West Houston Dermatology Associates

6820 Westheimer Road, Suite 300 · Sugar Land, TX 77024
(281) 555-0132 · Tax ID 47-0000002 · NPI 1000000027
Provider: Daniel K. Osei, MD

Patient Statement

Statement date: **08/20/2026**
Account #: **M-44810**
Statement #: **ST-2026-10744**

PATIENT

Alex R. Sample
4110 Yale Street
Houston, TX 77204
Date of birth: 11/02/1979

RESPONSIBLE PARTY

Alex R. Sample
Relationship: Self
Plan: Houston ISD Medical (self)
Member ID: SAMPLE-44810

DATE OF SERVICE	CODE	DESCRIPTION OF SERVICE	CHARGE
08/19/2026	99203	Office visit, new patient — low/moderate complexity	$240.00
08/19/2026	11102	Tangential biopsy of skin — single lesion	$145.00
08/19/2026	88305	Pathology exam of tissue (level IV)	$120.00

Total charges	$505.00
Insurance paid	-$360.00
Contractual adjustment	-$50.00
Patient responsibility	**$95.00**
Patient payment received	**-$95.00**
Account balance	**$0.00**

PAYMENT RECEIVED

Date: 08/26/2026 Method: Mastercard ending 7781 Amount: $95.00 Status: Paid in full

Itemized statement of medical services actually rendered — date of service, CPT procedure codes and descriptions, provider, patient, and amount paid out of pocket. Retain for HSA/FSA reimbursement.