Electronic Authorization Reference

Details

Transaction ID:	Transaction Type:	Encounter Type:	Date Ordered:
DHA-F-0047965-INS038-20230709140023	Authorization	No Bed + No emergency room	09/07/2023
Patient Name:	**Patient ID:**	**Member ID:**	**Emirates ID:**
INNOCENT IHECHILURU ORIAKU	56bf28afc41543649ccb	I038-000-115298038-01	999-9999-9999999-9

Request Time:	Response Time:	Download Time:	Cancel Time:
09/07/2023 14:00:00	09/07/2023 14:08:00	09/07/2023 14:10:09	

Insurance Plan (Payer/TPA):	Authorization Ref Number (IDPAYER):	Result:
INS038/INS038 - NGI - National General Insurance	A/01/2023/014927	Yes

Start:	End:	Limit:	Denial
09/07/2023 02:08:00	24/07/2023 02:08:00		

Comments:

Diagnosis:

Type	Diagnosis	#DxInfo
Principal	L08.9 - Local infection of the skin and subcutaneous tissue, unspecified	0

Showing 1 to 1 of 1 entries

Activities:

Activity ID	Type	Activity	Clinician	Status	Quantity	PA Quantity	Net	PA Net	List	Payment Amount	Patient Share	Denial	#Obs
60178201	CPT	97597 - DEBRIDEMENT OPEN WOUND 20 SQ CM/<	DHA-P-47060439 - Sumaiya Galib	Approved	1	1	10	10	0	10	0		0
60178202	Service	9.01 - Consultation GP	DHA-P-47060439 - Sumaiya Galib	Changed/Approved	1	0	0	0	0	0	0		2
				Total:	**2.00**	**1.00**	**10.00**	**10.00**		**10.00**	**0.00**		

Showing 1 to 2 of 2 entries