

Auburn Montgomery Student Health Services
Patient Ledger
7/16/2026

Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Barton, Lindsey	11/07/2024	11/07/2024	Auburn Montgome	P	\$117.00	\$117.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
87880: STREP A	11/07/2024	J02.9, R05.9, R51.9	P	01/23/2025	\$12.00	\$12.00	\$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	\$11.12	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$0.88	Smith, Tonya	
87804: INFLUENZA Rapid Test	11/07/2024	J02.9, R05.9, R51.9	P	01/23/2025	\$30.00	\$30.00	\$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	\$22.24	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$7.76	Smith, Tonya	
87426: COVID Rapid Testing	11/07/2024	J02.9, R05.9, R51.9	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	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	01/23/2025	\$4.50	Smith, Tonya	
99213: INTERMEDIATE EST PT	11/07/2024	J06.9, J02.9, R05.9, R51.9	P	01/23/2025	\$44.00	\$44.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLAKE, ANDREA	CoPay	Credit Card		11/07/2024	\$30.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		01/23/2025	\$14.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	01/23/2025	\$30.00	Smith, Tonya	
Blackwell, Robin	01/20/2023	01/20/2023	Auburn Montgome	P	\$15.00	\$15.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
00002: Non Student Exam	01/20/2023	J01.90, R09.81, R05.9	P	02/11/2023	\$15.00	\$15.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLAKE, ANDREA	CoPay	Credit Card		01/20/2023	\$15.00	Smith, Tonya	