PA Reference No : PA-0162254/2025 | Dated : 06-Apr-2025 | Processed [NEW]

Auth ID JBMAGENTJBM060425-042423-111531485-1-source :DHPO

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Member Information

Name

Muhammad Ghazanfar

Group Name

Zone Auto Care / 007545

UB No

LW730415-MAF

DOB

03-Aug-1995

EID

784-1995-1085743-8

Gender

MALE

DHA Member ID

Category

Policy Information

Payer

Dubai National Insurance & Reinsurance P.S.C

TPA

KHAT AL HAYA Management of Health Insurance Claims LLC

Period

06-May-2024 to 05-May-2025

Network

Lifeline Pearl Network zone,

Policy no

09/954/2024/189/LLT/A

Direct SP Access

GP Referral Mandatory

Policy Jurisdiction

IP/OP Status

Co-Ins

CONSULTATION	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
20% co-payment	20% co-payment	20% co-payment	30 % co-payment	20% coinsurance payable by the insured with a cap of AED 500 payable per encounter	10% Co-payment	Excluded, except in case of medical emergencies subject to 20% co-insurance.

Claim Details

Benifit Group

Acute Out Patients

Doctor

Handling Type

OUT Patient

Specialization

Phone

971-56-5066425

Remarks

Diagnosis

Sl.	Name	ICD Code	Category	Type
1	Acute pharyngitis, unspecified	J02.9	Acute	Principal
2	Allergic rhinitis, unspecified	J30.9	Acute	Secondary
3	Cough	R05	Acute	Secondary
4	Fever, unspecified	R50.9	Acute	Secondary

Service

Sl.	Service	Requested	Rejected	Approved	TPA Comments/Denial Info
2	IM INJECTION (W/O DRUG CHARGES) (96372)	Qty: 1.00 Gross Amt: 8.00 PatientShare:0.00 Net Amt: 8.00	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:8.00 PatientShare:0.00 Net Amt:8.00	
3	IV FLUIDS (96360)	Qty: 1.00 Gross Amt: 20.00 PatientShare:0.00 Net Amt: 20.00	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:20.00 PatientShare:0.00 Net Amt:20.00	
1	G P CONS (9)	Qty: 1.00 Gross Amt: 30.00 PatientShare:0.00 Net Amt: 30.00	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:30.00 PatientShare:0.00 Net Amt:30.00	
4	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST TO 1 HR (96365)	Qty: 1.00 Gross Amt: 15.00 PatientShare:0.00 Net Amt: 15.00	Qty: 0.00 Amt:0.00	Qty: 1 Gross Amt:15.00 PatientShare:0.00 Net Amt:15.00	

Net Requested
Rejected
Net Approved

Summary

73.00
0.00
73.00

Medicines

Sl.	Medicine	Requested	Rejected	Approved	TPA Comments/Denial Info
1	Clofen (Diclofenac Sodium : 75 Mg/3Ml) Solution For Injection Diclofenac Sodium [75 Mg/3Ml] Solution For Injection (5 X 3Ml, Ampoule) IM	Qty: 1.00000 Gross Amt: 6.50 PatientShare:0.00 Net Amt: 6.50	Qty: 0.00 Amt:1.95	Qty: 1 Gross Amt:6.50 PatientShare:1.95 Net Amt:4.55	Denial Code : PRCE-001 / null
2	Lactated RingerS & Dextrose Usp (Calcium Chloride : N/A) (Dextrose : N/A) (Potassium Chloride : N/A) (Sodium Chloride : N/A) (Sodium Lactate : N/A) Solution For Infusion Calcium Chloride/Dextrose/Potassium Chloride/Sodium Chloride/Sodium Lactate [N/A|N/A|N/A|N/A|N/A] Solution For Infusion (500Ml, Bottle) IV	Qty: 1.00000 Gross Amt: 5.00 PatientShare:0.00 Net Amt: 5.00	Qty: 0.00 Amt:1.15	Qty: 1 Gross Amt:5.50 PatientShare:1.65 Net Amt:3.85	Denial Code : PRCE-001 / null
3	Parafusiv (Paracetamol : 10 Mg/Ml) Solution For Infusion Paracetamol [10 Mg/Ml] Solution For Infusion (100Ml X 10, Glass Vial) IV INFUSION	Qty: 1.00000 Gross Amt: 8.40 PatientShare:0.00 Net Amt: 8.40	Qty: 0.00 Amt:2.52	Qty: 1 Gross Amt:8.40 PatientShare:2.52 Net Amt:5.88	Denial Code : PRCE-001 / null

Requested

Rejected
Approved

Summary

	19.90
	5.62
	14.28

Attachments

Sl	File caption

TPA response

TPA Comments

Processed by

Dr. Veerankutty

Datetime

06-Apr-2025 04:26 PM