

KHALED GAMALELDIN MOHAMED ELSHAL,784-1983-9513151-3

Effective from : 01-May-2023to 30-Apr-2024

at Qatar Insurance Company

Required Treatment is OutPatient

Reference No: R-000000237782269

Request Date: 26-Apr-2024 13:55:05

Eligible

Comprehensive Network [Applicable Tariff: Comprehensive Network]

- > Referral required : **No referral required for specialist consultation**
- > Copay 10% Max 50.00 AED applicable for : 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, Dialysis, Endoscopy, Hearing Aid, Hearing Test , Hormone Replacement Therapy (HRT), Immunomodulators, M.R.I, Occupa ... [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