











JOY KENDI KIOME,784-1995-6980640-1 **(i)**

Effective from: 01-Nov-2023to 31-Oct-2024at Qatar Insurance Company

Required Treatment is OutPatient Reference No: R-000000230890945 Request Date: 04-Mar-2024 17:47:20







Exceptional Case Selected: Yes

♣ Value Network [Applicable Tariff: Value Network]

- > Referral required : Specialist Visit Subject to GP Referral Only
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- > Copay 20% Max 25.00 AED applicable for : Consultation / Evaluation and Management
- Copay 20% applicable for :Dental Emergency, Hearing Test , Vision Test

✓ Approval Requirements

Approval required for all treatment related to:

 ${\sf Acute\ Drugs,\ C.T\ Scan,\ Chronic\ Drugs,\ Endoscopy,\ Immunomodulators,\ M.R.I,\ PET\ Scan,\ C.T.\ Sca$ Physiotherapy, Vitamins

Encounter has aggregate net amount AED 100.00 or above for all other services excluding consultation requires approval.

 $Adult\ Vaccinations\ -\ Mandatory,\ Breast\ Cancer\ Screening,\ Child\ Vaccinations\ -\ Mandatory,\ Diabetic$ $Consumables, Diagnostics \, NEC, \, Hearing \, Test \, , \, Laboratory, \, Non-surgical \, minor \, procedures, \, Paparamondal \, Consumables \, and \, Con$

Attachments

Applicable procedure

Exclusions

Consultation / Claim Form

Prescription Form

Please allow browser pop-ups in order to see the report.

Ask for Authorization

1 Referral Document