Authorisation Letter

J-518029/2023

Provider : Peshawar Medical Centre-Al Barsha
Request Date : 14-Oct-2023 1:50 pm

Action Date : **14-Oct-2023 1:55 pm**
Action By : SUNIL.NN

Processed

Patient : **RABIULLAH RAHMAN.**
Ins.Company : E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC
Card No : **I017-029-119209533-01** **Policy** : 200026-1

Employer : MOVENPICK HOTEL JUMEIRAH LAKES TOWERS--
Gender : Male **DOB** : 01-Jun-1979
Doctor : Sajid Sanaullah Khan

Patient Share

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

Diagnosis

Sl.	Type	Code	Description
1	ICD10	J04.0	Acute laryngitis
2	ICD10	J02.9	Acute pharyngitis, unspecified
3	ICD10	J18.0	Bronchopneumonia, unspecified organism

Provider Remarks

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TPA Remarks

kindly share 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	96360	HYDRATION IV INFUSION INIT	1.00	1.00	25.00	0.00	25.00	Approved		
2	9	Consultation GP	1.00	1.00	31.50	3.50	31.50	Approved		
3	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	
4	0046-149 902-0511	INFLA-BAN	1.00	1.00	3.10	0.00	3.10	Approved		
5	96374	THER/PROPH/DIAG INJ IV PUSH	1.00	0.00	15.00	0.00	0.00	Reject	AUTH-012 - Request for information	
6	0188-135 906-2441	PULMICORT(BUDESONIDE : 0.5 MG/ML) SUSPENSION 0188-135906-2441FOR NEBULIZATION	1.00	1.00	10.48	0.00	10.48	Approved		
7	94640	AIRWAY INHALATION TREATMENT	1.00	1.00	26.00	0.00	26.00	Approved		
8	0248-122 107-1021	DEXAMETHASONE SODIUM PHOSPHATE	1.00	1.00	2.52	0.00	2.52	Approved		
9	0006-124 513-2071	VENTOLIN NEBULES	1.00	1.00	1.23	0.00	1.23	Approved		
10	0005-111 805-1021	CHLOROHISTOL INJECTION	1.00	1.00	1.20	0.00	1.20	Approved		
		Total :	**10.00**	**8.00**	**164.53**	**3.50**	**101.03**			

Printed By : Peshawar Medical Centre-Al Barsha

Print Date :14-Oct-2023 2:06:52PM

* VALIDITY IS 14 DAYS FOR PHYSIOTHERAPY & 7 DAYS FOR OTHER INVESTIGATION