



ASZIDAH SARIPADA ARUMPAC,784-1991-7308054-2 ⓘ
Effective from : 01-Apr-2023to 31-Mar-2024at Noor Takaful
Required Treatment is OutPatient
Reference No: R-000000189673048
Request Date: 16-Jun-2023 10:01:05



Eligible

 Exceptional Case Selected : **Yes**

 Value Network [Applicable Tariff: Value Network]

- > Referral required :**Specialist Visit Subject to GP Referral Only**
- > Selected health plan pharmacy coverage is limited to DHA/Shifa Formulary medications , please make sure to select from the enlisted drug products to avoid further rejections
- > Copay 20% Max 25.00 AED Consultation / Evaluation and applicable for : Management
- > Not covered on direct billing :Teleconsultations

 Approval Requirements

Approval required for all treatment related to:
Acute Drugs, C.T Scan, Chronic Drugs, Immunomodulators, M.R.I, Physiotherapy, Vitamins
Encounter has aggregate net amount AED 100.00 or above for all other services excluding consultation requires approval.
Accidental Death, Breast Cancer Screening, Child Vaccinations - Mandatory, Diabetic Consumables, Diagnostics NEC, Endoscopy,

 Attachments

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

☒ Ask for Authorization

 Referral Document