

# Insurance Claim Document

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Claim ID: C1089

Patient Name: Ananya Mehta

Claim Date: 19-08-2025

Address: 81 Lake Road, Hyderabad

Status: Rejected

Physician: Dr. I. Deb

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Description: Orthopedic imaging and fracture management.

Procedure Code: ORTHO-301

Amount: INR 29000