









EHTISHAM .,784-2002-7806876-0 ③

Effective from: 01-Nov-2023to 31-Oct-2024

at Qatar Insurance Company Required Treatment is OutPatient Reference No: R-000000211168333 Request Date: 02-Nov-2023 09:07:56







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 applicable for: Management
- Copay 20% applicable Dental Emergency, Hearing Test , Visior Test for:

✓ 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.

Adult Vaccinations - Mandatory, Breast Cancer Screening, Child Vaccinations - Mandatory, Diabetic Consumables, Diagnostics NEC,

Attachments

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

Ask for Authorization

1 Referral Document

