PA Reference No : J499760/2023 | Dated : 05-Oct-2023 | Processed [FollowUp]

Auth ID JBMT1D8E5247-7C82-417F-8750-F24C05275591-source :WEBV1

+Follow up +Re-submit Print Authorization Print Claim Form ✖Close

Member Details

Name	**Suraj Purkuti**	**Group Name**	COTE D AZUR HOTEL L.L.C / 109910
UB No	1035-029-119708308-01	**DOB**	10-Jul-1993
EID	784-1993-2816365-6	**Gender**	MALE
Appln No	784-1993-2816365-6	**Category**	
Policy Jurisdiction		**Benefit type**	Non EBP
Join Date		**Leave Date**	
PEC Status	6		

Policy Details

Payer	SALAMA – Islamic Arab Insurance Company	**TPA**	E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC
Period	**08-Mar-2023 to 07-Mar-2024**	**Network**	**Green,**
Policy no	1341/2023	**Direct SP Access**	SP Direct Access

Co-Ins

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

Remarks

Attachment

Sl	File Name	

Claim Details

Benifit Group	OP SERVICES	**Doctor**	Sajid Sanaullah Khan
Handling Type	Out Patient	**Specialization**	General Practice
Phone	971-55-8565218		
Remarks	DEAR TEAM FOR APPROVAL		

Diagnosis

Sl.	Name	ICD Code	Category	Type
1	Acute bronchitis, unspecified	J20.9	ACUTE	Secondary

Sl.	Name	ICD Code	Category	Type
2	Acute pharyngitis, unspecified	J02.9	ACUTE	Principal
3	Cough	R05	ACUTE	Secondary
4	Fever, unspecified	R50.9	ACUTE	Secondary
5	Wheezing	R06.2	ACUTE	Secondary

Service

Sl.	Service	Requested	Rejected	Approved	TPA Comments/Denial Info
2	CEFTRIAXONE-TABUK 1 GM IV (0195-107704-0801)	Qty: 1.00 Gross Amt: 48.50 PatientShare:0.00 Net Amt: 48.50	Qty: 1.00 Amt:48.50	Qty: 0 Gross Amt:0.00 PatientShare:0.00 Net Amt:0.00	Denial Code : AUTH-012 / Request for information
1	AIRWAY INHALATION TREATMENT (94640)	Qty: 1.00 Gross Amt: 26.00 PatientShare:0.00 Net Amt: 26.00	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:26.00 PatientShare:0.00 Net Amt:26.00	
4	HYDRATION IV INFUSION INIT (96360)	Qty: 1.00 Gross Amt: 25.00 PatientShare:0.00 Net Amt: 25.00	Qty: 1.00 Amt:25.00	Qty: 0 Gross Amt:0.00 PatientShare:0.00 Net Amt:0.00	Denial Code : AUTH-012 / Request for information
6	THER/PROPH/DIAG INJ IV PUSH (96374)	Qty: 1.00 Gross Amt: 15.00 PatientShare:0.00 Net Amt: 15.00	Qty: 1.00 Amt:15.00	Qty: 0 Gross Amt:0.00 PatientShare:0.00 Net Amt:0.00	Denial Code : AUTH-012 / Request for information
7	VENTOLIN NEBULES (0006-124513-2071)	Qty: 1.00 Gross Amt: 1.23 PatientShare:0.00 Net Amt: 1.23	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:1.23 PatientShare:0.00 Net Amt:1.23	
3	DEXAMETHASONE SODIUM PHOSPHATE (0248-122107-1021)	Qty: 1.00 Gross Amt: 2.52 PatientShare:0.00 Net Amt: 2.52	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:2.52 PatientShare:0.00 Net Amt:2.52	
5	PULMICORT(BUDESONIDE : 0.5 MG/ML) SUSPENSION 0188-135906-2441FOR NEBULIZATION (0188-135906-2441)	Qty: 1.00 Gross Amt: 10.48 PatientShare:0.00 Net Amt: 10.48	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:10.48 PatientShare:0.00 Net Amt:10.48	

	Net Requested	Rejected	Net Approved
Summary	128.73	88.50	40.23

TPA response

TPA Comments	kindly share CBC/CRP report. share indication for IV fluids.
Processed by	JBMT2027
Datetime	05-Oct-2023 06:13 PM