



BISHAL MAGAR SUB LAL GURMACHHANE,784-1999-1538512-6 ⓘ
Effective from : 25-Jan-2024to 24-Jan-2025at Takaful Emarat
Required Treatment is OutPatient
Reference No: R-000000238229983
Request Date: 29-Apr-2024 14:30:51



Eligible



Workers Network [Applicable Tariff: Workers Network]

- > Referral required **No referral required for specialist consultation**
- > Copay 10% applicable for : Consultation / Evaluation and Management, Laboratory, Ultrasound, X-Ray, C.T Scan, M.R.I, Radiology NEC, Physiotherapy, PET Scan, Endoscopy, Diagnostics NEC
- > Copay 10% applicable for : Acute Drugs, Chronic Drugs, Immunomodulators, Vitamins

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 ... [See More](#)
Encounter has aggregate net amount AED 700.00 or above for all other services excluding consultation requires approval.

Attachments



Applicable procedure



Exclusions



Consultation / Claim Form



Prescription Form

☒ Ask for Authorization

☐ Referral Document