

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

Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Till, Breena	05/11/2026	05/11/2026	Auburn Montgome	P	\$35.00	\$5.00	\$30.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99212: LIMITED EST PT	05/11/2026	E11.65	P	05/26/2026	\$35.00	\$5.00	\$30.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
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	05/07/2026	05/07/2026	Auburn Montgome	P	\$65.00	\$65.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99213: INTERMEDIATE EST PT	05/07/2026	J01.41	P	05/26/2026	\$65.00	\$65.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
MICKEY OWENS	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	\$23.19	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	05/26/2026	\$11.81	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	05/26/2026	\$30.00	Hall, Amy	
Till, Breena	04/20/2026	04/20/2026	Auburn Montgome	P	\$107.68	\$107.68	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99213 [25] : INTERMEDIATE EST PT	04/20/2026	J01.40	P	04/29/2026	\$60.00	\$60.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
MICKEY OWENS	CoPay	Cash		04/20/2026	\$30.00	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	04/29/2026	\$6.81	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		04/29/2026	\$23.19	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Patient Responsibility		3	04/29/2026	\$30.00	Hall, Amy	
96372 [76] : THERAPEUTIC INJECTION ADMIN	04/20/2026	J01.40	P	04/29/2026	\$45.00	\$45.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	04/29/2026	\$6.78	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		04/29/2026	\$38.22	Hall, Amy	
J0696: Rocephin 1G	04/20/2026	J01.40	P	04/29/2026	\$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	04/29/2026	\$0.28	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		04/29/2026	\$1.84	Hall, Amy	
J1100: Dexamethasone 4mg/ml	04/20/2026	J01.40	P	04/29/2026	\$0.56	\$0.56	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	

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BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	04/29/2026	\$0.12	Hall, Amy
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		04/29/2026	\$0.44	Hall, Amy

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Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Barton, Lindsey	05/14/2025	06/09/2025	Auburn Montgome	P	\$0.01	\$0.01	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
93010: EKG	05/14/2025	R06.00, Z86.79	P	06/09/2025	\$0.01	\$0.01	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Small Balance Write-Off	05/04/2026	\$0.01	Hall, Amy	
Barton, Lindsey	05/14/2025	05/14/2025	Auburn Montgome	I	\$67.00	\$67.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99214: Detailed	05/14/2025	J20.9, R06.00, J01.90, E11.9	I	06/10/2025	\$67.00	\$67.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
MICKEY OWENS	CoPay	Credit Card		05/14/2025	\$30.00	Smith, Tonya	
	Write Off		Old System	05/04/2026	\$37.00	Hall, Amy	
Barton, Lindsey	04/16/2025	04/16/2025	Auburn Montgome	P	\$168.29	\$168.29	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
96372: THERAPEUTIC INJECTION ADMIN	04/16/2025	J01.90	P	05/04/2026	\$38.00	\$38.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Old System	05/04/2026	\$38.00	Hall, Amy	
82947: Glucose	04/16/2025	E11.9	P	05/04/2026	\$4.01	\$4.01	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Small Balance Write-Off	05/04/2026	\$4.01	Hall, Amy	
87880: STREP A	04/16/2025	J02.9	P	05/04/2026	\$12.00	\$12.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Old System	05/04/2026	\$12.00	Hall, Amy	
J1100: Dexamethasone 4mg/ml	04/16/2025	J01.90	P	05/04/2026	\$0.56	\$0.56	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Small Balance Write-Off	05/04/2026	\$0.56	Hall, Amy	
J1010: Methylprednisolone Acetate	04/16/2025	J01.90	P	05/04/2026	\$6.60	\$6.60	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Small Balance Write-Off	05/04/2026	\$6.60	Hall, Amy	
J0696: Rocephin 1G	04/16/2025	J01.90	P	05/04/2026	\$2.12	\$2.12	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Small Balance Write-Off	05/04/2026	\$2.12	Hall, Amy	
99204 [25] : Detailed-New	04/16/2025	J01.90, J02.9, E11.9, I10	P	05/04/2026	\$105.00	\$105.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
MICKEY OWENS	CoPay	Credit Card		04/16/2025	\$30.00	Smith, Tonya	
	Write Off		Old System	05/04/2026	\$75.00	Hall, Amy	