



Ali Hasan,784-2018-3739841-7 ⓘ
Effective from : 01-Jun-2023to 31-May-2024at Fidelity United
Required Treatment is OutPatient
Reference No: R-000000227916505
Request Date: 13-Feb-2024 20:48:24



Eligible



General Network [Applicable Tariff: General Network]

- > Referral required **No referral required for specialist consultation**
- > Copay 20% Max 85.00 AED Consultation / Evaluation and applicable for : Management
- > Copay 20% applicable Acute Drugs, Chronic Drugs, for : Immunomodulators

Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Breast Cancer Screening, C.T Scan, Chronic Drugs, Diabetic Consumables, Endoscopy, Hearing Test , Hormone Replacement Therapy (HRT), Immunomodulators, M.R.I, PET Scan, Physiotherapy, Pre- ... [See More](#)
Encounter has aggregate net amount AED 1,500.00 or above for all other services excluding consultation requires approval.

Attachments



Applicable procedure



Exclusions



Consultation / Claim Form



Prescription Form

☒ Ask for Authorization

☐ Referral Document