Electronic Authorization Reference

Details

Transaction ID: **Transaction Type: Encounter Type: Date Ordered:**

DHA-F-0047965-TPA004-

No Bed + No Authorization 04/05/2023 20230504105332 emergency room

Patient Name: Patient ID: Member ID: **Emirates ID:**

999-9999-FDC7-FE7A-2A37-**ALOZIOUS MAFABI** eb99eada7897429da4e2 9999999-9 CAAA

Request Time: Response Time: Download Time: Cancel Time:

04/05/2023 04/05/2023

04/05/2023 10:55:09 10:53:00 10:54:00

Authorization Ref Number Insurance Plan (Payer/TPA): Result:

(IDPAYER):

INS033/TPA004 - EMIRATES

INSURANCE COMPANY/NAS A230594513759472 No **Administration Services Limited**

End: Limit: **Denial** Start:

CLAI-012 - Submission not compliant 04/05/2023 18/05/2023 00:00:00 00:00:00

with contractual agreement between

provider & payer

Comments:

1. As per Netwrok Procedure, requested treatment does not require authorization[Out-Patient]

-Diagnosis: -#DxInfo Type **Diagnosis** Principal J02.9 - Acute pharyngitis, unspecified 0 Secondary R05 - Cough 0 Secondary R50.9 - Fever, unspecified 0 Showing 1 to 3 of 3 entries

Activities: -												
Activity ID	Туре	Activity	Clinician	Status	Quantity	PA Quantity	Net	PA Net	List Payment Amount		Denial	#O
57331102	CPT	96374 - THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRUG	DHA-P- 28040827 - Enomen Goodluck Ekata	Rejected	1	1	11	11	0	0	CLAI-012 - Submission not compliant with contractual agreement between provider & payer	С
57331103	Drug	2190-106618- 1001 - PARAFUSIV I.V. 10MG/ML, 100ML X 10, 10 MG/ML, SOLUTION FOR INFUSION, PHARMA	DHA-P- 28040827 - Enomen Goodluck Ekata	Rejected	1	1	8.4	8.4	0	0	CLAI-012 - Submission not compliant with contractual agreement between	1
				Total:	3.00	3.00	54.40	54.40	0.00	0.00		

Activity ID	Туре	Activity	Clinician	Status	Quantity	PA Quantity	Net	PA Net	List Payment Amount		Denial	#O
		BAVARIA INTERNATIONAL GMBH									provider & payer	
57331104	Service	9 - Consultation GP	DHA-P- 28040827 - Enomen Goodluck Ekata	Rejected	1	1	35	35	0	0	CLAI-012 - Submission not compliant with contractual agreement between provider & payer	. (
Showing 1	to 3 of 3	entries		Total:	3.00	3.00	54.40	54.40	0.00	0.00		