

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

Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Till, Breena	05/07/2026	05/07/2026	Auburn Montgome	P	\$35.00	\$35.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99212: LIMITED EST PT	05/07/2026	J06.9	P	05/26/2026	\$35.00	\$35.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
DERRICK SMITH	CoPay	Credit Card		05/07/2026	\$30.00	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		05/26/2026	\$2.67	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	05/26/2026	\$2.33	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	05/26/2026	\$30.00	Hall, Amy	
Till, Breena	03/24/2026	03/30/2026	Auburn Montgome	P	\$20.00	\$20.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
SP865 [80] : TB test - IPPD	03/24/2026	Z11.1	P	03/30/2026	\$20.00	\$20.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
SMITH, DERRICK	CoPay	Credit Card		03/30/2026	\$20.00	Hall, Amy	
Till, Breena	03/27/2026	03/27/2026	Auburn Montgome	P	\$0.00	\$0.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
00000: TB Read Only	03/27/2026	Z11.1	P	03/31/2026	\$0.00	\$0.00	\$0.00
00000: NO CHARGE	03/27/2026	Z11.1	P	03/31/2026	\$0.00	\$0.00	\$0.00
Till, Breena	03/24/2026	03/24/2026	Auburn Montgome	P	\$65.00	\$65.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99213: INTERMEDIATE EST PT	03/24/2026	H60.91, M26.69, Z11.1	P	04/08/2026	\$65.00	\$65.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
SMITH, DERRICK	CoPay	Credit Card		03/24/2026	\$50.00	Hall, Amy	
	Redistribution		Redistribution	03/30/2026	\$20.00	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		04/08/2026	\$23.19	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	04/08/2026	\$11.81	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	04/08/2026	\$30.00	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	04/08/2026	\$30.00	Hall, Amy	
Barton, Lindsey	08/28/2024	08/28/2024	Auburn Montgome	P	\$44.00	\$14.00	\$30.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99213: INTERMEDIATE EST PT	08/28/2024	H92.01, R51.9	P	10/11/2024	\$44.00	\$14.00	\$30.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		10/11/2024	\$14.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	10/11/2024	\$30.00	Smith, Tonya	

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Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Barton, Lindsey	08/26/2024	08/27/2024	Auburn Montgome	P	\$72.36	\$72.36	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
96372: THERAPEUTIC INJECTION ADMIN	08/26/2024	H65.01	P	10/11/2024	\$19.00	\$19.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		10/11/2024	\$19.00	Smith, Tonya	
J1010: Methylprednisolone Acetate	08/26/2024	H65.01	P	10/11/2024	\$8.80	\$8.80	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		10/11/2024	\$8.80	Smith, Tonya	
J1100: Dexamethasone 4mg/ml	08/26/2024	H65.01	P	10/11/2024	\$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)		10/11/2024	\$0.44	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	10/11/2024	\$0.12	Smith, Tonya	
99213 [25] : INTERMEDIATE EST PT	08/26/2024	H65.01	P	10/11/2024	\$44.00	\$44.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
SMITH, DERRICK	CoPay	Credit Card		08/26/2024	\$30.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		10/11/2024	\$14.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	10/11/2024	\$30.00	Smith, Tonya	
Barton, Lindsey	06/20/2024	06/20/2024	Auburn Montgome	P	\$44.00	\$0.00	\$44.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99213: INTERMEDIATE EST PT	06/20/2024	J20.9, J45.909, R05.9	P	07/12/2024	\$44.00	\$0.00	\$44.00
Barton, Lindsey	01/19/2024	01/19/2024	Auburn Montgome	P	\$128.00	\$128.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99386 [25] : WELL VISIT NEW 40-64 YRS	01/19/2024	Z00.00, Z23, Z13.1, Z13.220	P	02/21/2024	\$81.00	\$81.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		02/21/2024	\$81.00	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		02/21/2024	\$0.00	Smith, Tonya	
90686: Influenza virus vaccine	01/19/2024	Z23	P	02/21/2024	\$25.00	\$25.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		02/21/2024	\$22.35	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	02/21/2024	\$2.65	Smith, Tonya	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		02/21/2024	\$0.00	Smith, Tonya	
90471: Immunization Injection Administration	01/19/2024	Z23	P	02/21/2024	\$22.00	\$22.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	

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BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		02/21/2024	\$19.11	Smith, Tonya
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	02/21/2024	\$2.89	Smith, Tonya
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		02/21/2024	\$0.00	Smith, Tonya