



APPROVED CLAIMS

SQLI PLATINUM RIDER
Reference No. [43273394]

PT. Administrasi Medika

Electronic Healthcard Network

Head Office : Head Office : Telkom STO Gambir,
Gedung C lantai 3, 4, 5 Jl. Medan Merdeka Selatan No. 12
Jakarta Pusat - 10110

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Fax. Number : +62 21 3483 2211

Website : www.admedika.co.id

Date : JUL-14-2015 04:01:01 PM

MEMBER INFO.				PAYOR, CORPORATE AND PLAN INFO.			
Patient Name				Payor	PT. AJ SEQUIS LIFE		
Principal Name				Corp Code	PLATINUM		
Relation	Principal	Status	ACTIVE	Policy No.	Pol. Status : ENFORCED		
Card No.				Membership	Client : SQHPH		
Member ID				Plan	SQHPH	Type : MAX DOLLAR AMOUNT	
-	-	DOB	DEC-27-1971	Start Date	MAY-11-2015 To MAY-10-2048	Currency : IDR	
		Since	MAY-11-2012				
		Gender	MALE				

CLAIMS DETAILS			
Reference ID	43273394	Provider	RS. BALI MEDISTRA (BALIMED) (IDR) - 1047
Claim Type	MANUAL	Diagnosis	M84.0-MALUNION OF FRACTURE
Admission Date	JUL-11-2015	No. of Days	3
Discharge Date	JUL-14-2015	Coverage	H&S - RAWAT INAP
MC Days :		Status	40-VALID CLAIM
		Disability No	
		Amount Incurred	36,232,609
		Amount Approved	36,223,092

CLAIMS ASSESSMENT				
Manfaat Polis	Batasan Polis	Biaya Diajukan	Biaya Disetujui	Biaya Tidak Disetujui
02:ROOM & BOARD(MAKSIMUM 150 DAYS)	2000000	3750000	3750000	0
05:HOSPITAL MISCELLANEOUS SERVICE	999999999	5477497	5476147	1350
16:SURGICAL FEE	999999999	27005112	26996945	8167
TOTAL		36232609	36223092	9517

Remarks

DX AKHIR DENGAN UNION PATELA DEXTRA + PATELA FEMURAL SYNDROME. PENJAMINAN BERDASARKAN DIAGNOSA AKHIR. PASIEN MENEMPATI KAMAR SUITE RP. 1.250.000,- (3 HARI). DENGAN SELISIH RP. 9.517,- (UNDERPAD DAN GELANG)HARAP BAYAR DI RS. JIKA ADA SUPLEMENT HERBAL DAN NON MEDIS TAMBAHAN HARAP BAYAR DI RS. MOHON FORM INI DITANDA TANGANI OLEH PESERTA..

Petugas AdMedika :

Verify/Petugas RS :

Agreed/Peserta :

RIDWAN HADI FATUROHMAN

[Tanggal : JUL-14-2015 04:01:01 PM]

[Tanggal :

] [Tanggal:

]

Catatan :

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