Authorisation Letter

J-413729/2023

Processed

Provider : Peshawar Medical Centre-Al Barsha

: 21-Aug-2023 9:27 am

Action Date : 21-Aug-2023 9:27 am

Action By : System Processed

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Patient : AMARA HELEN UDEGBUNAM

Request Date

: E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC

Ins.Company Card No : 1017-029-116511793-02 **Policy** : 200026 **Employer** : MOVENPICK HOTEL JUMEIRAH LAKES TOWERS .-

> DOB : 16-Mar-1990 : Female

Doctor : Enomen Goodluck Ekata

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

Gender

SI.	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	Partialy Approved	PRCE-001 - Calculation discrepancy	
		Total :	1.00	1.00	35.00	3.50	31.50			

Print Date :21-Aug-2023 9:39:30AM Printed By : System Processed

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.

^{*} VALIDITY IS 14 DAYS FOR PHYSIOTHERAPY & 7 DAYS FOR OTHER INVESTIGATION