

Authorisation Letter

J-434094/2023

Provider : Peshawar Medical Centre-Al Barsha

Action Date : 01-Sep-2023 12:24 pm

Processed

Request Date : 01-Sep-2023 12:17 pm

Action By : vismaya.pp

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Patient : MOHAMED ENAYATULLAH KHAN

Employer : STAYBRIDGE SUITES FZ L.L.C.

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

Gender : Male **DOB** : 29-Nov-1978

Card No : I040-029-117305023-01 **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	J02.9	Acute pharyngitis, unspecified
2	ICD10	R68.83	Chills (without fever)
3	ICD10	R50.9	Fever, unspecified
4	ICD10	J20.9	Acute bronchitis, unspecified

Provider Remarks

Dear Team,

Please see attached claim form for approval request.

Thank you

TPA Remarks

Kindly proceed with the approved tests and submit the CBC/CRP report.

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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	9	Consultation GP	1.00	1.00	35.00	7.00	28.00	Partially Approved	PRCE-001 - Calculation discrepancy
2	96360	HYDRATION IV INFUSION INIT	1.00	1.00	25.00	0.00	25.00	Approved	PRCE-001 - Calculation discrepancy
3	96374	THER/PROPH/DIAG INJ IV PUSH	1.00	1.00	15.00	0.00	15.00	Approved	PRCE-001 - Calculation discrepancy
4	0046-149 902-0511	INFLA-BAN	1.00	1.00	3.10	0.00	3.10	Approved	PRCE-001 - Calculation discrepancy
5	0195-107 704-0801	CEFTRIAXONE-TABUK 1 GM IV	1.00	0.00	48.50	0.00	0.00	Reject	AUTH-012 - Request for information
6	0248-122 107-1021	DEXAMETHASONE SODIUM PHOSPHATE	1.00	1.00	2.52	0.00	2.52	Approved	PRCE-001 - Calculation discrepancy
7	85025	BLOOD COUNT COMPLETE AUTO&AUTO DIFRNTL WBC COUNT	1.00	1.00	22.00	0.00	22.00	Approved	PRCE-001 - Calculation discrepancy
8	86140	C REACTIVE PROTEIN	1.00	1.00	15.00	0.00	15.00	Approved	PRCE-001 - Calculation discrepancy
		Total :	8.00	7.00	166.12	7.00	110.62		

Printed By : Peshawar Medical Centre-Al Barsha

Print Date : 01-Sep-2023 12:43:16PM

* 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.