

Sent by email to Mr Bayliss' office

6 December 2023

Dear Danail Grigorov,

Cost Estimate: W3741 - Proximal Humerus Replacement

Please find a cost estimate for your treatment at RNOH Private Care below. This estimate is based on the information we have received to date from your Consultant and includes the anticipated cost of any Pre-Operative Assessment (POA), accommodation, nursing care, drugs, physiotherapy, diagnostic tests and imaging and your theatre procedure.

Estimated length of stay: 7 nights

Estimated cost for theatre procedure and inpatient care:

£31,100.00

Please note that we are not collecting professional fees for your Consultant Surgeon or Anaesthetist and their Medical Secretary will be in touch with you directly to take payment.

The total amount due to the hospital is therefore: £31,100.

It is important to understand that costs can vary due to the uncertainty of medical care. The table at the bottom of this letter provides details of what is included and excluded in this cost estimate. Please review our Terms and Conditions of Registration and Admission which can be found at <u>www.rnohprivatecare.com/terms</u>.

Following your POA, this cost estimate may need to be amended (for example, if your length of stay is expected to be longer than detailed above). Should the estimate change, we will write to you to confirm this.

Payment must be received in full at least 48 hours before your admission date. Payment can be made directly to RNOH Private Care by BACS, or credit/debit card. Please quote your name as your reference.

Payment details (BACS):

| Account Name: | GBS Re RNOH NHS Trust | |
|-----------------|--|--|
| Bank Name: | National Westminster Bank PLC | |
| Bank Address: | Natwest Bank (Royal Bank of Scotland) 2nd Floor, | |
| | 280 Bishopsgate, London, EC2M 4RB | |
| Sort Code: | 60-70-80 | |
| Account Number: | 10008780 | |
| | | |

To arrange payment by credit or debit card please contact the Private Care Billing Team on 0203 857 8291.

Yours sincerely,

Zhane Boyce Enquiry and Self-Pay Coordinator



Table 1 Inclusions and Exclusions: Private Care Self-Pay Pricing

| Inclusions | Exclusions |
|--|--|
| Pre-operative assessment Accommodation for the number of nights specified in this | Consultant Surgeon and Consultant Anaesthetist fees (unless we state above that these are included) |
| cost estimate | High cost and take-home drugs |
| - Routine admission tests | Any additional, or more complex theatre procedures than those guoted for |
| - Nursing care | |
| - Theatre procedure fees | Any changes to the prosthesis used in theatre |
| - Theatre prosthesis | Any changes to the acuity of care required (e.g. if you are unexpectedly admitted to the High Dependency Unit) |
| - Standard drugs and dressings | Special or 1:1 nursing above and beyond normal ward |
| - Removal of stitches, dressing and plaster | care |
| (as required) | Personal costs (e.g. telephone calls, visitors' meals, |
| - Patient meals | ambulance/transportation, laundry) |
| | - Any readmission due to complications |

- Outpatient diagnostic tests
- Follow-up appointment with your Consultant
- Any other costs not specified as included