











Rashid Adel Alzadjali,784-2008-7925495-9 ①

Effective from: 01-Jan-2023to 31-Dec-2023at ENAYA

Required Treatment is OutPatient Reference No: R-000000213995449 Request Date: 18-Nov-2023 10:51:15





⇔ 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% Acute Drugs, Chronic Drugs, applicable for: Immunomodulators, Supplements, Vitamins
- > Copay 50% Max 3,000.00 AED Durable Medical Equipments, applicable for: Orthotics
- > Branded Copay 10% Acute Drugs, Chronic Drugs, Vitamins,

✓ Approval Requirements

Approval required for all treatment related to:

Acute Drugs, Adult Vaccinations - Additional, Breast Cancer Screening, C.T Scan, Child Vaccinations - Mandatory, Chronic Drugs, Circumcision, Dialysis, Dietician Services, Endoscopy, Hearing Aid, Horm ... See More

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

Attachments

Pre-Auth protocols

Exclusions

Consultation / Claim Form

Prescription Form

Ask for Authorization

1 Referral Document



