PA Reference No : J-191668/2023 | Dated : 10-Apr-2023 | Processed [Resubmission]

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Member Details

Name	**SUJITH MENON**	**Group Name**	IFA HI TRUNK FZE- / 106203
UB No	I017-029-116862644-02	**DOB**	20-May-1985
EID	784-1985-1629728-4	**Gender**	MALE
Appln No	I017-029-116862644-02	**Category**	
Policy Jurisdiction		**Benefit type**	Non EBP
Join Date		**Leave Date**	
PEC Status	NIL WAITING PERIOD		

Policy Details

Payer	ABU DHABI NATIONAL INSURANCE COMPANY	**TPA**	E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC
Period	**01-Oct-2022 to 30-Sep-2023**	**Network**	**Green,**
Policy no	200018	**Direct SP Access**	SP Direct Access

Co-Ins

CONSULTATION	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
10% upto AED 25	NIL	NIL	NIL LIMIT 150000	NIL	NA	NA

Remarks

Attachment

Sl	File Name	

Claim Details

Benifit Group	OP SERVICES	**Doctor**	Enomen Goodluck Ekata
Handling Type	Out Patient	**Specialization**	General Practice
Phone	971-56-2122792		
Remarks	kindly provide approval		

Diagnosis

Sl.	Name	ICD Code	Category	Type
1	Low back pain	M54.5	ACUTE	Principal

Sl.	Name	ICD Code	Category	Type
2	Muscle spasm of back	M62.830	ACUTE	Secondary

Service

Sl.	Service	Requested	Rejected	Approved	TPA Comments/Denial Info
2	INFLA-BAN (0046-149902-0511)	Qty: 1.00 Gross Amt: 3.10 PatientShare:0.00 Net Amt: 3.10	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:3.10 PatientShare:0.00 Net Amt:3.10	
3	THER/PROPH/DIAG INJ SC/IM (96372)	Qty: 1.00 Gross Amt: 15.00 PatientShare:0.00 Net Amt: 15.00	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:15.00 PatientShare:0.00 Net Amt:15.00	
1	DEXAMETHASONE SODIUM PHOSPHATE (0248-122107-1021)	Qty: 1.00 Gross Amt: 2.52 PatientShare:0.00 Net Amt: 2.52	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:2.52 PatientShare:0.00 Net Amt:2.52	

	Net Requested	Rejected	Net Approved
Summary	20.62	0.00	20.62

TPA response

TPA Comments

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