

Authorisation Letter

J-248716/2023

Provider : Peshawar Medical Centre-Al Barsha

Action Date : 14-May-2023 11:08 am

Processed

Request Date : 14-May-2023 10:50 am

Action By : irshad.pasha

Page 1 of 1

Patient : NISHANTHI PUSHPA KUMARI

Employer : IFA HI TRUNK FZE-

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

Gender : Female **DOB** : 26-Feb-1981

Card No : I017-029-116223024-02 **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	M25.572	Pain in left ankle
2	ICD10	M13.172	Monoarthritis, not elsewhere classified, left ankle and foot

Provider Remarks

Dear team please provide the approval

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	3.50	31.50	Partially Approved	PRCE-001 - Calculation discrepancy	
2	84550	URIC ACID BLOOD	1.00	1.00	13.00	0.00	13.00	Approved		
3	85025	BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC COUNT	1.00	1.00	22.00	0.00	22.00	Approved		
4	86038	ANTINUCLEAR ANTIBODIES ANA	1.00	1.00	34.00	0.00	34.00	Approved		
5	86140	C REACTIVE PROTEIN	1.00	1.00	15.00	0.00	15.00	Approved		
6	86430	RHEUMATOID FACTOR QUALITATIVE	1.00	1.00	16.00	0.00	16.00	Approved		
Total :			6.00	6.00	135.00	3.50	131.50			

Printed By : Peshawar Medical Centre-Al Barsha

Print Date : 15-May-2023 2:55:54PM

* 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.