

Authorisation Letter

J-237223/2023

Provider : Peshawar Medical Centre-Al Barsha

Action Date : 08-May-2023 10:16 am

Processed

Request Date : 08-May-2023 9:55 am

Action By : Glory

Page 1 of 2

Patient : RUPEI PURI

Employer : IFA HI TRUNK FZE-

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

Gender : Female **DOB** : 24-Jan-1991

Card No : I017-029-116984878-02 **Policy** : 200018

Doctor : Enomen Goodluck Ekata

Patient Share

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

Diagnosis

Sl.	Type	Code	Description
1	ICD10	R50.9	Fever, unspecified
2	ICD10	R07.0	Pain in throat
3	ICD10	J03.90	Acute tonsillitis, unspecified
4	ICD10	R09.81	Nasal congestion
5	ICD10	R05	Cough

Provider Remarks

Dear Team,

Please see attached claim form for approval request.

Thank you.

TPA Remarks

Kindly share the CBC and CRP report for further approval

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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	96365	THER/PROPH/DIAG IV INF INIT	1.00	1.00	25.00	0.00	25.00	Approved	
2	86140	C REACTIVE PROTEIN	1.00	1.00	15.00	0.00	15.00	Approved	
3	85025	BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC COUNT	1.00	1.00	22.00	0.00	22.00	Approved	
4	96374	THER/PROPH/DIAG INJ IV PUSH	1.00	1.00	15.00	0.00	15.00	Approved	AUTH-012 - Request for information
5	9	Consultation GP	1.00	1.00	35.00	3.50	31.50	Partially Approved	PRCE-001 - Calculation discrepancy
6	2190-106 618-1001	PARAFUSIV	1.00	1.00	8.40	0.00	8.40	Approved	
7	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
		Total :	7.00	6.00	168.90	3.50	116.90		

Printed By : Peshawar Medical Centre-Al Barsha

Print Date : 08-May-2023 10:24:59AM

* 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.