Patient Ledger

Patient (Account):

Petrov, Nikolay (Main)

Responsible Party

Petrov, Nikolay
Simeonovo, Ul. Krayrechna 30
1434 Sofia

Daytime Phone:	
Account Credits :	($9,060.00)
Last Payment Date:	7/19/2012
Last Statement Date:	
Patient Liability:	$0.00
Last Patient Payment:	$450.00
Total Amount Billed :	$9,060.00

Superbill #2469 **Renderer:** Krigsman, Arthur **Service Date:** 7/11/2012 **Diagnosis:** 555.0, 535.40, 555.1

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99358	7/14/2012	PROLONG SERVICE W/O CONTACT			
	7/14/2012	Patient Liability			$450.00
	7/19/2012	Patient Payment	Petrov, Nikolay	503	($450.00)

Amount Billed:	$450.00	**Amount Paid:**	$450.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #2258 **Renderer:** Krigsman, Arthur **Service Date:** 4/22/2012 **Diagnosis:** 535.40, 555.0, 555.1

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99215	4/28/2012	OFFICE/OUTPATIENT VISIT EST			
	4/28/2012	Patient Liability			$450.00
	5/4/2012	Patient Payment	Petrov, Nikolay	354	($450.00)
99354	4/28/2012	PROLONGED SERVICE OFFICE			
	4/28/2012	Patient Liability			$75.00
	5/4/2012	Patient Payment	Petrov, Nikolay	354	($75.00)

Amount Billed:	$525.00	**Amount Paid:**	$525.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1897 **Renderer:** Krigsman, Arthur **Service Date:** 11/18/2011 **Diagnosis:** 555.0, 555.1, 535.40

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99358	11/19/2011	PROLONG SERVICE W/O CONTACT			
	11/19/2011	Patient Liability			$262.50
	11/25/2011	Patient Payment	Petrov, Nikolay	14	($262.50)

Amount Billed:	$262.50	**Amount Paid:**	$262.50	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1753 Renderer: Krigsman, Arthur **Service Date:** 10/3/2011 **Diagnosis:** 535.40, 555.0, 555.1

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99442	10/4/2011	PHONE E/M BY PHYS 11-20 MIN			
	10/4/2011	Patient Liability			$150.00
	10/7/2011	Patient Payment	Petrov, Nikolay	visa	($150.00)

Amount Billed:	$150.00	**Amount Paid:**	$150.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1716 Renderer: Krigsman, Arthur **Service Date:** 9/19/2011 **Diagnosis:** 555.0, 555.1, 787.91

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99358	9/25/2011	PROLONG SERVICE W/O CONTACT			
	9/25/2011	Patient Liability			$247.50
	10/4/2011	Patient Payment	Petrov, Nikolay	Visa	($247.50)

Amount Billed:	$247.50	**Amount Paid:**	$247.50	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1896 Renderer: Krigsman, Arthur **Service Date:** 8/3/2011 **Diagnosis:** 555.0, 555.1, 535.40, 787.91

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99215	11/19/2011	OFFICE/OUTPATIENT VISIT EST			
	11/19/2011	Patient Liability			$450.00
	11/25/2011	Patient Payment	Petrov, Nikolay	14	($450.00)

Amount Billed:	$450.00	**Amount Paid:**	$450.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1515 Renderer: Krigsman, Arthur **Service Date:** 6/15/2011 **Diagnosis:** 555.0, 555.1

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99358	6/25/2011	PROLONG SERVICE W/O CONTACT			
	6/25/2011	Patient Liability			$375.00
	6/30/2011	Patient Payment	Petrov, Nikolay	visa	($164.00)
	10/4/2011	Patient Payment	Petrov, Nikolay	Visa	($211.00)

Amount Billed:	$375.00	**Amount Paid:**	$375.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1240 Renderer: Krigsman, Arthur **Service Date:** 2/28/2011 **Diagnosis:** 555.0, 555.1, 535.40

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99443	3/3/2011	PHONE E/M BY PHYS 21-30 MIN			
	3/3/2011	Patient Liability			$0.00

Amount Billed:	$0.00	**Amount Paid:**	$0.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1387 **Renderer:** Krigsman, Arthur **Service Date:** 1/6/2011 **Diagnosis:** 787.91, 789.00, 564.00

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
43239	4/26/2011	UPPER GI ENDOSCOPY BIOPSY			
	4/26/2011	Patient Liability			$1,250.00
	4/28/2011	Patient Payment	Petrov, Nikolay	visa	($1,250.00)
45380	4/26/2011	COLONOSCOPY AND BIOPSY			
	4/26/2011	Patient Liability			$1,525.00
	4/28/2011	Patient Payment	Petrov, Nikolay	visa	($1,525.00)
91110	4/26/2011	GI TRACT CAPSULE ENDOSCOPY			
	4/26/2011	Patient Liability			$2,700.00
	4/28/2011	Patient Payment	Petrov, Nikolay	visa	($2,700.00)

Amount Billed:	$5,475.00	**Amount Paid:**	$5,475.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #1386 **Renderer:** Krigsman, Arthur **Service Date:** 1/5/2011 **Diagnosis:** 787.91, 789.00, 564.00

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99245	4/26/2011	OFFICE CONSULTATION			
	4/26/2011	Patient Liability			$450.00
	4/28/2011	Patient Payment	Petrov, Nikolay	visa	($450.00)

Amount Billed:	$450.00	**Amount Paid:**	$450.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00

Superbill #956 **Renderer:** Krigsman, Arthur **Service Date:** 12/23/2010 **Diagnosis:** 787.91, 564.00, 789.00

Charge	Posted Date	Description	Payer Name	Ref Number	Amount
99358	12/25/2010	PROLONG SERVICE W/O CONTACT			
	12/25/2010	Patient Liability			$675.00
	12/27/2010	Patient Payment	Petrov, Nikolay	Visa	($675.00)

Amount Billed:	$675.00	**Amount Paid:**	$675.00	**Insurance Liability:**	$0.00
Amount Due:	$0.00	**Amount Adjusted:**	$0.00	**Patient Liability:**	$0.00