Authorisation Letter

J-339008/2023

Provider : Peshawar Medical Centre-Al Barsha
Request Date : 07-Jul-2023 2:10 pm

Action Date : **07-Jul-2023 2:12 pm**
Action By : Vijina KV

Processed

Patient : **PENINAH MUTUWA**
Ins.Company : E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC
Card No : **I017-029-116817510-02** **Policy** : 200020

Employer : TH8 A HOUSE OF ORIGINALS HOTEL - FZE .
Gender : Female **DOB** : 14-Jan-1993
Doctor : Sumaiya Galib

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	L29.0	Pruritus ani
2	ICD10	K59.00	Constipation, unspecified
3	ICD10	R14.0	Abdominal distension (gaseous)
4	ICD10	R10.30	Lower abdominal pain, unspecified
5	ICD10	A05.9	Bacterial foodborne intoxication, unspecified

Provider Remarks

Dear Team,

Please see attached claim form for approval request.

Thank you

Sl.	Code	Description	Req.Qty	App.Qty	Req.Amt	Pat.Share	App.Net	Status	Denial Code	Remarks
Activity Type : Service										
1	87045	CUL BACT STOOL AEROBIC ISOL SALMONELLA&SHIGELLA	1.00	1.00	27.00	0.00	27.00	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		
5	96365	THER/PROPH/DIAG IV INF INIT	1.00	1.00	25.00	0.00	25.00	Approved		
6	9	Consultation GP	1.00	1.00	35.00	3.50	31.50	Partialy Approved	PRCE-001 - Calculation discrepancy	
		Total :	**6.00**	**6.00**	**139.00**	**3.50**	**135.50**			

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Printed By : Peshawar Medical Centre-Al Barsha

Print Date :07-Jul-2023 2:16:21PM

* 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.