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|  |  | |  |  | |
| Medical Health Insurance | | |  |  | |
| Musterweg 10 |  | |  |  | |
| 4010 Basel |  | |  |  | |
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|  |  | |  |  | |
|  |  | | Herr Krankmann Soland | | |
|  |  | | Spitalstrasse 21 | | |
|  |  | | 3001 Bern | | |
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|  |  | |  |  | |
| Date | 21.02.2022 | |  |  | |
| Administrator | Herr Sachbeat Vollanden | |  |  | |
| E-Mail | sachbeat.vollanden@medicalhealth.ch | |  |  | |
| Phone | +41 58 372 83 38 | |  |  | |
|  |  | |  |  | |
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|  |  | |  |  | |
| **Hospital bill: Fall 16653890** | | |  |  | |
| Invoice date | 15.02.2022 | |  |  | |
| Insurance number | KS18558347 | |  |  | |
| Duration of stay | 01.01.2022 – 30.01.2022 | |  |  | |
|  | | | |  | |
|  | |
| Dear Mr Krankmann, | | | |  | |
|  |  | |  |  | |
| Please find enclosed the invoice for your hospital stay from 01 January 2022 to 30 January 2022. | | | | | |
|  |  | |  |  | |
| Points of treatment (ICD) | I | |  |  | |
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|  |  | |  |  | |
|  |  | |  |  | |
| ICD-A05.3 | Food poisoning due to Bacillus cereus | | | | |
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|  |  | |  |  | |
|  |  | | Costs | 400’000 | CHF |
|  |  | |  |  |  |
|  |  | | VAT (2.4%) | 9’600 | CHF |
|  |  | |  |  |  |
|  |  | Total amount (incl. VAT): | | 409’600 | CHF |
|  |  | |  |  | |
|  |  | |  |  | |
| Thank you for your trust in our insurance. Please settle the invoice within the next 30 days. | | | | | |
|  |  | |  |  | |
| Best regards |  | |  |  | |
|  |  | |  |  | |
|  |  | |  |  | |
| Sachbeat Vollanden |  | |  |  | |
|  |  | |  |  | |