



ANAND MOHAN PRASAD,9ECC-1A4C-DCD4-2DEA ⓘ
Effective from : 01-Nov-2023to 31-Oct-2024
at Qatar Insurance Company
Required Treatment is OutPatient
Reference No: R-000000231168409
Request Date: 06-Mar-2024 12:17:58



Eligible

 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 Consultation / Evaluation and
applicable for : Management
- > Copay 20% applicable Dental Emergency, Hearing Test , Visior
for : Test

 Approval Requirements

Approval required for all treatment related to:
Acute Drugs, C.T Scan, Chronic Drugs, Endoscopy,
Immunomodulators, M.R.I, PET Scan, 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,

 Attachments

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

☒ Ask for Authorization

 Referral Document