



ASZIDAH SARIPADA ARUMPAC,784-1991-7308054-2 ⓘ

Effective from : 01-Apr-2023to 31-Mar-2024at Noor Takaful

Required Treatment is OutPatient

Reference No: R-000000207524485

Request Date: 12-Oct-2023 09:47:25



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 Management applicable for :
- > 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

📎 Attachments



Applicable procedure



Exclusions



Consultation / Claim Form



Prescription Form

☑ Ask for Authorization

📄 Referral Document