



AWAD OMER ABDELLATIF ELFADIL,A21F-EFE2-C2CG-JCDE ⓘ
Effective from : 01-Aug-2024 to 31-Jul-2025
at Al Sagr National Insurance Company
Required Treatment is OutPatient
Reference No: R-000000265447318
Request Date: 22-Oct-2024 21:03:56



Eligible



Restricted Network [Applicable Tariff: Restricted Network]

- > Referral required **No referral required for specialist consultation**
:
> Copay 20% Max 50.00 AED applicable for : Consultation / Evaluation and Management, Teleconsultations
> Copay 10% Max 50.00 AED applicable for : Acute Drugs, C.T Scan, Chronic Drugs, Diagnostics NEC, Endoscopy, Immunomodulators, Laboratory, M.R.I, PET Scan, Radiology NEC, Ultrasound, Vitamins, X-Ray

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

☒ Ask for Authorization

☐ Referral Document