



ARNEL MANANGUIT JAVILLONAR,784-1982-2061368-5 ⓘ  
Effective from : 07-May-2023to 06-May-2024at Dubai Insurance  
Required Treatment is OutPatient  
Reference No: R-000000229117216  
Request Date: 21-Feb-2024 19:41:49



Eligible



Restricted Network [Applicable Tariff: Restricted Network]

- > Referral required **No referral required for specialist consultation**
- > Copay 20% Max 50.00 AED      Consultation / Evaluation and applicable for :      Management
- > Copay 20% applicable      Dental Emergency, Hearing Test , Visior for :      Test
- > Copay 100% applicable for :Palliative

Approval Requirements

Approval required for all treatment related to:  
Acute Drugs, Breast Cancer Screening, C.T Scan, Chronic Drugs, Circumcision, Diabetic Consumables, Dialysis, Endoscopy, Hearing Test , Hormone Replacement Therapy (HRT), Immunomodulators, M.R.I, PET S ... [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
- Overseas Pre-Auth protocols
- Consultation / Claim Form
- Prescription Form

☒ Ask for Authorization

Referral Document