

12/30/2025

SUMMARY REIMBURSEMENT CLAIM REPORT

AltReg-SubAcc : 2025121904609078-001
Policy ID : F469-OPUPEA-00000
Policy Holder : PUTRA PERKASA ABADI PT,
Branch : PUTRA PERKASA ABADI, PT
Reference No :

Date Received : 19-Dec-2025
Check # : 100-*

No.	ID/Name	ClaimNo	Claim Type	ProviderName	Date of Service		Unit /	Billed	Payable	Not Payable	Code
Status					From	To	Qty				
1	Subscriber: PUPEA-43681 / ZALDI HADIANSYAH		Bank A/C :	PUTRA PERKASA ABADI BANK MANDIRI (KPO) -0310004962372							
	Claimant: Opt : F469/NN/SCP/0500-015										
	PUPEA-43681/ZALDI HADIANSYAH	2025121904609078	Inpatient	KLINIK UTAMA PERMATA MEDIKA	13-Dec-2025	17-Dec-2025					
				A01.0-AA99221.3 -PHYSICIAN- GP VISIT DURING HOSPITALIZATION			1.00	140,000.00	140,000.00	0.00	
				A01.0-AA500012.9 -ADMINISTRATION CHARGES FOR INPATIENT CASE			1.00	1,709,600.00	1,709,600.00	0.00	
				A01.0-AA500015.9 -DIAGNOSTIC & LABORATORIUM EXAMINATION			1.00	125,000.00	125,000.00	0.00	
				A01.0-AA500006.3 -PHYSICIAN-SPECIALIST VISIT DURING HOSPITALIZATION			5.00	850,000.00	780,000.00	70,000.00	NPA-13X
				A01.0-AA99244.1 -ROOM & BOARD			5.00	3,000,000.00	2,500,000.00	500,000.00	NPA-13X
							SUB TOTAL :	5,824,600.00	5,254,600.00	570,000.00	
							TOTAL :	5,824,600.00	5,254,600.00	570,000.00	

NIK 24000704 Date Paid 29-Dec-2025

Kantor Pusat:
World Trade Centre 3
Jalan Jenderal Sudirman Kav. 29-31
Jakarta Selatan 12920, Indonesia
Corporate Number : +62 21 2926 8888



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Status					From	To	Qty			
NPA-13X	: MX PER VISIT LMT				GRAND TOTAL:	1	CLAIM(S)	5,824,600.00	5,254,600.00	570,000.00

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TOTAL PAYABLE :	1 CLAIM(S)	5,824,600.00	5,254,600.00	570,000.00
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