# Eligibility Details



AIVIE PEREZ BERNARDINO,784-1998-2704217-9
Effective from : **07-Oct-2022**to **06-Jun-2023**at Medgulf
Required Treatment is OutPatient
**Reference No: R-000000186227779**
**Request Date: 25-May-2023 20:10:19**

NAS NAS

Eligible

Exceptional Case Selected : **Yes**

## Value Network [Applicable Tariff: Value Network]

- Referral required :**Specialist Visit Subject to GP Referral Only**
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- Copay 20% Max 30.00 AED applicable for : Consultation / Evaluation and Management
- Copay 20% applicable for :Dental Emergency

## Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Breast Cancer Screening, C.T Scan, Child Vaccinations - Mandatory, Chronic Drugs, Diagnostics NEC, Endoscopy, Hearing Test , Immunomodulators, Laboratory, M.R.I, Non-surgical minor proced ...
See More

## Attachments

- Applicable procedure
- Exclusions
- Consultation / Claim Form
- Prescription Form

Ask for Authorization

Referral Document