Eligibility Details













at Qatar Insurance Company
Required Treatment is OutPatient
Reference No: R-000000212216977
Request Date: 07-Nov-2023 21:37:53







Super-Restricted Network [Applicable Tariff: Super-Restricted Network]

- Referral required No referral required for specialistconsultation
- Copay 20% Max 50.00 AED applicable for:

Consultation / Evaluation and Management

Approval required for all treatment related to:

Acute Drugs, Breast Cancer Screening, C.T Scan, Chronic Drugs,
Diabetic Consumables, Dialysis, Endoscopy, Hearing Test,
Immunomodulators, M.R.I, PET Scan, Physiotherapy, Pre-Op Tests,
Prostate Cancer ... 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

1 Referral Document

