









MOHAMED IBRAHIM MOHAMED MOUSSA, 784-1980-3652837-4 ①

Effective from: 01-Aug-2024to 31-Jul-2025 at Al Sagr National Insurance Company Required Treatment is OutPatient Reference No: R-000000259292965

Request Date: 16-Sep-2024 01:50:05







Restricted Network [Applicable Tariff: Restricted Network]

> Referral required No referral required for specialist consultation

> Copay 20% Max 50.00 Consultation / Evaluation and Management, Teleconsultations AED applicable for:

Copay 10% Acute Drugs, C.T Scan, Chronic Drugs, Diagnostics Max 50.00 NEC, Endoscopy, Immunomodulators, Laboratory, AED M.R.I, PET Scan, Radiology NEC, Ultrasound, applicable Vitamins, X-Ray

for:

Approval Requirements

Approval required for all treatment related to:

Breast Cancer Screening, C.T Scan, Circumcision, Diabetic Consumables, Endoscopy, M.R.I, PET Scan, Physiotherapy, Vision Test

Encounter has aggregate net amount AED 700.00 or above for all other services excluding consultation requires approval.

Acute Drugs, Adult Vaccinations - Mandatory, Child Vaccinations -

Attachments

Applicable procedure

Exclusions

Consultation / Claim Form

Prescription Form

1 Referral Document

