

Authorisation Letter

J-225963/2023

Provider : Peshawar Medical Centre-Al Barsha

Action Date : 01-May-2023 9:29 pm

Processed

Request Date : 01-May-2023 9:15 pm

Action By : Sathyajith VC

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Patient : ELEANOR MANGUBAT

Employer : STAYBRIDGE SUITES FZ L.L.C.

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

Gender : Male **DOB** : 06-Nov-1976

Card No : I040-029-113718534-01 **Policy** : UICECA3774-Jan23

Doctor : Enomen Goodluck Ekata

Patient Share

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

Diagnosis

Sl.	Type	Code	Description
1	ICD10	E78.5	Hyperlipidemia, unspecified
2	ICD10	I10	Essential (primary) hypertension

Provider Remarks

kindly provide approval

Sl.	Code	Description	Req.Qty	App.Qty	Req.Amt	Pat.Share	App.Net	Status	Denial Code	Remarks
Activity Type : Service										
1	84478	TRIGLYCERIDES	1.00	1.00	17.00	0.00	17.00	Approved		
2	83719	LIPOPROTEIN DIRECT MEASSUREMENT VLDL CHOLESTEROL	1.00	1.00	27.00	0.00	27.00	Approved		
3	82480	CHOLINESTERASE SERUM	1.00	1.00	22.00	0.00	22.00	Approved		
4	9	Consultation GP	1.00	1.00	35.00	7.00	28.00	Partially Approved	PRCE-001 - Calculation discrepancy	
Total :			4.00	4.00	101.00	7.00	94.00			

Printed By : Peshawar Medical Centre-Al Barsha

Print Date : 03-May-2023 3:42:13PM

* 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.