

Harborview Medical Laboratory  
789 Lab Lane, Brooklyn, NY 11201

Patient: Morgan Patel  
Date of Service: 04/22/2025  
Lab Requisition ID: LAB-556677

OUTPATIENT LABORATORY SERVICES

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Complete Blood Count (CBC)  
CPT 85025                      Charge: 85.00

Comprehensive Metabolic Panel (CMP)  
CPT 80053                      Charge: 120.00

Lipid Panel  
CPT 80061                      Charge: 95.00

Thyroid Stimulating Hormone (TSH)  
CPT 84443                      Charge: 110.00

TOTAL LAB CHARGES: 410.00

Insurance Payment: 260.00  
Patient Responsibility (as printed on bill): 150.00

According to your plan's lab coverage, a typical allowed amount might be lower than the total charges.  
Based on that, you might expect to owe closer to 90.00 for this visit.

TOTAL AMOUNT DUE: 150.00

Please return bottom portion with your payment.  
This statement is provided for testing purposes for a prototype bill assistant.