

Authorisation Letter

J-213123/2023

Provider : Peshawar Medical Centre-Al Barsha

Action Date : 25-Apr-2023 11:25 am

Processed

Request Date : 25-Apr-2023 11:05 am

Action By : Vijina KV

Page 1 of 2

Patient : Mehrez Lahmedi

Employer : COTE D AZUR HOTEL L.L.C

Ins.Company : E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC

Gender : Male **DOB** : 25-Mar-1990

Card No : I035-029-119177246-01 **Policy** : 1341/2023

Doctor : Enomen Goodluck Ekata

Patient Share

CONSULTATION	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
20% upto AED 25	NIL	NIL	NIL LIMIT 7500	NIL	10%	NA

Diagnosis

Sl.	Type	Code	Description
1	ICD10	R10.13	Epigastric pain
2	ICD10	K29.00	Acute gastritis without bleeding
3	ICD10	J69.0	Pneumonitis due to inhalation of food and vomit

Provider Remarks

Dear Team,

Please see attached claim form for approval request.

Thank you

TPA Remarks

Kindly share CBC CRP report findings

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Sl. Code	Description	Req.Qty	App.Qty	Req.Amt	Pat.Share	App.Net	Status	Denial Code	Remarks
Activity Type : Service									
1	9	Consultation GP	1.00	1.00	35.00	7.00	28.00	Partially Approved	PRCE-001 - Calculation discrepancy
2	96365	THER/PROPH/DIAG IV INF INIT	1.00	1.00	25.00	0.00	25.00	Approved	
3	96374	THER/PROPH/DIAG INJ IV PUSH	1.00	0.00	15.00	0.00	0.00	Reject	AUTH-012 - Request for information
4	0005-242 802-0781	PANTONIX I.V.	1.00	1.00	29.50	0.00	29.50	Approved	
5	0195-107 704-0801	CEFTRIAXONE-TABUK 1 GM IV	1.00	0.00	48.50	0.00	0.00	Reject	AUTH-012 - Request for information
6	85025	BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC COUNT	1.00	1.00	22.00	0.00	22.00	Approved	
7	86140	C REACTIVE PROTEIN	1.00	1.00	15.00	0.00	15.00	Approved	
		Total :	7.00	5.00	190.00	7.00	119.50		

Printed By : Peshawar Medical Centre-Al Barsha

Print Date : 25-Apr-2023 11:34:01AM

* VALIDITY IS 14 DAYS FOR PHYSIOTHERAPY & 7 DAYS FOR OTHER INVESTIGATION

Disclaimer: Please note that pre-authorization is issued based on available report and information during treatment. Pre-authorization does not guarantee claim payment in full or verify the eligibility of each service or item. Payment of benefit is subject to all terms, conditions, limitations, and exclusions of the member's agreed table of benefits, medical necessity and appropriateness.