

IN PATIENT SUMMARY BILL

UHID	:	MMH202372493	Bill No	:	MMH/MH/IP202401667
IP No	:	IP2024001724	Bill Date	:	02/08/2024
Patient name	:	Mrs.SAMPATH KUMARI.D	DOA	:	1/8/2024 8:02AM
Age	:	67 Y 8 M 12 D/Female	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	GO DIGIT GENERAL INSURANCE
Consultant Name	:	Dr.VENKATACHALAM VEERAPPAN	TPA	:	GO DIGIT HEALTH INSURANCE TPA PRIVATE LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,200.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
4	LABORATORY	₹ 5,484.00
5	NURSING CHARGE	₹ 800.00
6	OTHER ADDITION	₹ 6,249.00
7	PHARMACY CHARGE	₹ 135,450.00
8	PROFESSIONAL TEAM FEES	₹ 24,200.00
9	RADIOLOGY	₹ 3,200.00
Gross Amount		₹ 180,683.00
Sanction Amount		₹ 178,378.00
Net Payable		₹ 180,683.00
Advance Amount		₹ 3,000.00
Received Amount		₹ 0.00
Refund Amount		₹ 695.00

Received Amount in Words : Three Thousand Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/1/2024	MMH/MH/RECH202402937	UPI	Advance Amount	3,000.00

Medical Claim	Claim No	Sanction Amount
GO DIGIT GENERAL INSURANCE LTD	MUM-0824-PA-0000003	178,378.00