



MOHAMED SHAZNY,784-1999-7648687-0 ⓘ
Effective from : 01-Nov-2023to 31-Oct-2024
at Qatar Insurance Company
Required Treatment is OutPatient
Reference No: R-000000211076779
Request Date: 01-Nov-2023 16:11:16



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 25.00 AED Consultation / Evaluation and Management applicable for :
- > Copay 20% applicable for : Dental Emergency, Hearing Test , Vision Test

☑ Approval Requirements

Approval required for all treatment related to:
Acute Drugs, C.T Scan, Chronic Drugs, Endoscopy, Immunomodulators, M.R.I, PET Scan, Physiotherapy, Vitamins
Encounter has aggregate net amount AED 100.00 or above for all other services excluding consultation requires approval.

📎 Attachments



Applicable procedure



Exclusions



Consultation / Claim Form



Prescription Form

☑ Ask for Authorization

📎 Referral Document