









Ghaith Salem Albalooshi,6510462869503 ① Effective from : 01-Jan-2023to 31-Dec-2023at ENAYA Required Treatment is OutPatient Reference No: R-000000202434154 Request Date: 11-Sep-2023 13:18:07





Platinum [Applicable Tariff: ENAYA Platinum]

Copayment: 10%

- > Referral required : No referral required for specialist consultation
- > Copay 50% applicable for :Lasik Surgery, Hearing Aid
- > Not covered on direct billing : Child Vaccinations Mandatory
- Copay 5% applicable for :Acute Drugs, Chronic Drugs, Immunomodulators, Supplements, Vitamins
- > Copay 50% Max 3,000.00 AED applicable for : Durable Medical Equipments, Orthotics
- > Branded Copay 10% applicable for Acute Drugs, Chronic Drugs, Vitamins, Supplements, Immunomodulators

✓ Approval Requirements

Approval required for all treatment related to:

Acute Drugs, Adult Vaccinations - Additional, Breast Cancer Screening, C.T Scan, Child Vaccinations - ${\it Mandatory}, {\it Chronic Drugs}, {\it Circumcision}, {\it Dialysis}, {\it Dietician Services}, {\it Endoscopy}, {\it Hearing Aid}, {\it Horm} \dots$

See More

 $Encounter\ has\ aggregate\ net\ amount\ AED\ 1,000.00\ or\ above\ for\ all\ other\ services\ excluding\ consultation$ requires approval.

Adult Wellness, Consultation / Evaluation and Management, Diagnostics NEC, Laboratory, Non-surgical minor

Attachments

Pre-Auth protocols

Exclusions

Consultation / Claim Form

Prescription Form

Ask for Authorization

1 Referral Document

Please allow browser pop-ups in order to see the report.