



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

TRACI M. ANDERSON
16635 TIBET RD
FRIENDSWOOD, TX 77546-4143

(713)726-6309

Statement Date	Invoice Number	Page
02/10/2025	CLS ANDTR000	1
Guarantor	Due Date	Payment Due
TRACI M.	Upon Receipt	68.92

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Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
TRACI M. ANDERSON	MOUSTAFA M. AHMED MD	ANDTR000	CLS HEALTH	12/20/1969

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by CIGNA	Adjustments	Remainder
09/30/21	99214	OFFICE VISIT EST/LEVEL 4	25	404.00	-11.44		-74.86	-315.93	1.77
11/05/21	99214	OFFICE VISIT EST/LEVEL 4	25	404.00	-11.44		-88.07	-315.93	-11.44
12/14/21	99999	NO SHOW		25.00			0.00		25.00

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
TRACI M. ANDERSON	MAHMOOD DWEIK MD	ANDTR000	CLS HEALTH	12/20/1969

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by CIGNA	Adjustments	Remainder
07/01/21	99999	NO SHOW		25.00			0.00		25.00

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
TRACI M. ANDERSON	MAHMOOD DWEIK MD	ANDTR000	CLS HEALTH	12/20/1969

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by CIGNA	Adjustments	Remainder
09/23/21	95806	Sleep study unatt&resp efft	26	155.00		-9.32	-52.80	-92.88	9.32

Patient:	Rendering Physician:	Chart Number:	Place of Service:	Date of Birth:
TRACI M. ANDERSON	MAHMOOD DWEIK MD	ANDTR000	CLS HEALTH	12/20/1969

Dates	Procedure	Description	Modifier	Charge	Paid By Patient	Applied to Deductible	Paid by CIGNA	Adjustments	Remainder
10/27/21	95811	Polysom 6/> yrs cpap 4/> parm	26	393.00		-19.27	-109.22	-264.51	19.27

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