



M SHAHER ALRAMMO,784-1983-9503829-6 ⓘ
Effective from : 21-Feb-2023to 20-Feb-2024at Union Insurance
Required Treatment is OutPatient
Reference No: R-000000190011319
Request Date: 18-Jun-2023 13:24:16



Eligible



Restricted Network [Applicable Tariff: Restricted Network]

- > **Waiting** Member has pre-existing and chronic waiting period
Period : of 365 days applicable till 20-Feb-2024
- > **Referral required** **No referral required for specialist consultation**
- > **Copay 20% Max 50.00 AED** Consultation / Evaluation and applicable for : Management
- > **Copay 20% applicable** Dental Emergency, Hearing Test , Visior for : Test

☑ Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Breast Cancer Screening, C.T Scan, Chronic Drugs, Diabetic Consumables, Endoscopy, Hearing Test , Immunomodulators, M.R.I, Orthotics, PET Scan, Physiotherapy, Pre-Op Tests, Rehabilitation ... [See More](#)
Encounter has aggregate net amount AED 700.00 or above for all other services excluding consultation requires approval.

📎 Attachments



Applicable procedure



Exclusions



Consultation / Claim Form



Prescription Form

☑ Ask for Authorization

📄 Referral Document