AMBER MAITA KAMHUNGIRA,784-2023-7212134-7

Effective from : **16-Mar-2023** to **15-Mar-2024** at Noor Takaful

Required Treatment is OutPatient

Reference No: R-000000223176535

Request Date: 13-Jan-2024 12:28:33

NAS NAS

Eligible

Exceptional Case Selected : **Yes**

Value Lite OP - DXB & NE [Applicable Tariff: Value Network]

- Referral required :**Specialist Visit Subject to GP Referral Only**
- Copay 20% Max 25.00 AED applicable for : Consultation / Evaluation and Management
- Copay 20% applicable for : Laboratory, Ultrasound, X-Ray, C.T Scan, M.R.I, Radiology NEC, Physiotherapy, PET Scan, Endoscopy, Diagnostics NEC
- Copay 30% applicable for : Acute Drugs, Chronic Drugs, Immunomodulators

Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Adult Vaccinations - Mandatory, Breast Cancer Screening, C.T Scan, Child Vaccinations - Mandatory, Chronic Drugs, Diabetic Consumables, Diagnostics NEC, Endoscopy, Hearing Test , Immunomo ...

See More

Attachments

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

Ask for Authorization

Referral Document