

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

Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Till, Breena	01/13/2026	01/13/2026	Auburn Montgome	P	\$65.00	\$65.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
90471: Immunization administration (1 vaccine)	01/13/2026	Z23	P	02/08/2026	\$15.00	\$0.00	\$15.00
90746: Hepatitis B	01/13/2026	Z23	P	02/08/2026	\$50.00	\$65.00	-\$15.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
PEREZ, ESTRELLA	CoPay	Cash		01/13/2026	\$65.00	Hall, Amy	
Guthrie, Hayley	12/10/2025	12/10/2025	Auburn Montgome	P	\$115.00	\$115.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
90471: Immunization Injection Administration	12/10/2025	Z23	P	02/08/2026	\$28.75	\$28.75	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
PEREZ, ESTRELLA	CoPay	Credit Card		02/08/2026	\$28.75	Hall, Amy	
90472: addtl immunization administration	12/10/2025	Z23	P	02/08/2026	\$28.75	\$28.75	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
PEREZ, ESTRELLA	CoPay	Credit Card		02/08/2026	\$28.75	Hall, Amy	
90707: MMR	12/10/2025	Z23	P	02/08/2026	\$28.75	\$28.75	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
PEREZ, ESTRELLA	CoPay	Credit Card		02/08/2026	\$28.75	Hall, Amy	
90746: Hepatitis B	12/10/2025	Z23	P	02/08/2026	\$28.75	\$28.75	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
PEREZ, ESTRELLA	CoPay	Credit Card		02/08/2026	\$28.75	Hall, Amy	
Guthrie, Hayley	12/04/2025	12/08/2025	Auburn Montgome	P	\$0.00	\$0.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
00000: NO CHARGE	12/04/2025	Z01.84	P	02/01/2026	\$0.00	\$0.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
PEREZ, ESTRELLA	CoPay	Credit Card		12/04/2025	\$115.00	Hall, Amy	
	Redistribution		Redistribution	02/08/2026	\$115.00	Hall, Amy	