

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

Provider	DOS	Charge Date	Location	Status	Charges	Applied	Balance
Till, Breena	01/16/2026	01/16/2026	Auburn Montgome	P	\$85.00	\$85.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
36415 [90] : Venipuncture / blood draw	01/16/2026	E55.9, R53.83, Z13.220, L98.9	P	04/08/2026	\$10.00	\$10.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		03/03/2026	\$8.83	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	03/03/2026	\$1.17	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		04/08/2026	\$0.00	Hall, Amy	
99396: PHYSICAL EST PT 40-64 YRS.	01/16/2026	Z00.01, E55.9, Z13.220, L98.9	P	04/08/2026	\$75.00	\$75.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		03/03/2026	\$0.00	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Insurance Payment	Automated Clearing House (ACH)		04/08/2026	\$61.41	Hall, Amy	
BLUE CROSS BLUE SHIELD OF ALABAMA	Adjustment	Automated Clearing House (ACH)	45	04/08/2026	\$13.59	Hall, Amy	
Barton, Lindsey	04/07/2025	04/07/2025	Auburn Montgome	P	\$0.00	\$0.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
00000: NO CHARGE	04/07/2025	Z11.1	P	06/09/2025	\$0.00	\$0.00	\$0.00
00000: TB Read Only	04/07/2025	Z11.1	P	06/09/2025	\$0.00	\$0.00	\$0.00
Barton, Lindsey	04/04/2025	04/07/2025	Auburn Montgome	P	\$20.00	\$20.00	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
86580: TB test - IPPD	04/04/2025	Z11.1	P	06/09/2025	\$20.00	\$0.00	\$20.00
00000: NO CHARGE	04/04/2025	Z11.1	P	06/09/2025	\$0.00	\$20.00	-\$20.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
ASHLEY D'ELIA	CoPay	Credit Card		04/04/2025	\$20.00	Smith, Tonya	
Barton, Lindsey	10/23/2024	10/23/2024	Auburn Montgome	I	\$93.16	\$93.16	\$0.00
Procedure	DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99214 [25] : Detailed	10/23/2024	L50.8, T78.40XA	I	11/04/2024	\$67.00	\$67.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
D'ELIA, ASHLEY	CoPay	Credit Card		10/23/2024	\$30.00	Smith, Tonya	
	Write Off		Old System	04/30/2026	\$37.00	Hall, Amy	
96372: THERAPEUTIC INJECTION ADMIN	10/23/2024	L50.8, T78.40XA	I	11/04/2024	\$19.00	\$19.00	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Old System	04/30/2026	\$19.00	Hall, Amy	
J1010: Methylprednisolone Acetate	10/23/2024	L50.8, T78.40XA	I	11/04/2024	\$6.60	\$6.60	\$0.00
Payer	Type	Method	Code	Date Applied	Amount	AppliedBy	
	Write Off		Old System	04/30/2026	\$6.60	Hall, Amy	
J1100: Dexamethasone 4mg/ml	10/23/2024	L50.8, T78.40XA	I	11/04/2024	\$0.56	\$0.56	\$0.00

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Payer		Type	Method	Code	Date Applied	Amount	AppliedBy
		Write Off		Old System	04/30/2026	\$0.56	Hall, Amy

Barton, Lindsey		09/24/2024	09/24/2024	Auburn Montgome	P	\$81.00	\$81.00	\$0.00
Procedure		DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
99386: WELL VISIT NEW 40-64 YRS		09/24/2024	Z00.00, F41.1, E55.9, E53.8	P	11/03/2024	\$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)		11/03/2024	\$81.00	Smith, Tonya	

Fain, Maranda		08/29/2024	09/08/2024	Auburn Montgome	P	\$5.00	\$5.00	\$0.00
Procedure		DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
00007: Injection Administration		08/29/2024	Z23	P	09/08/2024	\$5.00	\$5.00	\$0.00
Payer		Type	Method	Code	Date Applied	Amount	AppliedBy	
		Write Off		Old System	04/30/2026	\$5.00	Hall, Amy	

Fain, Maranda		08/29/2024	08/29/2024	Auburn Montgome	P	\$42.00	\$42.00	\$0.00
Procedure		DOS	Diagnosis	Status	Status Date	Charges	Applied	Balance
90686: Influenza virus vaccine		08/29/2024	Z23	P	04/30/2026	\$20.00	\$20.00	\$0.00
Payer		Type	Method	Code	Date Applied	Amount	AppliedBy	
		Write Off		Old System	04/30/2026	\$20.00	Hall, Amy	
90471: Immunization Injection Administration		08/29/2024	Z23	P	04/30/2026	\$22.00	\$22.00	\$0.00
Payer		Type	Method	Code	Date Applied	Amount	AppliedBy	
		Write Off		Old System	04/30/2026	\$22.00	Hall, Amy	