

Authorisation Letter

J-409320/2023

Provider : Peshawar Medical Centre-Al Barsha

Action Date : 18-Aug-2023 11:31 am

Processed

Request Date : 18-Aug-2023 11:11 am

Action By : Vijina KV

Page 1 of 2

Patient : SAI KUMAR GURRAM

Employer : STAYBRIDGE SUITES FZ L.L.C.

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

Gender : Male **DOB** : 19-Oct-1994

Card No : I040-029-117330363-01 **Policy** : UICECA3774-Jan23

Doctor : Sajid Sanaullah Khan

Patient Share

CONSULTATION	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
20% max 25	NIL	NIL	NIL LIMIT 7500	NIL	10%	NA

Diagnosis

Sl.	Type	Code	Description
1	ICD10	M54.41	Lumbago with sciatica, right side
2	ICD10	M54.42	Lumbago with sciatica, left side
3	ICD10	M54.5	Low back pain

Provider Remarks

Dear Team,

Please see attached claim form for approval request.

Thank you

TPA Remarks

Kindly share approved lab report findings for further updation

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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	85027	BLOOD COUNT COMPLETE AUTOMATED	1.00	1.00	14.00	0.00	14.00	Approved	
2	0248-122 107-1021	DEXAMETHASONE SODIUM PHOSPHATE	1.00	1.00	2.52	0.00	2.52	Approved	
3	96372	THER/PROPH/DIAG INJ SC/IM	1.00	1.00	15.00	0.00	15.00	Approved	
4	86140	C REACTIVE PROTEIN	1.00	0.00	15.00	0.00	0.00	Reject	TIME-002 - Requested additional information was not received or was not received within time limit
5	85652	SEDIMENTATION RATE RBC AUTOMATED	1.00	1.00	8.00	0.00	8.00	Approved	
6	84100	PHOSPHORUS INORGANIC	1.00	0.00	14.00	0.00	0.00	Reject	AUTH-012 - Request for information
7	82310	CALCIUM TOTAL	1.00	0.00	14.00	0.00	0.00	Reject	AUTH-012 - Request for information
8	0046-149 902-0511	INFLA-BAN	1.00	1.00	3.10	0.00	3.10	Approved	
9	9	Consultation GP	1.00	1.00	35.00	7.00	28.00	Partially Approved	PRCE-001 - Calculation discrepancy
Total :		9.00	6.00	120.62	7.00	70.62			

Printed By : Peshawar Medical Centre-Al Barsha

Print Date : 18-Aug-2023 11:36:59AM

* 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.