NEETHU VAILOPILLY RAVINDRAN,784-1991-3912930-0

Effective from : **01-Apr-2024** to **31-Mar-2025** at Watania Takaful Family

Required Treatment is OutPatient

Reference No: R-000000258398821

Request Date: 10-Sep-2024 11:53:43

Eligible

General Network [Applicable Tariff: General Network]

Copayment : 20%

- Referral required : **No referral required for specialist consultation**
- NIL copay for any Cancer Related Treatments
- Not covered on direct billing : Teleconsultations
- Copay 30% applicable for : Acute Drugs, Chronic Drugs, Immunomodulators, Supplements, 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 , Hormone Replacement Therapy (HRT), Immunomodulators, M.R.I, PET Scan, Physiotherapy, Pre- ... 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