



EVE GEEROSS SALIDO CARULLO,784-1986-5130943-1 ⓘ

Effective from : 27-Oct-2023to 07-Jul-2024

at Qatar Insurance Company

Required Treatment is OutPatient

Reference No: R-000000235986952

Request Date: 12-Apr-2024 19:14:38







Eligible

Workers Network [Applicable Tariff: Workers Network]

> Referral required :
> Copay 20% Max 25.00 AED applicable for :

No referral required for specialist consultation
Consultation / Evaluation and Management

Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Breast Cancer Screening, C.T Scan, Chronic Drugs, Diabetic Consumables, Endoscopy, Hearing Test , Immunomodulators, M.R.I, PET Scan, Physiotherapy, Pre-Op Tests, Prostate Cancer Screening ...
Encounter has aggregate net amount AED 700.00 or above for all other services excluding consultation requires approval.

See More

- Attachments
- Applicable procedure

Exclusions

Consultation / Claim Form

Prescription Form

☒ Ask for Authorization

☐ Referral Document