

Auburn Montgomery Student Health Services
Patient Ledger
7/17/2026

Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Till, Breena	05/27/2026	05/27/2026	Auburn Montgome	P	\$87.12	\$87.12	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99213 [25] : INTERMEDIATE EST PT	05/27/2026	N39.0	P	06/01/2026	\$65.00	\$65.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BUTLER, ROSALYN	CoPay	Credit Card		05/27/2026	\$30.00	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	06/01/2026	\$11.81	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		06/01/2026	\$23.19	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	06/01/2026	\$30.00	Hall, Amy	
81003 [QW] : UA	05/27/2026	R30.0	P	06/01/2026	\$0.00	\$0.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		06/01/2026	\$0.00	Hall, Amy	
96372: THERAPEUTIC INJECTION ADMIN	05/27/2026	N39.0	P	06/01/2026	\$20.00	\$20.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	06/01/2026	\$0.89	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		06/01/2026	\$19.11	Hall, Amy	
J0696: Rocephin 1G	05/27/2026	N39.0	P	06/01/2026	\$2.12	\$2.12	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	06/01/2026	\$0.40	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		06/01/2026	\$1.72	Hall, Amy	
Barton, Lindsey	11/12/2024	11/12/2024	Auburn Montgome	P	\$175.28	\$175.28	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99214 [25] : Detailed	11/12/2024	J01.90, J45.21, R05.9, R09.81	P	01/23/2025	\$67.00	\$67.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BUTLER, ROSALYN	CoPay	Credit Card		11/12/2024	\$30.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$37.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	01/23/2025	\$30.00	Smith, Tonya	
J1100: Dexamethasone 4mg/ml	11/12/2024	J01.90, R05.9, J45.21, R09.81	P	01/23/2025	\$0.56	\$0.56	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$0.44	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$0.12	Smith, Tonya	
87426: COVID Rapid Testing	11/12/2024	J01.90, R05.9, J45.21, R09.81	P	01/23/2025	\$31.00	\$31.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$26.50	Smith, Tonya	

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BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$4.50	Smith, Tonya
87804: INFLUENZA Rapid Test	11/12/2024	J01.90, R05.9, J45.21, R09.81	P	01/23/2025	\$30.00	\$0.00

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Payer			Type	Method	Code	Date Applied	Amount	AppliedBy
BLUE CROSS BLUE SHIELD OF ALABAMA			Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$22.24	Smith, Tonya
BLUE CROSS BLUE SHIELD OF ALABAMA			Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$7.76	Smith, Tonya
96372: THERAPEUTIC INJECTION ADMIN		11/12/2024	J01.90, R05.9, J45.21, R09.81	P	01/23/2025	\$38.00	\$38.00	\$0.00
Payer			Type	Method	Code	Date Applied	Amount	AppliedBy
BLUE CROSS BLUE SHIELD OF ALABAMA			Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$38.00	Smith, Tonya
J0696: Rocephin 1G		11/12/2024	J01.90, R05.9, J45.21, R09.81	P	01/23/2025	\$2.12	\$2.12	\$0.00
Payer			Type	Method	Code	Date Applied	Amount	AppliedBy
BLUE CROSS BLUE SHIELD OF ALABAMA			Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$1.76	Smith, Tonya
BLUE CROSS BLUE SHIELD OF ALABAMA			Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$0.36	Smith, Tonya
J1010: Methylprednisolone Acetate		11/12/2024	J01.90, R05.9, J45.21, R09.81	P	01/23/2025	\$6.60	\$6.60	\$0.00
Payer			Type	Method	Code	Date Applied	Amount	AppliedBy
BLUE CROSS BLUE SHIELD OF ALABAMA			Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$3.60	Smith, Tonya
BLUE CROSS BLUE SHIELD OF ALABAMA			Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$3.00	Smith, Tonya

Barton, Lindsey		06/10/2024	06/10/2024	Auburn Montgome	P	\$0.00	\$0.00	\$0.00
Procedure		DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
00000: NO CHARGE		06/10/2024	D50.9, R53.83, R42	P	07/12/2024	\$0.00	\$0.00	\$0.00