	Remainder
04/27/21	99999	NO SHOW		25.00			0.00		25.00

Patient: LERITA ANDINO	Rendering Physician: ABDELNASER ELKHALILI MD	Chart Number: ANDLE001	Place of Service: CLS HEALTH	Date of Birth: 01/10/1965
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by Ambetter	Adjustments	Remainder
08/17/22	99214	OFFICE VISIT EST/LEVEL 4	25	400.00			-61.60	-333.40	5.00
08/17/22	20610	Drain/inj joint/bursa w/o us	RT	204.00			-47.54	-136.08	20.38
08/17/22	20610	Drain/inj joint/bursa w/o us	LT	204.00			-23.77	-170.04	10.19
08/17/22	J3301	Triamcinolone acet inj nos		24.00			-5.16	-13.68	5.16
11/08/23	99999	NO SHOW		25.00			0.00		25.00

Patient: LERITA ANDINO	Rendering Physician: MOUSTAFA M. AHMED MD	Chart Number: ANDLE001	Place of Service: CLS HEALTH	Date of Birth: 01/10/1965
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by Ambetter	Adjustments	Remainder
09/21/22	72100	X-ray exam l-s spine 2/3 wvs		127.00	-12.69		-25.17	-91.04	-1.90

Patient: LERITA ANDINO	Rendering Physician: ABDELNASER ELKHALILI MD	Chart Number: ANDLE001	Place of Service: CLS HEALTH	Date of Birth: 01/10/1965
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Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by Ambetter	Adjustments	Remainder
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Amount Due
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