## **Authorisation Letter**

**Policy** : 200019

J-397272/2023

Provider : Peshawar Medical Centre-Al Barsha

Action Date : 11-Aug-2023 12:37 pm

Processed

Request Date : 11-Aug-2023 12:37 pm

Action By : System Processed

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Patient : MARLON FUNTANIEL CASTRO

: 1017-029-114504450-02

Employer : RIVA RISTORANTE BAR & BEACH -

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

Gender : Male DOB : 06-May-1989

Doctor : Sajid Sanaullah Khan

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

## **Provider Remarks**

Dear Team,

Card No

Please see attached claim form for approval request.

Thank you

SI.	Code	Description	Req.Qty	App.Qty	Req.Amt	Pat.Share	App.Net	Status	Denial Code	Remarks	
Activity Type : Service											
1	0005-111 805-1021	CHLOROHISTOL INJECTION	1.00	1.00	1.20	0.00	1.20	Approved			
2	9	Consultation GP	1.00	1.00	35.00	3.50	31.50	Partialy Approved	PRCE-001 - Calculation discrepancy		
3	96372	THER/PROPH/DIAG INJ SC/IM	1.00	1.00	15.00	0.00	15.00	Approved			
4	0248-122 107-1021		1.00	1.00	2.52	0.00	2.52	Approved			
		Total :	4.00	4.00	53.72	3.50	50.22				

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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.

<sup>\*</sup> VALIDITY IS 14 DAYS FOR PHYSIOTHERAPY & 7 DAYS FOR OTHER INVESTIGATION