

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

SANABEL ALMOUIE 4627 STONEMEDE DR FRIENDSWOOD, TX 77546-3135

(832)862-0579

Date of Last Payment: 7/25/2024

Statement Date	Invoice Number	Page 1	
02/10/2025	CLS ALMSA001		
Guarantor	Due Date	Payment Due	
SANABEL	Upon Receipt	479.43	

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

Make Checks Payable To:

CLS HEALTH PLLC PO BOX 58538 Webster, TX 77598

Amount of Last Payment: -106.56

Patient:		Rendering	Physician:	Chart Number:	Place of Service:	Date of Birth:
SANABEL	L ALMOUIE	E JIHAD M. !	HARMOUCHE MD	ALMSA001	CLS HEALTH	09/22/1989
				Paid By Applied to	Paid by	
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	AETNA	Adjustments Remainder
03/30/22	99204	OFFICE VIST NEW LEVEL 4	521.00	-42.40 -118.38	0.00	-402.62 75.98
05/11/22	76830	Transvaginal us non-ob	59 385.00	-101.82	0.00	-283.18 101.82
05/11/22	76856	Us exam pelvic complete	340.00	-90.06	0.00	-249.94 90.06
Patient:		Rendering	Physician:	Chart Number:	Place of Service:	Date of Birth:
SANABEL	L ALMOUIE	E JIHAD M. I	HARMOUCHE MD	ALMSA001	CLS HEALTH	09/22/1989
				Paid By Applied to	Paid by	
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	AETNA	Adjustments Remainder
10/05/22	99214	OFFICE VISIT EST/LEVEL 4	400.00	-19.38 -91.51	0.00	-308.49 72.13
10/11/22	99213	OFFICE VISIT EST/LEVEL 3	283.00	-64.49	0.00	-218.51 64.49
12/06/22	99214	OFFICE VISIT EST/LEVEL 4	385.00	-112.00 -91.51	0.00	-293.49 -20.49
04/03/23	99204	OFFICE VIST NEW LEVEL 4	503.00	-112.00 -106.56	0.00	-396.44 -5.44
04/03/23	76801	OB US < 14 WKS SINGLE FETUS	358.00	-98.93	0.00	-259.07 98.93
Patient:		Rendering	Physician:	Chart Number:	Place of Service:	Date of Birth:
SANABEL	L ALMOUIE	E VENKATA	K. JONNA MD	ALMSA001	CLS HEALTH	09/22/1989
				Paid By Applied to	Paid by	
Dates	Procedure	Desciption	Modifier Charge	Patient Deductible	AETNA	Adjustments Remainder
07/25/23	99204	OFFICE VIST NEW LEVEL 4	503.00	-25.00 -138.95	0.00	-364.05 113.95

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

Continued